Deafness and Challenging Behaviour: The 360° Perspective

Edited by

Sally Austen and Dave Jeffery
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Sally Austen and Dave Jeffery
Dedicated to Ian, with love, on our first anniversary.

Sally

Dedicated to the memory of Naomi King:
a special girl from a special family.

Dave
Contents

Dedications ........................................................................................................ v
Contributors ..................................................................................................... ix
Preface ............................................................................................................. xii

I INTRODUCING DEAFNESS AND CHALLENGING BEHAVIOUR

1 The Deaf Service User’s Perspective of Challenging Behaviour and Restraint ........................................... 3
   Sally Austen and Two Service Users

2 Unravelling the Anomaly of Deafness ................................. 17
   Di Baines

3 Bearing Witness: Challenging Behaviour and its Contribution to Trauma and Vicarious Trauma .............. 33
   Dave Jeffery, Marian Crowley and Sally Austen

4 Diagnosis and Challenging Behaviour of Deaf People ...... 52
   Sally Austen, Alison Gray and Steve Carney

II AETIOLOGY OF CHALLENGING BEHAVIOUR

5 Challenging Behaviour in the Young Deaf Child .......... 75
   Rosie Kentish

6 Neuropsychological, Behavioural and Linguistic Factors in Challenging Behaviour in Deaf People ............. 89
   Robin Pajimans

7 Psychodynamic Approaches to Understanding Challenging Behaviour ................................................ 109
   Christine McPherson
CONTENTS

8 Autistic Spectrum Disorder, Deafness and Challenging Behaviour ........................................ 125
   Pat Collins and Steve Carney

9 Challenging Behaviours and Deaf Older Adults ............ 144
   David M. Feldman and Kristyn Eck

III MANAGING CHALLENGING BEHAVIOUR

10 De-escalation and Deafness: Seeing the Signs? ........... 159
    Dave Jeffery and Sally Austen

11 Showing Restraint: Therapeutic Holding with Deaf People in Crisis ........................................ 176
    Dave Jeffery

12 A Model for Restraint Prevention in Residential Treatment for Deaf Children ......................... 193
    Judith Vreeland

13 The Role of Deaf Staff and Interpreters in Preventing Challenging Behaviour ......................... 208
    Adrian Harper and Mary Connell

14 Social-skills Improvement as a Means of Managing Challenging Behavior ................................ 223
    Marlene Eernisse and Leigh Poole Warren

15 Approach with Care: Improving the Effectiveness of the Care Programme Approach with Deaf Service Users in the UK ......................................................... 233
    Dave Jeffery

IV FORENSIC SERVICES

16 Deaf People and the Criminal Justice System .............. 257
    Sue O’Rourke and Rebecca Reed

17 High Secure Care for Deaf People in England and Wales ..................................................... 275
    Manjit Gahir

18 Risk Assessment and Risk Management with Deaf People ..................................................... 292
    Sue O’Rourke

Index ........................................................................... 310
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Preface

Violence and aggression negatively affect service users, staff members and families. People's lives, well-being, health and careers are put at risk. Despite the unequivocal impact of challenging behaviour, little is written about this area, and it seems that resources for dealing with such issues are not forthcoming. The relative prevalence of mental health problems in deaf people is still unclear, but the prevalence of challenging behaviour in deaf people has long been considered greater than in hearing people.

In *Deafness and Challenging Behaviour: The 360° Perspective* contrasting and complementary points of view will cover diagnosis, cause, prevention and management of challenging behaviour in deaf people. Chapters reflect the perspectives of general and forensic psychiatry, learning disability, education, parenting, speech and language therapy, psychology, risk management and therapeutic holding, social work, interpreting, deaf professionals and the criminal justice system. Crucially, the short- and long-term effects on staff working with people who have challenging behaviour is addressed.

This book answers the often asked question: 'How do we manage a deaf person prior to, or at point of, crisis?' It is an obvious question, yet before now its answer has not been readily available. Statutory requirements concerning a systematised approach to the care of those with mental health problems are thwarted by unclear guidance and a lack of recognition of the complexities of working with deaf communities. The pooling of multiple resources within this single volume makes a bold assertion to the traditionally fragmented approach in the care of deaf people with additional needs.

