



**PROGRAM DEVELOPMENT ACROSS
THE CONTINUUM OF CARE
FOR DEAF, DEAFBLIND AND HARD OF
HEARING PERSONS**



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Volunteers of America of Minnesota

Position Statement: National Association of the Deaf

People who are deaf or hard of hearing are an underserved cultural and linguistic population within the nation's mental health system. Tragically, normal adjustment, cultural, language and communication issues are often mistaken for developmental delays, mental illness or mental retardation.

Position Statement: National Association of the Deaf

RECOMMENDATIONS

- The quality of mental health services to deaf individuals equal to those of hearing individuals
- Culturally and linguistically affirmative approaches
- Provided by culturally and linguistically competent providers
- Public and private mental health services available in all states

Position Statement: National Association of the Deaf

RECOMMENDATIONS

- Awareness of and sensitivity to the cultural and linguistic factors that impact the quality of the delivery of mental health service to DHH
- Services based on the culturally competent identified and assessed needs of this population
- Public and private providers work together to develop an array of appropriate and accessible cultural and cross cultural services across a continuum of care

Position Statement: National Association of the Deaf

Skills of culturally and linguistically competent providers

- Ability to communicate directly – ASL
- Appropriate use of services and adaptive technology as is best identified by the consumer (listening devices, certified interpreters, real-time captioning)
- Intensive and extensive awareness of the cultural and linguistic difference and psychological impact associated with hearing loss



DHH - NICHE POPULATION



Learning about the Deaf and
Hard of Hearing

Definitions of Hearing Loss

- Hard of Hearing
 - Use of auditory channel
- Late-Deafened
 - Auditory channel not primary
- Late-Deafened
 - Loss after development of language
 - Severe to profound
- Deafblind
 - Dual sensory loss
 - Not total lack of vision



Demographics: Prevalence of Hearing Loss



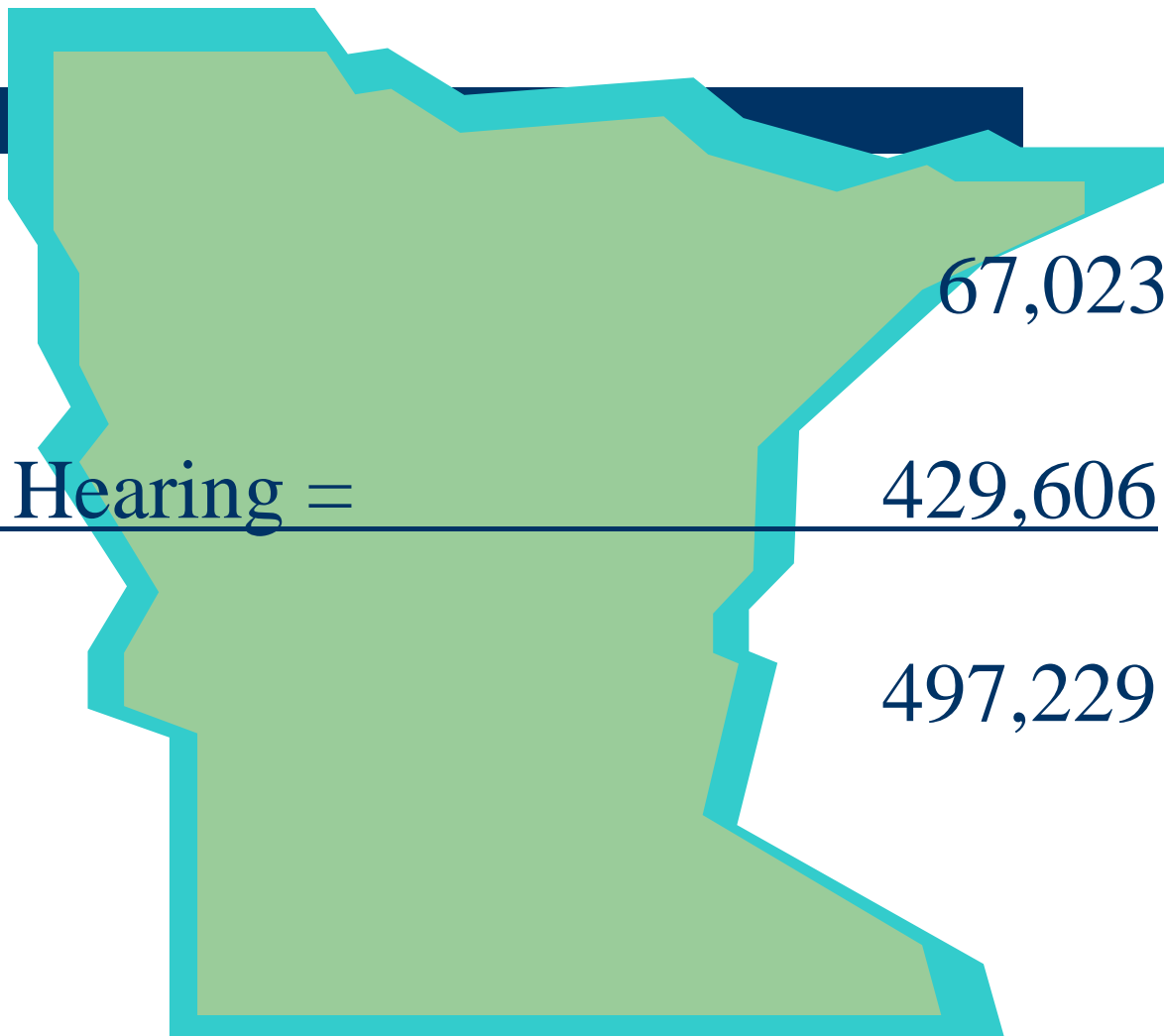
- One of the most chronic conditions in the U.S.
- One out of every 10 people in the U.S. experiences a hearing loss
- One out of every three persons between the ages of 65 and 75
- One out of every two persons over the age of 75
- Numbers projected to increase 2010 - 2030

