

## **Observations and Reflections After Attending “Interpreting Strategies for Individuals Who Are Deaf-Blind” at the Helen Keller National Center**

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Recently I attended “Interpreting Strategies for Individuals Who are Deaf-Blind,” which was a training seminar held at the Helen Keller National Center (HKNC) in New York aimed at professional interpreters. The facilitator was Susan Morgan, who is the project coordinator for the New York Deaf-Blind Collaborative.

Taking the HKNC interpreter training underscored and augmented what I had already learned from the SFSU-CDBS deaf-blind endorsement program. Having completed both, I am now well prepared to teach and sign with learners who are deaf-blind. By the time these students reach my high school class, they may have already lost much of their vision and/or hearing. It is important that these teens be able to connect and communicate with me, their teacher. An intervener or an interpreter may be necessary, but they won’t replace the relationship that I can have with these students, just as I have with all my others. That is so important.

Even with all of the strategies that the endorsement program covered, I was still dubious as to what these children and teens could achieve and what their prospects as adults would be. While at the Helen Keller National Center, however, I met many individuals who opened my eyes. Several were presenters during the training and they shared their life stories and their experiences with interpreters in different situations. Others were trainees in the programs there who we met through casual conversations at meals or between classes. Wow! What stories they shared.

After losing both her sight and hearing, one student participated in a triathlon and has also gone skydiving. Another had no language at all, but acquired tactile signing skills in only six months. All had traveled long distances from their homes to HKNC to get the training they needed in order to live as independent adults. Some were learning mobility and independent living skills, while others were there for vocational training or improving their performance in the professional careers they already had.

Their self-determination and self-advocacy were inspirational. One refused to let one of the interpreters sign to her until the signer changed into a darker colored top, explaining that she could not see without a better contrast. Others would tell us how they needed the signs presented, either closer or farther away, larger or smaller, in a different part of the room or facing a different direction, or in one or both hands.

They expressed their sense of responsibility to their families and their careers. Since one person had just lost his sight, he was getting training so that he could be a better father and help his wife with the children. Another has been a preacher to his deaf community, traveling around California to deaf congregations for years. Since he had lost his eyesight through Usher syndrome, he had come to HKNC for training and then had to hurry back because he still had scheduled preaching engagements to keep. What courage he and others exhibited.

These individuals have encouraged and inspired me so much. Now I know that with the right education, training, and support, our students will be able to do much more than we might imagine.

## **HKNC Training**

*The first part of the HKNC training was conducted online and covered the following topics:*

Unit 1 - Types of Deaf-Blindness, Culture, and Etiquette: This unit covered some of the strategies that we learned in class (e.g., using hand-under-hand, human guide techniques, approaching from the side to introduce yourself, greeting and saying “good-bye” before leaving, and introducing yourself with a name sign and something on your body that they could feel and recognize). It also emphasized showing respect for all of the cultures that the individual might identify with: hearing-sighted, deaf, hard of hearing, blind, deaf-blind, and any ethnicities, nationalities, or religions.

Unit 2 - Understanding Deaf-Blindness, Eye Diseases, and Etiologies

Unit 3 - Modes of Communication: This unit included the various technologies that are available (e.g., large print, braille, amplification systems). It also introduced the various types of signing—ASL, signed English, and one and two handed tactile. Various interpreting styles and positions were demonstrated and how each one accommodates the various types of vision and hearing that our students may have.

Unit 4 - Support Service Providers: This unit explained and demonstrated the responsibilities of three service providers: interveners, support service providers and interpreters.

*The second part consisted of various on-site trainings:*

Human Guide Mobility Training Techniques - For one and a half hours, Sister Bernadette Wynne had us take turns being the guide and the client. While being guided we were wearing blindfolds and earplugs. We experienced walking in the following scenarios: doors, elevators, stairs, and

ramps. Bernie emphasized that when we are finished guiding someone, we cannot just leave them out in the middle of a space. We must bring them to an object that they know and can touch either with their hand or cane. They need to know which way they are facing so they know which way to go after we leave them.

Experiencing Deaf-Blindness - We were all given earplugs and various goggles, each modified to represent a different type of vision impairment. Some goggles represented loss of acuity in varying amounts, while others helped us experience field losses—central, peripheral, and various blind spots. While wearing these, we were given tasks to do with each other. We were two individuals, with dual sensory losses, working together to accomplish various tasks. While one of us might need to sit close because of visual acuity issues, our partner may need to sit farther away because of central vision loss. We quickly learned how important it is to communicate in a way that is visual for those with visual impairments. One type of signing does not fit all. After completing a task, we were to then find another partner and accomplish another task. All communication was done in whatever sign language our partner needed. We began to realize how difficult our students' lives can be when communicating with others.