The first chapter of *Deafness and Challenging Behaviour: The 360° Perspective* is written by two service users. It is a frank account
that may challenge or disturb the reader but should also inform. It is hoped that its content and honesty will escort and enlighten the reader through the subsequent chapters, which have been written by a wide range of experienced and excellent professional contributors who represent myriad areas of expertise in the field of deafness.

Also to guide later reading, the chapter entitled ‘The Anomaly of Deafness’ describes the varying deaf-related nomenclature that will be found throughout the book. In order to respect the cultural beliefs of all our contributors, each author has been encouraged to choose and use such terminology as they find appropriate, resulting in consistency of terminology within chapters but not necessarily between chapters. It is acknowledged that challenging behaviour can refer to the ‘acting in’ behaviours such as eating disorders and self-injury; however, in this book we have deliberately focused on the ‘acting out’ behaviours such as aggression and violence.

As the editors of *Deafness and Challenging Behaviour: The 360° Perspective*, we particularly wanted to address the contentious issue of physical intervention in the management of aggression and violence in deaf people. Up until now, the lack of knowledge and debate in this area has failed the deaf service user and those who may have to manage challenging behaviour. While this topic remains in its infancy, it is hoped that this book will serve as a foundation from which further research and study will be stimulated.

Despite the breadth of information and number of perspectives covered in this book, one can see the development of an indisputable consensus that communication is the key to large parts of the cause, prevention and resolution of challenging behaviour. In writing this book, we were alarmed to realise that, despite this consensus, communication access and language development for deaf people of all ages is still sadly lacking. That deaf children are still being avoidably language-deprived or – delayed is not only tantamount to abuse but also makes the bed that we all must subsequently lie on. Young deaf children, in whose language there has been insufficient investment and whose challenging behaviour is not immediately addressed, will become adults who have challenging behaviour that is more entrenched and harder to manage. Prevention must take precedence over management.

In editing and part writing *Deafness and Challenging Behaviour: The 360° Perspective*, we have learnt an enormous amount from the extremely high standards of work provided by our contributing
colleagues. We are extremely grateful for their input. We hope that you enjoy the various chapters as much as we have and that this book will assist you in your continued work with deaf people who have challenging behaviour.

Sally Austen and Dave Jeffery
PART I

Introducing Deafness and Challenging Behaviour
1

The Deaf Service User’s Perspective of Challenging Behaviour and Restraint

SALLY AUSTEN AND TWO SERVICE USERS

INTRODUCTION

In this chapter, two ex-service users, both of whom have requested to remain anonymous, describe their life experiences. We are extremely grateful for their help. In order to elicit their views, each was interviewed individually. They were told that this book would include topics such as anger, challenging behaviour and restraint and were asked to describe events that affected them, and their perceptions of them, in their own words. In doing so, each picked themes within this remit that were particularly pertinent to them. They were not asked on this occasion to consider how their actions affected others; and the views of others, which may differ, have not been elicited. Their stories are presented as they were told, with editing only for brevity and flow, without prejudice or censorship, except for reasons of legality or confidentiality. As a result of the lack of censorship, some of the contents may be upsetting to read. This chapter deliberately only represents the views of the service users so that the impact of their experience is not diluted by academic discourse. However, in the discussion some aspects of their narratives are highlighted, and the reader is invited to consider these when reading subsequent chapters of this book.
SERVICE USER ONE

I was first in a [hearing] psychiatric hospital 20 years ago, and I felt angry many times. The cause of most of my anger was communication problems with the nurses. The first time I was restrained I had been really angry because I was trying to communicate with everyone to explain to them how I was feeling. I got so angry they couldn’t understand me that I hit the staff member. Then, all of a sudden, all of these people grabbed me roughly and put me on the floor. I couldn’t move my hands, they gave me an injection and then they moved me and put me on a bed. But I don’t understand why they were angry with me: I was just trying to communicate with them. Then the next day the doctors came but there was no interpreter and one doctor looked at me and decided that ‘This is what you’ve got’ and he whispered to the other doctors. After that they gave me lots of tablets and injections regularly. I thought, ‘Why am I taking the tablets and why am I having these injections?’ I can remember them walking into the room and tapping me really hard to wake me up and then two nurses forced me to have injections. Eventually, I realised that it must be a regular injection that I had to have every two weeks, but they never explained to me why they were doing this. All they told me was that it was because of my behaviour and that it happens in a lot of hearing psychiatric hospitals.