Minnesota Demographics

Deaf = 67,023

Hard of Hearing = 429,606

Total 497,229



Minnesota Demographics (2004-2005)

Students with Hearing Loss (by Age)

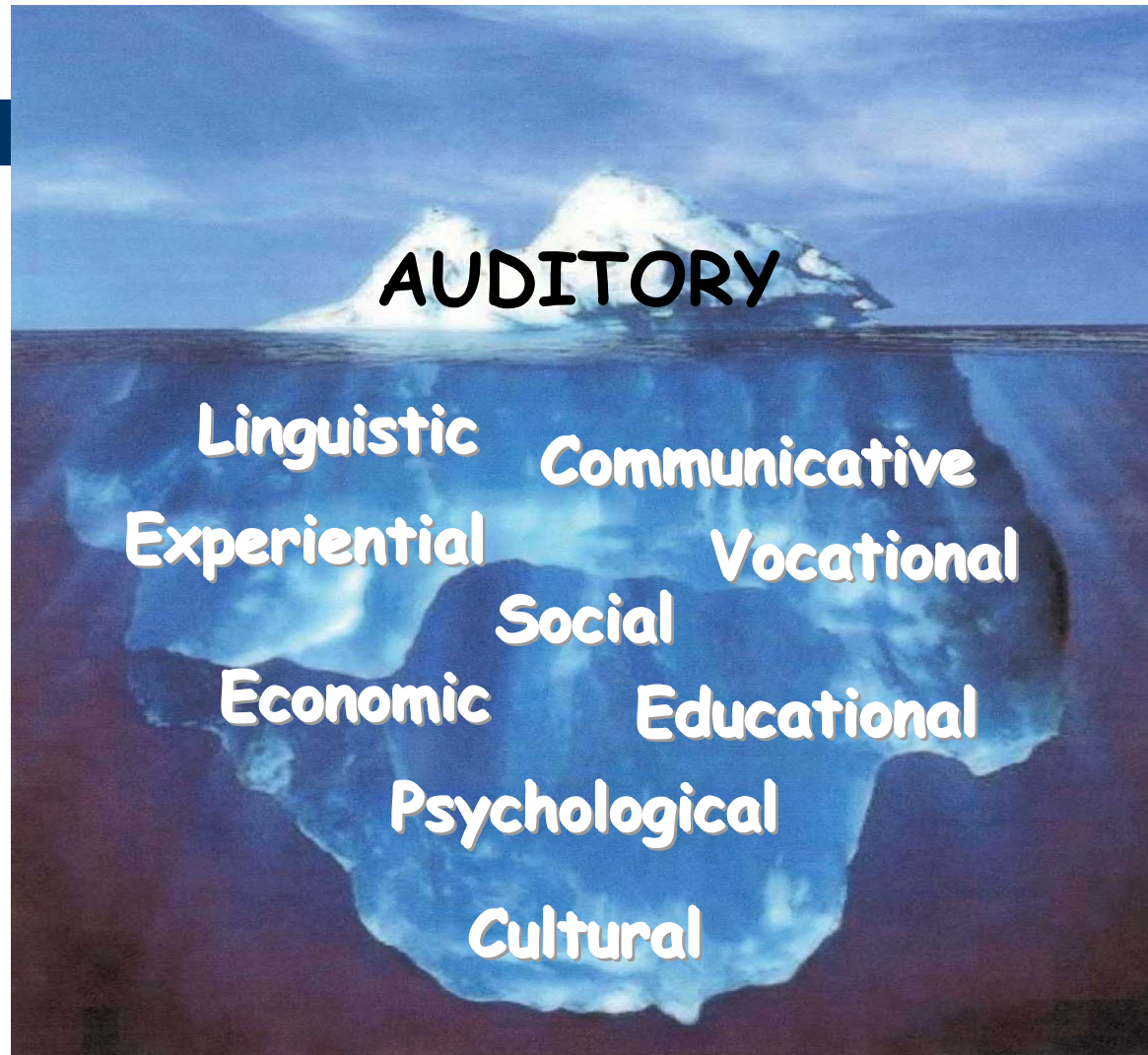
- Under 3 45
- 3 to 5 96
- 6 to 9 217
- 10 to 13 291
- 14 to 17 263
- 18 and Up 108

