Andrea’s story- A Deaf person’s experience of psychological therapies

Andrea* was born profoundly Deaf. She is the only Deaf person in her family. Her parents were told not to learn British Sign Language (BSL) to communicate with her, as it was believed that this would discourage her from learning to speak.

Andrea went to mainstream, hearing schools. At primary school, she was looked after by the other girls, but by the time she reached secondary school she was frequently bullied. She was taught using the ‘oral method’ which meant that most of her school time was used trying to teach her to lip read and develop speech. Unfortunately, this type of teaching meant that she was often taken out of mainstream lessons and as such she lagged behind her peers in terms of background knowledge, historical information and general knowledge which her hearing contemporaries took for granted. By the time she reached her teenage years, Andrea’s speech and language development was poor and as a result she had limited literacy. She did not achieve good results in her final GCSE examinations.

From school, Andrea enrolled onto a local college course which supported the use of BSL. Although she was not skilled in sign language she quickly improved and it became her preferred method of communication. She discovered that she could express herself fluently for the first time. She made Deaf friends and became involved with the local Deaf Club and identified herself as “Deaf”.

After college she eventually got a low-paid job. However, she was harassed and bullied at work and developed anxiety. For many years this went untreated. Andrea has limited access to information and was unaware of support that was available on the NHS and did not realise that she could be referred for psychological therapy. Eventually, Andrea went to see her GP who assumed that she was a fluent lip reader because she never had a BSL interpreter with her and did not sign to him because he did not sign to her. He would give her hand written information or leaflets which she could not understand and as such felt her appointments were a ‘waste of time’. She rarely saw her GP and had no relationship with any of the primary health care team at her surgery.

Her anxiety increased and this was having an impact on her daily life to the point where she withdrew from her family and friends. Andrea was taken to her Doctor by a Deaf friend who insisted the surgery booked a BSL interpreter so she could fully explain how she was feeling and at the appointment, for the first time in her life, she felt that she had been ‘heard’ and was hopeful that she would get the support she needed.
The GP referred Andrea to the local IAPT Service and a BSL interpreter was booked for the assessment. She felt nervous about seeing a hearing therapist because of her past negative experiences she had grown up with and being told that hearing people were “better” than Deaf people and her anxiety increased. Andrea found it difficult to work collaboratively with her therapist because she had always been told what to do by hearing people. She also struggled to discuss her fears in front of the interpreter as she did not trust that they would keep confidential her story and feelings from the Deaf community. What made it even more difficult and frustrating was that a different interpreter arrived for each session so she felt she had to get used to them. This was made worse when at times some sessions had to be cancelled because either an interpreter did not arrive or had not been booked.

Andrea also realised that the hearing therapist did not understand her experiences as a Deaf person growing up in the hearing world. The therapist asked Andrea to undertake ‘homework’ which reminded her of the problems she had faced in school, which again increased her anxiety and she became depressed. She was asked to keep a diary which she found difficult because of her literacy problems. The therapist told Andrea ‘If you face your fears, you will often find that the thing you are anxious about doesn’t happen. They told Christopher Columbus that if he sailed west he would fall off the edge of the world, but he tried it and nothing bad happened’. Andrea did not know who Christopher Columbus was – probably she missed that lesson at school because she was having speech therapy.

Andrea did not understand the reason why she was going to the sessions because she felt more anxious and very low in mood, as such, she stopped attending.

She was eventually referred to a Deaf specialist psychological therapy service as her symptoms had worsened. Her assessment was with a therapist who was Deaf and used BSL. Andrea could not believe that the therapist was Deaf like herself and immediately felt that she fully understood what she was going through. The therapist adapted the homework to suit her needs so no written work but practical tasks that she felt confident in completing and reporting back in her following session. This made Andrea feel good and more in control and aware of what she needed to do for herself to recover and reduce her anxiety and depression. Following a number of sessions in BSL she felt able to look into her issues at work and found solutions using low intensity CBT. Throughout ongoing sessions, Andrea gained confidence and skills to resolve her problems and this made her feel happier within herself and enabled her to identify who she was as a young Deaf female. Andrea was then discharged from the service with no anxiety or depression. She returned to work and began to go out with her friends again.

*This is a fictional vignette, based loosely around the experiences of several deaf people.

The Royal College of Psychiatrists and Deaf charity SignHealth have produced guidance for commissioners to improve mental health services for Deaf people.