In the hearing psychiatric hospital I got angry and shouted a lot because there was never an interpreter and there was no communication, which led to problems, and they weren’t deaf aware. Then I moved to a deaf psychiatric hospital. I was a bit overwhelmed at first. There were a lot of deaf people there as well as deaf staff and hearing staff that could sign. My signing improved a lot there (I had been brought up poorly, with little education). I learnt to sign, I used an interpreter and I had a communication specialist who taught me to communicate with staff. But I was still very frustrated at what had happened in the past in the hearing hospitals. I was frustrated the way they had treated me, which made me carry on being angry and aggressive to the other staff.

My behaviour escalated: getting angry, fighting staff, getting drunk, setting fires and spending a night in a police cell. I was then moved to a deaf secure facility and it was so much better. I learnt coping skills. I learnt to control myself. I had therapy with a deaf therapist who helped me to express myself. I was able to communicate through the therapy and that meant a lot and really helped. And it helped me move
on and be calmer and helped me become better for the future. I was still getting aggressive, but staff would say, ‘Control yourself; use the skills you have learnt’, and it was much better. I was able to show my emotions. At first, I didn’t like that it was a locked hospital. It upset and depressed me but then I realised that they were there to help me; so I accepted it in the end.

And when I was ready I was able to leave to live in a group home with staff support. It was a big difference at first, and for the first year I was up and down – but I never hit staff. I think what helped me change was the communication, and the therapy definitely helped a lot because the therapist was deaf. Now I use more interpreters to access groups in the community. I am a bit disappointed that there aren’t more deaf groups, but I have to get on with being confident in the hearing world.

Author: Your first experience of restraint was in a hearing hospital and no one signed and there were no interpreters. Nowadays, it is considered good practice to try to prevent the need for restraint, for example by saying to someone before they are really angry, ‘You need to calm down otherwise we will have to restrain you.’ How did the hearing hospitals get this message across to you?

They didn’t explain anything, as they couldn’t sign. They just put me on the floor and injected me and then put me on the bed to sleep it off. It just happened all of a sudden. I had no idea it was going to happen. Several people lay me on my stomach: two held my arms, two held my legs and one sat on my back. It hurt a lot. I had bruises all over my body. My hands and arms and legs and my back all hurt.

Author: What was it like to have someone sitting on your back?

It was difficult to breathe. I was screaming because I couldn’t breath properly. I was screaming, ‘Get off! Get off! Get off!’ but they sat on me for five minutes. But that was 20 years ago. It is better now. They don’t sit on your back now.

Author: How did you communicate during the restraint?

I screamed most of the time and tried to communicate. But I couldn’t lip-read because I was so upset at being put down on the floor. And I don’t think they were trying to talk to me anyway. They were all hearing. And they were all standing up and on top of me so I couldn’t see their faces properly anyway. No one was at my level to lip-read.
Author: You said that the first time you were restrained you thought that staff were angry with you. Do you think you might be mistaken, or that they were frightened of you?

No, they were angry with me. I was screaming at staff because they didn't understand my signing; they didn't know what I was saying or why I was angry and so they got angry with me. I could feel it when they restrained me. They weren't frightened of me; they had more power than I did.

Author: Were your experiences different when you were in deaf psychiatric hospital?

First of all, in deaf hospital if I had anxiety and my anger was starting to build up staff would ask if I wanted a one-to-one talk or to go for a walk outside, or ask if I needed PRN tablets [tablets prescribed on a needs basis, to help the person calm down] so maybe I wouldn’t get aggressive and I wouldn’t need to be restrained.