Minnesota Demographics (2004-2005)

Students with Hearing Loss (by Degree)

● Normal	(<27dB)	209
● Mild	(27 to 40 dB)	162
● Moderate	(41 to 55 dB)	131
● Mod to Severe	(56 to 70 dB)	87
● Severe	(71 to 90 dB)	75
● Profound	(>91 dB)	184

Hidden Impacts of a Hearing Loss



Impacts of Hearing Loss

- Language
- Communication
- Family
- Learning
- Social/Emotional Development
- Mental Health Treatment

Impacts: Language

- Speech
- Reading
- Grammar and Pragmatics
- Vocabulary
- Written Language
- Multiple Languages
- American Sign Language

Impacts: Communication

- Incidental learning
- Family
- Peers
- Classroom
- Social situations (larger environment)
- Labels and explanations for abstract concepts
- Sense of control in the environment
- Manual forms of communication

Impacts: Family

- Relationships
- Discipline
- Expectations
- Socialization Needs
 - Friends/events might be far away
- Always different, the outsider

Impacts: Learning

- Attention
- Fatigue
- Sound Field
- Environmental Distraction
- Classroom Interaction
- Interpreters
- Interruptions

Impacts: Social/Emotional Development

- Self-Esteem
 - We learn to differentiate ourselves from others by developing self esteem (how well a person likes him/herself)
- Healthy Self-Esteem (Mary Bauer, 1994)
 - A sense of connectedness
 - A sense of uniqueness
 - A sense of power
 - A sense of models

Impacts: Social/Emotional Development

- Feelings Identification
 - Blatant
 - Subtle
- Affective Congruence
- Seeking Emotional Support
 - Friends vs Parents
 - Teachers vs Parents
 - Dorm Staff vs Parents

Impacts: Mental Health Treatment

- Misdiagnosis (DD, ADHD, PDD, etc)
- Therapy
 - Stigma
 - Access/Limitations
- Assessment

VOA-MN Continuum of Care

Prevention

Outpatient

In-home/school

Intensive

Residential

Family Focus

MH Clinics

Home/School Based

Intensive
DBT

DHH
RTC

Responding to the Need

- A mental health delivery system for D/HH children and their families.
- A local residential treatment center for D/HH children
- A program to prevent child abuse and neglect for at risk D/HH parents

DHH Children's Mental Health Delivery System

- School-based services
- In-home services
- Co-located services – State Academy
- Tele-health
- Intensive Out-patient DBT
- Collaboration and Coordination