Through these simulations, it became apparent just how important it is to greet someone, identify yourself through name signs and tactual clues, and inform them of your purpose. In addition, it became obvious that it is important to let another person know when you are finished, check in to see if they are finished, then inform them that you are leaving. Often, one of us would leave the other hanging, looking and feeling for our partner who had already left. That was a very uncomfortable, insecure feeling that we don't want our students to experience. We must train our staff and all our students to follow the techniques that Maurice from our SFSU program showed us and then consistently follow them.

Assessing the Environment to Help Prevent Physical and Mental Fatigue or Discomfort - We have to remember to check in with our students to keep them comfortable and to teach them to communicate when they are too cold or hot. Susan told us to check in with our clients/ students to make sure that they are not too tired. When doing tactile signing, their hands, arms, backs, or necks can get tired, so we should let them suggest a different way of sitting or taking a break. If they have to tilt their head in a particular way to see, their neck may be getting tired, which is another reason for giving them time to rest.

This training helped me to relate even more to my students. During several periods of time when all communication was done in sign language, if it lasted half an hour or more, my eyes would start to burn with fatigue, my head would hurt and my "brain would drain." Then I couldn't understand the simplest of signs or focus on any communication. That can happen to my students also. At other times, the presenters or my fellow trainees would talk very softly. Even though I was in the front of the room to help me hear, with my hearing loss, it would be difficult to hear. Then my head would hurt again from straining to hear and my brain would try to "shut down." This really emphasized the importance of checking in with our students to ensure that they are not mentally or physically fatigued.

The Power of Touch - Susan clarified that the kind of touch that we use to introduce ourselves, guide our clients/students' hand to an object, act as a human guide, interpret, or part company has a huge impact on what is being communicated and the outcome of the interaction.

Tactile Signing and Other Signing Techniques - Bernie had us practice the print on hand method. That is not as easy to recognize as one would think. Susie had us practice tactile signing with either one or two hands receiving. We took turns with our colleagues being the interpreter then the client/student, while interpreting different scenarios, pictures, videos, etc. Our colleague was wearing one of several types of modified goggles and earplugs. It was the responsibility of the client to express to the interpreter what kind of signs, what size signs, and at what distance she wanted the interpreter to sit. She was to tell us if she wanted to receive the signs with one hand or two. It was our responsibility to follow her instructions and to make sure she was understanding what was being signed. Tactile signing is a fast, back and forth communication between two parties, where the client signs her "guesses" as to what is being said quickly into the hands of the interpreter. If she is right, the interpreter goes on to the next concept. If she did not understand, the interpreter needs to resign it in a manner that she can understand. The client can also quickly ask for a repeat. Wow! This was hard for us beginners, but it was so enlightening and exciting when we understood each other.

Fortunately, we had seen how quickly and efficiently experienced tactile signing can be done when one of our presenters, who was deaf-blind, was communicating back and forth with her interpreter. While the presenter was giving her accounts of different experiences, her interpreter was expressing the audience's verbal and facial responses to the presenter's stories. She also signed their questions and remarks into the one hand of the presenter. It is amazing, how the human brain, with the correct training, can quickly pick up so much information during a conversation by feeling the movement of fingers, hands, and arms.

## **Other observations**

Most posted information at HKNC is presented in both tactile and visual methods. The tactile representations are objects, raised print, and braille, while the visual is the object and large print with good contrast. In the trainees' dormitory main hallway there is a large monthly activity calendar made of a wood grid. Inside each "box" are the date and a picture of the activity, labeled with large print and with braille. The menus, which are posted in the cafeteria, are written with black markers in large print and in braille. For those trainees who need them, there are also order cards posted on Velcro, which they can remove from the wall and hand to the cafeteria workers. There is also a tactile, visual "Weather Board" so they can plan their activities and dress appropriately for going outside. The doors in the main training building are labeled in a similar manner. The nurse's door is labeled with large raised print, braille and has a "stethoscope" taped to the front. The audiologist's door is labeled the same but also has a model of an ear with a hearing aide. On the Low Vision Services door, there is a wooden teddy bear wearing glasses. These are great examples of tactile and visual cues that we can use in our classrooms.

The HKNC has various writing guides, into which an envelope, a check, or a piece of paper can be inserted. These could help our students write in straight lines and use the right sized letters. There are also laminated cards that an individual can take with them for traveling independently in public. These cards explain what trains, buses, or stops they need, so the public can help direct them. These could be a great for helping our students find their way around on campus and in the community.

## **Conclusion**

After completing this training, my doubts as to how much a person who has vision and hearing losses can learn have been dispelled. A poster at the HKNC summed it up, “Don’t be blind to his abilities, deaf to his ideas; see what his experience can do for you.” I am totally amazed at what the human mind and the human will can accomplish with the right training, education, and support. I am so inspired and am looking forward to helping others, both students and teachers.