When I was restrained, it was different. They didn’t sit on my back. They would still hold my arms and legs, but I was lying on my back and they would hold my head to turn it so I could see them signing. I was angry at the time; it took a long time to calm down. But it helped as I could see the signing. They kept saying, ‘Calm down and in two minutes we will let you go, in two minutes, just calm down first.’ So I realised that if I calmed down they would let me go. And so, because of the communication and because I calmed myself down, I didn’t need injections. The restraint didn’t hurt. And it was completely different because the staff didn’t seem angry with me but instead that they were trying to help me.

Author: After deaf psychiatric hospital you went to a deaf secure hospital. Did you experience restraint there?

I was angry a few times and was restrained twice in the two years while I was there. It was different, as they didn’t leave you on the floor. They sat you on a chair, which was better, because you were face to face with the interpreter and your chest was free. It was more dignified being sat in a chair than being on the floor. I felt that they respected me more and there were less bruises and nothing hurt like it had on my arms and legs 20 years ago. The other difference is that in the secure hospital they didn’t hold my hands. Instead they held my forearms about three inches below my wrist so that I could still move my hands and sign.
Author: You have said a lot about how things improve when there are interpreters, but what about deaf staff or hearing staff that can sign for themselves?

Deaf staff are really good, and some hearing staff are good but they need interpreters. There are usually not many deaf staff, though it is good when there are. Hearing staff, if they can sign, can usually only sign to stage 1 or stage 2 standard. I think there should be more deaf staff and that it would be good if hearing staff could sign for themselves. But the real problem is agency and bank staff as they can’t sign at all and who say they want to learn but speak all the time. It is a shame because people get angry when communication is poor.

Author: Have you ever been in a seclusion room?

No, but I have been left in my bedroom after restraint. I felt upset. I was isolated and wanted to talk to someone. They say they leave you on your own to calm down, but I think the better way to help me calm down would be to talk to me. I think it was sometimes an excuse because they couldn’t communicate with me.

But in some ways it is good to be moved to the bedroom. There is no privacy during restraint. If it happens where everyone can see, it is awful that others know what staff did. If possible, it would be better to pick the person up and move them to a different place, like the bedroom.

Author: With your experience of challenging behaviour and restraint, how would you want services to improve their care for deaf people with aggression problems?

I have some traumatic memories, especially of being given injections against my will, but things have improved in the last 20 years: from my experience of very rough restraint in hearing hospitals to good communication but restraint on the floor in the deaf psychiatric hospital, and good communication and restraint in a chair in the secure hospital. But there are still lots of things to improve.

- Hearing wards should be taught how to use interpreters and learn how to communicate when patients are upset. They should be trained in deaf awareness and have fire alarms with flashing lights. Also, they should have flashing doorbells on bedroom doors so that staff do not wake you up with a shock by shaking you.
• To help people work on expressing their emotions, and prevent the need for restraint, there should be more therapy with deaf therapists all over the country. Or, if the therapist is hearing, there should be interpreters.

• During restraint, don’t sit on a service user’s back, as they won’t be able to breathe properly.

• During restraint, don’t hold a service user’s hands (hold their forearms instead), as they won’t be able to communicate properly. If they are being restrained on the floor, staff should come down to the floor too so that the service user can lip-read or see them signing.

• Where possible, restrain people in chairs so that it is more dignified and so that they can see the people with whom they are communicating.

SERVICE USER TWO

I was born the only deaf member of a hearing family. We just used family sign at home. When I went to a deaf oral school where the children signed among themselves, I was amazed and fascinated that people at school signed properly. I was nervous but wanted to learn. I started to pick up signing at school, but it was very different to at home. It would really frustrate me that I used different signs to people at school. I really wanted to communicate with people, but I wasn’t able. I started to feel that my family didn’t understand about deafness and communication at all. For example, ‘one sleep’ was the family sign for ‘tomorrow’, but at school they had a proper sign for it. When I went home and tried to tell Mum that there was a proper sign for ‘tomorrow’ she didn’t understand and, since I couldn’t spell the word, there was no way I could explain. I tried to teach my brother sign but he mostly just used family signing.

Soon after I went to school I was sexually abused. I tried to tell my mother but she didn’t understand and I got really frustrated and angry. Mum would say, ‘What is the matter with you?’ but I had so much anger inside me that I smashed a table and put my hand through the window.