DHH Children's Mental Health Delivery System

- History
 - Identifying the need
 - Special Ed School System/Hennepin County/Private-VOA-MN
 - DHH Teacher's vision
 - County Contract and Pilot Project –2000
 - Continued Success 2000-2004

DHH Children's Mental Health Delivery System

- Expansion
 - DHH State Grant
 - Increased staff from 1 to 4
 - Added service areas
 - Presentations to community
 - 2006 served 166 children

DHH Children's Mental Health Delivery System

- Services
 - Individual Therapy
 - Family Therapy
 - Social Skills Groups
 - Presentations to community
 - Coordination and Collaboration

DHH Children's Mental Health Delivery System

- Currently
 - 3rd year of state grant funds
 - 6 ASL Therapists
 - Expanded services to metro area and greater MN
 - Providing therapy and psychiatry to greater MN through tele-mental health

DHH Children's Mental Health Delivery System

- Funding Streams
 - Medicaid
 - Private Insurance
 - LCTS Funds through County
 - County Funds/Contracts
 - State DHH Grant Funds
 - School Funds/Contracts

DHH Children's Mental Health Delivery System

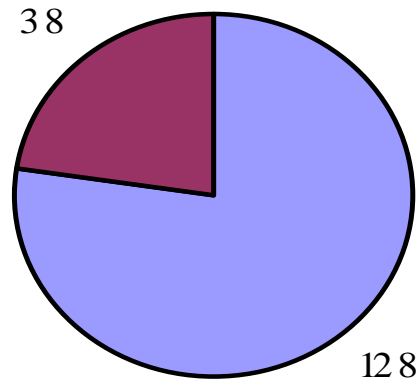
- Funding Streams (continued)
 - United Way
 - Foundations
 - Private Donations

DHH Children's Mental Health Delivery System

- Special Issues
 - Use of Sign Language Interpreters
 - Prevalence of immigrant children with deafness and hearing loss
 - Use of foreign language interpreters