School was really cruel and I got into a lot of trouble. One time I wanted to go to the toilet but the headmaster wouldn’t let me. Eventually, I lost control of my bladder. Then I got the cane for weeing myself. It was really annoying, as I couldn’t communicate with him. I didn’t even know what the word for ‘sorry’ was. He just kept hitting
me. I got really upset and I used to run away to my parents. The abuse happened again and I told them again, but they still didn’t understand. I left school at sixteen. They were disappointed with me not staying on to further education, but I thought, ‘Stuff school!’

I got into trouble with the police for the first time at a football ground in the 1970s. My team were doing well but needed to win this match. All the supporters seemed to hate the referee. At the last minute, despite the opposition player being offside, the referee allowed the goal. I was so angry I wanted to hit the referee. Lots of people were running onto the pitch. I ran at the referee but the police caught me. I was taken to the police station and questioned, and then taken to court. I was fined five pounds. My parents laughed about it being such a small amount. It was then that my desire to fight the police started.

I didn’t want to get involved socially with deaf people, as they weren’t getting into trouble. I wanted to hang around with the hearing gangs as they were always fighting. I really enjoyed being part of football violence. I would get excited about kicking people. Sometimes, we would hold someone’s head down and then kick it.

On one occasion I was taken to the police station and released without charge after being caught drunk in town trying to break into a shop. On another occasion I went to a football match and then the pub with my girlfriend: she was beautiful and I loved her. There was an altercation starting and a man walking towards my gang so I picked up a bottle, smashed it and lost my head completely. I stabbed him in the face and it took off his nose. As a deterrent, the police said I was no longer allowed to watch home games and had to sign in at the police station during match hours to prove I wasn’t at the match. I would still go to the match though: I would go to the police station at the beginning of the game, rush back and climb over the wall to watch the match.

I still enjoyed the football violence. One time, coming out of a match with friends, we joined in a big fight, really kicking people hard and stamping on them. I really enjoyed that. The police came straight away. CID wanted to arrest me and since they had cameras I was sure they had got me this time, but they only moved me on. Later that night, me and some friends started a fight at a disco, pushing past the bouncer so that the hearing gang could get in. Everyone got in and started kicking everything in. The police came and said, ‘Oh, it’s you again is it?’ and sent me home. I didn’t go home. I stayed in town and continued to drink.

Finally, after failing to sign in at the police station and getting caught fighting, I was sent to a young person’s remand prison for five weeks
and then to Crown Court. There was no interpreter so my brother interpreted for me. There were four of us. One was fined £35, the next £30, the next £20 and then it came to me. My brother said, ‘I think you are going to prison’, and I was really worried. Then I was fined £15! I thought, ‘Oh brilliant!’ And then the probation officer stood up and said, ‘But he broke the terms of his probation order and should go to prison.’ The judge said, ‘It is too late, I have already made my decision.’ So we went out and got drunk and I paid my £15 really easily.

Another phase in my life started when, after stealing some money from a cash register, I was later sent to borstal for a year. But when I left borstal I had been taking a lot of drugs and became very ill. I became moody and paranoid. I was hallucinating that the TV was looking at me, that the devil was coming for me and that I was God. I was only home one night and my parents called the social worker for the deaf who took me to hospital. I was still acting very oddly in hospital and people were scared of me. Eventually, the doctor said I should go to bed but I couldn’t understand and didn’t know what was going on. So I was put into a wheelchair and given two lots of brown medicine. I fell asleep and woke up in a different hospital.

Over the next few years, I was taken to many different wards and was given injections to make me sleep. But I was in bed all the time and it really hurt because I had bedsores on my ankles and my bottom from being in bed so much. I had strange movements in my legs, which meant that when I was sitting in a chair my heals rubbed themselves sore. I wanted to get up but they kept giving me injections to keep me asleep. Whenever I did get up and walked around, I felt much better, but the nurses kept taking me back to my bed and making me go to sleep. I don’t know how many times this happened, maybe 80 or more times. But throughout this I was hallucinating.