Children's MH Demographics

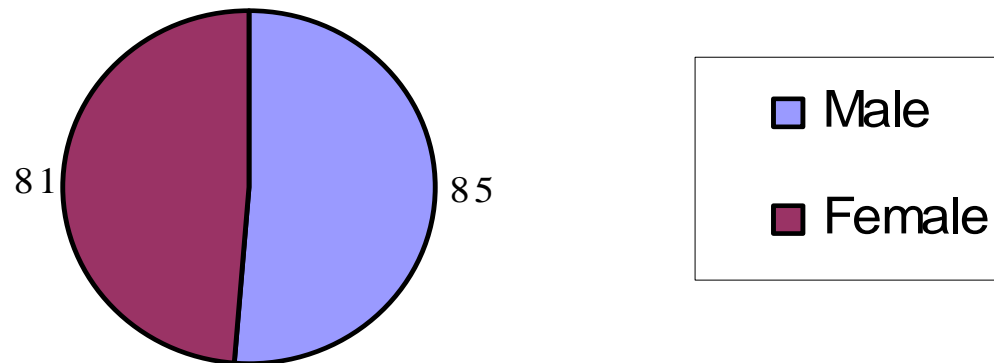
AGE of clients served



- # of children (age 0-17) served
- # of adults (age 18-64) served

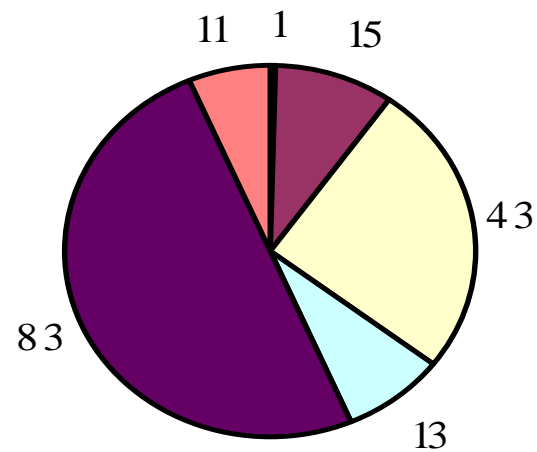
Children's MH Demographics

GENDER of clients served



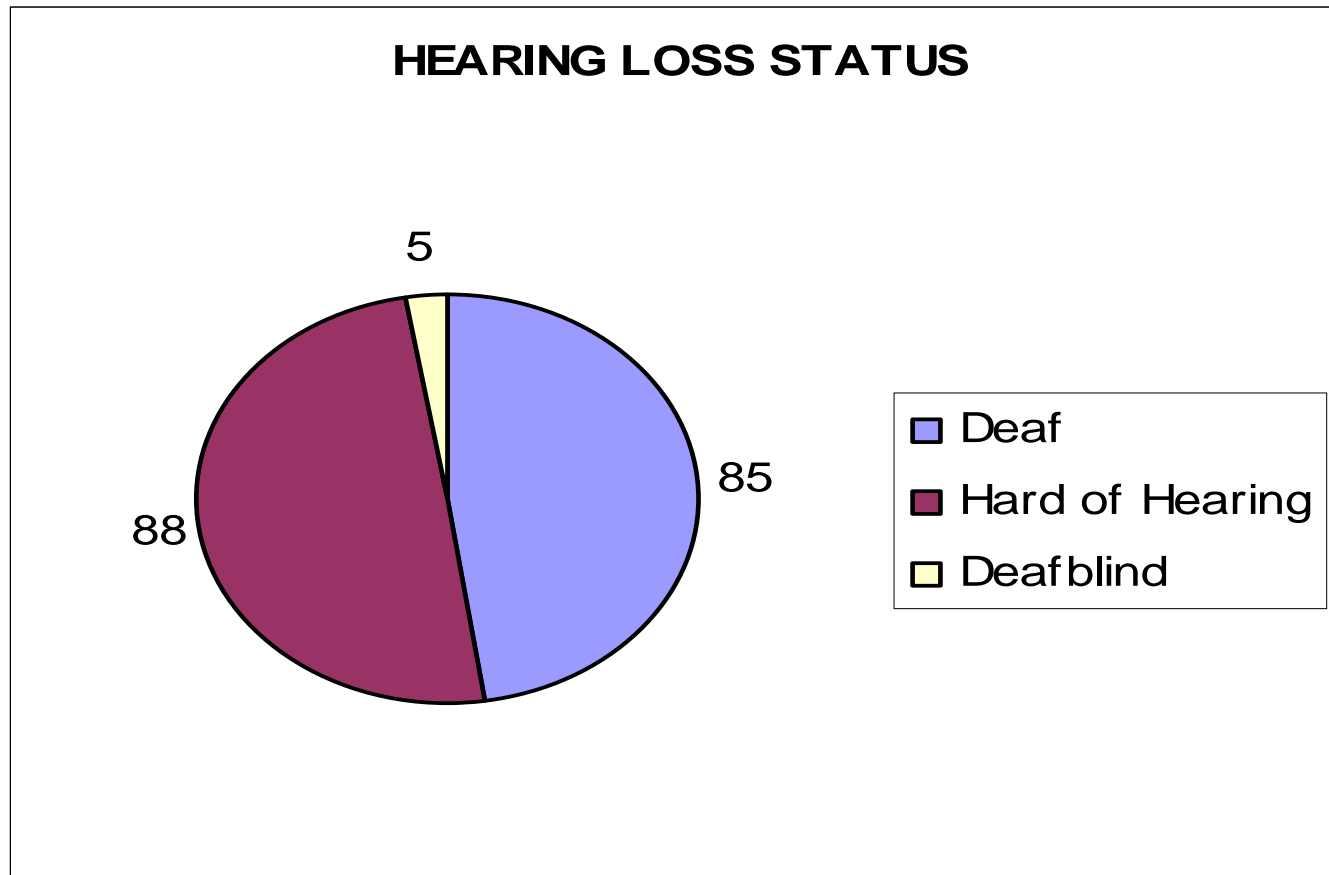
Children's MH Demographics

ETHNICITY of clients served

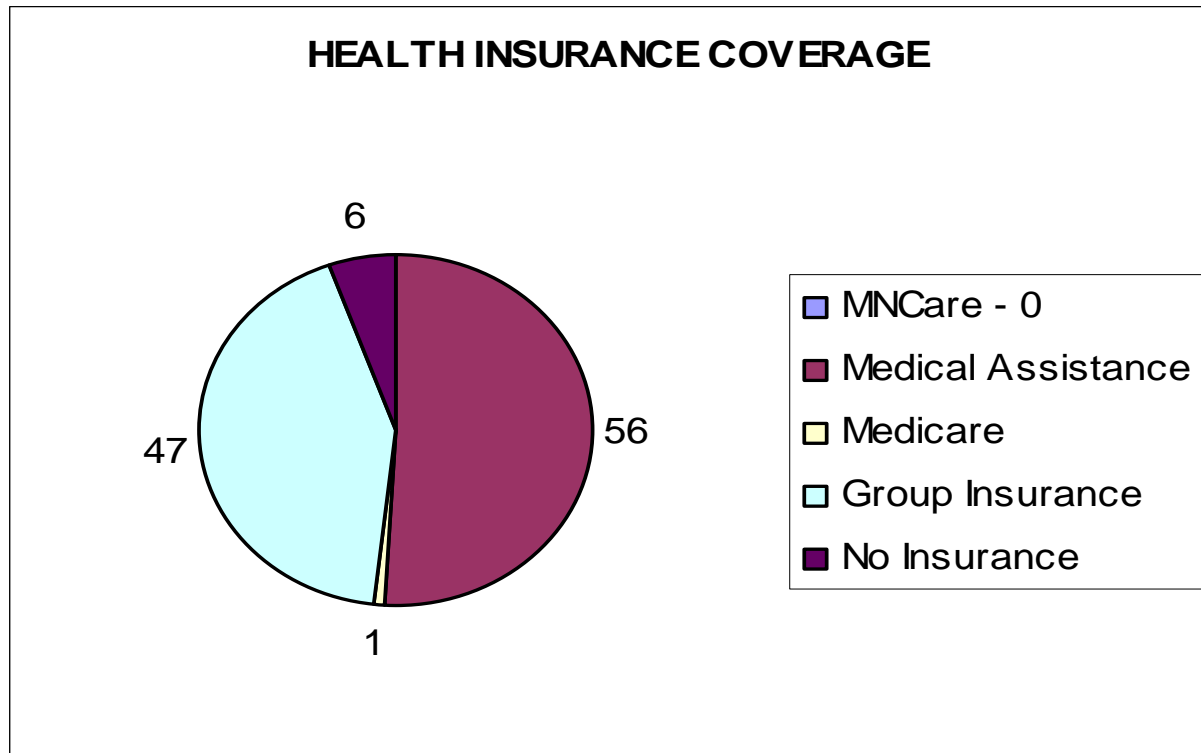


- American Indian
- Asian American
- African American
- Hispanic/Latino
- Caucasian
- Other