Eventually, I did get better and went home to my parents’ house, and me and my parents were getting on OK. But then I started getting into trouble again: stealing and fights again.

I was taken to a deaf psychiatric hospital for two weeks but I got into trouble throwing things and drinking alcohol. So the doctor there said that this place wasn’t suitable for me and that I had to leave. My parents were really angry that I had to come back home.

After further counts of stealing and fighting, I was sent to a remand prison. There was no communication, just a small hatch to pass food and tablets through. It was so hot. I started to have hallucinations and was moved to hospital. From there, I was taken to court and given bail. When I was bailed I thought, ‘Great, I am free. Now I can go out and
fight and do anything I want. I can ignore the court.’ That night, I committed theft, arson and seriously assaulted someone. These crimes ultimately led me to being incarcerated in a secure facility.

In the secure facility and in previous hospitals and prison, I couldn’t communicate with anyone. No one could sign. I didn’t know what they were saying. One time, in a hearing hospital, I signed that I wanted an interpreter. But the sign for interpreter involves raising the two fingers of each hand and they thought I was telling them to ‘Fuck off’ and so they locked me up. I got a lot of abuse from the staff in prison and in the secure hospital. It was like a horror story: they would physically abuse the patients, steal their cigarettes or leave them out in the cold. The staff didn’t like me because I was always fighting them. If they were restraining me, I couldn’t lip-read them as I was on the floor, and they were holding my hands; so I couldn’t sign. But they didn’t understand sign; so it made no difference really. But if they were talking and I couldn’t understand them I would just hit them. So then they would restrain me more. Restraint would really hurt. They would usually get a cushion and then sit on you. Or kneel on your back. While I was being restrained, sometimes the men would kick me while I was down there. I would make sure I saw their faces so I could get them back. Generally, they would then pick me up and push me to my bedroom and give me an injection that knocked me out and made me very confused.

I was in the locked hospital for a long time. I was really angry about the environment; the fact that they were hearing and there were no other deaf people or signing people. I got angry, fed up and moody. The lack of communication made me lose my temper, fight and hit people. There were ten deaf people in the secure hospital but they were all spread out and I only had hearing people to communicate with. It was like living in a horror movie. I would hit my head on the wall or cut myself really severely until I needed stitches. For about seven years, I was really rebellious and angry all the time. I tried to hang myself but a guard found me. I tried to escape but a guard found me and they kept locking me up. I wanted to be free. My mum begged me to stop but I didn’t.

Author: So what has changed? How come you are no longer living in a secure environment?
Before, when I was small and growing up, nothing changed. And for a long time in the secure hospital nothing changed. And then in 1987 they came in with an interpreter and a deaf relay interpreter. I didn’t
really know what an interpreter was at that time. At that time, my attitude was really bad. The deaf person said in sign language, ‘What are you doing? That is stupid. Stop doing that. Stop calling people dickheads.’ Then, when I was ready, someone came and we just started talking and it all changed. Life began to change when I first met deaf staff, because of the communication. I hadn’t really understood about life and consequently got really angry all the time, swearing and fighting the whole time.

In the secure hospital, they had discussions about things like sex education and the deaf relay made sure that I could understand everything. They started having a discussion about going to the education unit and I thought that I would really like to try education again because this time I would be able to communicate. And they said I could go to a deaf club and thought it would be good for me to talk to people.

It really helped me to start communicating. I can remember a time when I was angry and the interpreter said, ‘Look out the window at the weather’ and I did and I realised that I didn’t want to hit anyone. Once I had interpreters, behaving well was not so boring. I could see the purpose of being good: so that I could go back to education and have interesting conversations.

As my signing improved, so my confidence improved. I was happy. There was still some trouble and communication problems but much less. With interpreters to help, I was like, ‘Wow, now I understand! I have been stupid for all this fighting. All the trouble with the police. This is all my fault. And I feel really sorry about it.’ And then people in the hospital were happy and I began to improve even more. The fighting finished and I was more natural.

When they said it was time for me to leave the secure hospital, I was so relieved. I went to a deaf rehabilitation facility. I was there for seven years and only in trouble once in that time. Communication was fine because there were interpreters there. To test me, they pulled the interpreters out to see if I would be angry, but I wasn’t. I had improved by then and they said I could leave. I had gradual leave to stay with my mother and sister and then I moved to my current staff-supported accommodation and I have not been in any trouble. Now life is better, as I can leave my past behind.

Author: Do you get angry or aggressive now?
I get angry if I see deaf people being teased, but I don’t hit out. I walk off. If I am angry now, I have a cup of tea, a smoke or a walk. But here
I can communicate with deaf people and there is no one I need to be suspicious about. Life has really changed now and is calmer.

Author: As you look back on your life, what do think might have made a difference to your behaviour?
The signing. I think if my parents had signed normally that I would be normal. I didn’t even know that I was deaf. I didn’t know what that meant. I knew that my parents talked and used the phone, but I didn’t know what that was and that I was deaf. I thought that as I grew up that I would grow up to talk like them. But then I realised that a boy who was younger than me was talking, and I didn’t understand how that worked. But when I went to the deaf school they explained it to me and I was really frustrated. And then not being able to explain the abuse to my parents, when I really wanted to explain it to my mother: that’s when I started getting angry.

Author: Children need discipline as they are growing up, to teach them how to behave correctly. Do you think that you had sufficient discipline?
No, definitely not. My parents would tell my sister and brother off and smack them, but wouldn’t discipline me at all. I think they thought I was behaving badly just because I was deaf. And they felt sympathy for me because I was deaf. Even if I was angry and started hitting out at people, they reacted with sympathy. I remember once that my father tried to send me to my room in the middle of the day, but my mother said, ‘Don’t be hard on him. He can’t help it – he’s deaf.’ They knew I got angry quickly and tried to help me control things by saying, ‘Don’t get angry’, but they didn’t understand sign language. I think later they shouted at me, but I just ignored it.

Author: When you left school, your behaviour worsened. Your crimes were really quite severe and yet the police interventions, for example fining you or banning you from home matches, do not sound sufficient to prevent your re-offending. Do you think the police and courts were strict enough?
I thought they were strict but, I didn’t care what the police said. I wanted to get into more trouble. I wanted to be like the hearing gangs. I saw the hearing gangs, how they got into fights and how they were questioned at the police station, and so I knew the way to behave. I just wasn’t bothered at the time. But now when I look back I think, ‘Oh, you stupid fool.’ If the police had punished me more severely from the
start, I don’t think it would have deterred me from trouble sooner. I just wasn’t bothered. Either way, I would have got into trouble. Because I liked it. It was the same through school, borstal and prison.

Author: You said you liked getting into trouble. What was so good about getting into trouble?
Until I met the interpreters in 1987, behaving well was boring. Behaving well meant having nothing to do. It was silly, but I wanted to do something: break something, fight something. I used to fight a lot at school, and I used to win a lot. A probation officer once offered me the opportunity to learn boxing and I said no. He said, ‘Why not? You like fighting.’ And I said, ‘That’s it. I just like fighting.’

Author: How do you look back on your life now?
I wish it had been different. I spent so many years in trouble, and I am sorry about the grief that my trouble caused my family. I was stupid, but I just didn’t know. And I am sorry to my mother and father. When this interpreter came into the secure hospital, it just changed. But in some ways it was too late. If I hadn’t had these troubles, maybe I would have been married or have had a driving licence by now. Or maybe I would have been free for those 27 years. So I wish it had been different.

I don’t hold any resentment or anger for any of the people in my life. No, looking back, I am quite cool. I kind of ignore things now. I am confident and happy. I have staff here who can communicate with me. Before, it was horrible and now it has improved.

Although at times I had two problems, my behaviour and my mental illness, I think my mental illness was because of communication, really because I was so stressed. Now I take a tablet every day and I have an injection every two weeks, but I am not floridly ill at all. And I am content to have the injection.

My parents have both died now. I am not depressed about it. They never really understood me and I never really belonged. I am just happy to be free. I think they are happy too. I think they are looking down on me from wherever they are and they know that my behaviour has improved and are proud of me.

DISCUSSION

The two service users, in part with innocence and in part with insight, lead us to questions that will be addressed in the subsequent chapters of this book.