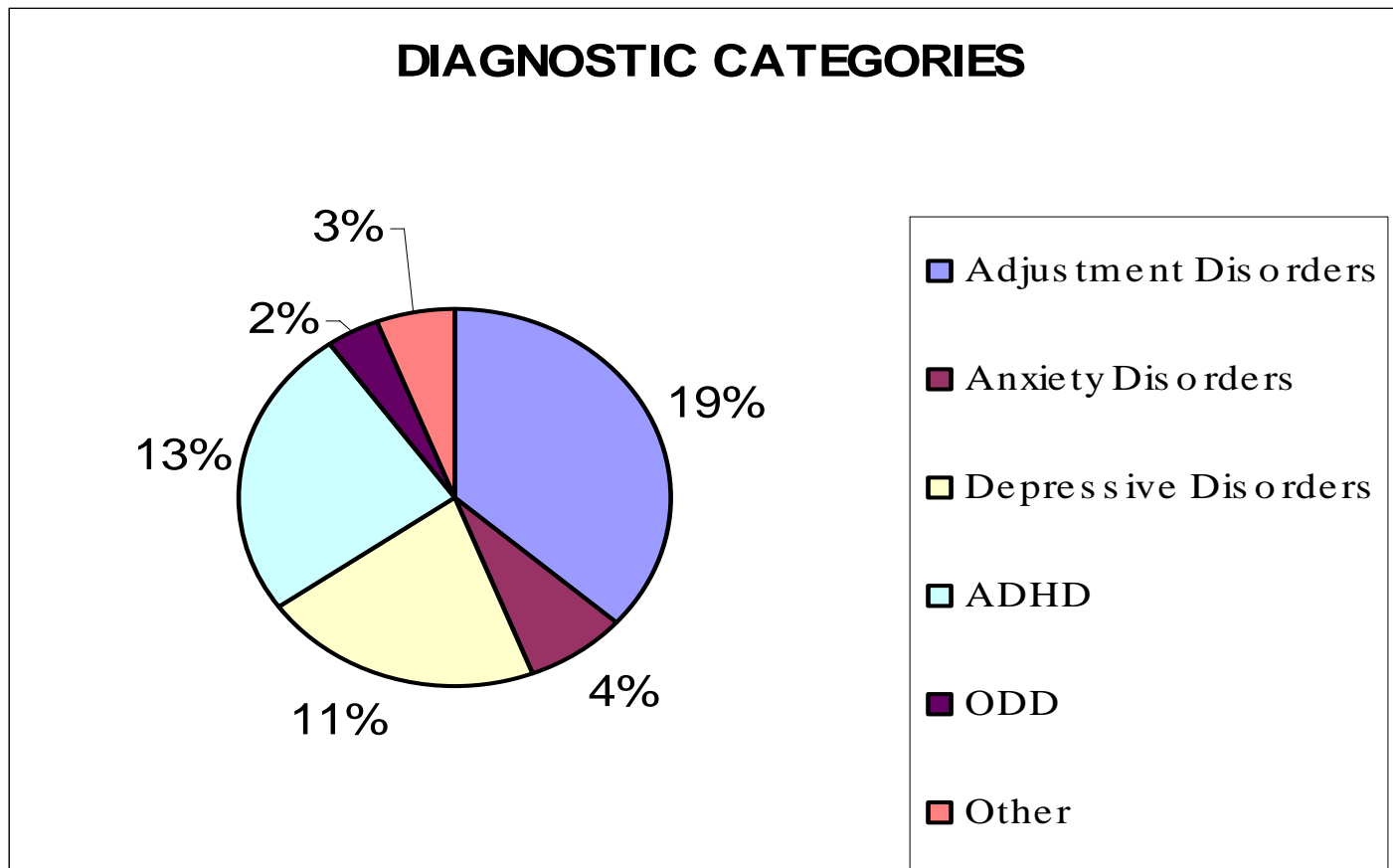
Children's MH Demographics



Children's MH Demographics



Children's MH Demographics



DHH Children's Mental Health

What have we learned?

Key elements for a successful partnership

- Shared mission/values
- Coordination and Collaboration
- RESPECT
- Communication
- Compatible professional styles
- Cultural competence

DHH/RTC

- Need Identified
- Private/Public Partnership Sought
 - MSAD Space and Need
 - VOA – RTC Experience, responsive to need
- Task Force Developed - 2005
 - MSAD
 - DHS DHH Division

DHH/RTC

- Task Force (continued)
 - DHS Children's Mental Health
 - Parents
 - VOA
 - Deaf Community

DHH/RTC

- Task Force Agenda
 - Substantiate the need
 - Identify current students with needs
 - Known placement in out of state RTC's
 - County social service identification
 - Parental identification
 - School identification
 - Regional identification

DHH/RTC

- Task Force Agenda
 - Define costs of building restoration
 - Lobby for Legislative approval/Funding
 - Marketing/Education
 - Deaf Community
 - DHH Professionals
 - DHH Consumer Groups

DHH/RTC

- Task Force Agenda
 - Marketing/Education
 - MSAD Teachers and staff
 - MSAD Dormitory Staff
 - Local Faribault community
 - Regional Principals/Schools for the Deaf

DHH/RTC

- Task Force Agenda
 - Program Model
 - Midwest Region
 - 15 bed Psychiatric
 - Ages 10-17
 - Severely Emotionally Disturbed
 - 24 hour Specialized Therapeutic Milieu
 - ASL staff and Therapists

DHH/RTC

- Task Force Agenda
 - Program Model
 - Specialized School
 - Individual, group, family therapy
 - Behavior Management
 - Accepting and supportive environment
 - Structured and secure
 - Multi-disciplinary team of staff

DHH/RTC

- Task Force Agenda
 - Program Integration
 - Education/Treatment
 - Policies/procedures/expectations
 - Combined staff training
 - Coordination of services – consistency
 - Gradual re-entry –dorms, classroom
 - Family involvement

DHH/RTC

- Task Force Agenda
 - Responsibility
 - Education-MSAD
 - Food Service –MSAD
 - Maintenance/Utility – MSAD
 - Treatment –VOA
 - Staff –VOA
 - Nursing - Shared

DHH/RTC

- Task Force Agenda
 - Costs
 - Per Diem –higher due to specialized program
 - Costs savings over higher out of state placement
 - Cost set through Host County Contract

DHH/RTC

- Proposed Timeline

- 2008 legislative session-approval of bonding authority
- Final construction specifications – late 2008
- Construction bidding process – early 2009
- Construction – mid to late 2009
- Hiring of staff – Early 2010
- Open RTC – mid 2010

DHH/RTC: Challenges

- Takes time and commitment
- Legislative Issues
- Financial constraints
- Legal issues
- Systemic issues
- Establish an aggressive outreach program

DHH/RTC: What have we learned?

Key elements for a successful partnership

- Commitment to learn each other's systems
- Shared belief in the mission
- Communication
- Respect
- Effective Meetings
- Presentation Teams

Prevention Program: Family Focus Partnership

- Hennepin County Early Childhood Services
- Hennepin County Child Protection
- VOA-MN Mental Health Clinics

Prevention Program: Family Focus

Purpose

Prevent child abuse and neglect of pre-school children of deaf and hard of hearing parents

Prevention Program: Family Focus Serving

- Deaf and Hard of Hearing Adult
- Parent of child under six
- Child(ren) at risk for abuse and neglect
- Reside in Hennepin County

Prevention Program: Family Focus Program

- Parent and Child Development Education
- Assessment of risk factors for maltreatment
- School Preparedness
- Counseling
- Home-based parenting skills sessions
- Case Management
- Navigate community resources
- Support groups

Prevention Program: Family Focus Outcome Indicators

90% of parent(s) completing the program will be able to

- demonstrate ability to sustain and nurture their child(ren)
- provide safety and protection for their child(ren)
- Regulate and manage their child(ren) behavior
- Cope with personal stress and the stress of parenting

Prevention Program: Family Focus Funding

- County Funding
- First Year Start Up Funds
- Foundation Funding

Prevention Program: Family Focus Challenges

- Fee for Service Funding
- Funding for Collaboration and Coordination
- High No Show Rates
- DHH Parent Slow Change Process
- Pre-School Educational Programming

Prevention Program: Family Focus

What have we learned?

Key elements for a successful partnership

- Shared Belief in Mission
- Respect
- Provider Network
- Building efficient systems
- Cultural Competency
- Learning from each other
 - Early childhood
 - DHH

Deaf Culture



Culture

a SET of LEARNED BEHAVIORS of
a GROUP of PEOPLE



Every Culture Has Four Main Elements

- Language
- Values
- Norms
- Traditions



American Sign Language (ASL)

English

- visual-gestural language
 - has a unique set of grammatical and syntactical rules
 - is not abbreviated English
- spoken-written language
 - has a unique set of grammatical and syntactical rules
 - distinct language, different from ASL

American Sign Language



- a visual, spatial language
- incorporates facial expressions
- not auditory or written
- has intonations and inflections
- not a universal language
- has accents and dialects

Values

Deaf People

- Hands / fingers
- Eyes 
- American Sign Language (visual-gestural language)
- TTY 
- Captioned TV

Hearing People

- Mouth / tongue 
- Ears 
- English (spoken language)
- Telephone 
- TV / Radio

Norms

Non-manual behavior

Getting Attention

Open/honest or straightforward talk

Visual Distractions

Children of Deaf Adults (CODA)

- On the fence
- Between two cultures
- Asked to be more mature than their age
- Unique situations and circumstances
- Education
- Social/emotional development

Summary: Program Management

- Responsiveness
- Flexibility
- Willingness to take some risks
- Finding a niche population and filling it
- Building on success

Summary: Working With Community Partners

- Deaf Community
- School Systems
- Teachers of Deaf and Hard of Hearing
- State Academy for the Deaf
- Department of Human Services
- County Departments of Social Services

Summary: Success led to

- Positive Reputation
- State grant funding for expansion
- County funding for expansion
- Quality programming
- Becoming an “expert” in the area of provision of services to D/HH persons



Questions?



THANK YOU

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