## Interpreting Effectively and Safely for Deaf Survivors of Violence





CENTER ON VICTIMIZATION AND SAFETY

# **Welcome and Introductions**



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# **Learning Objectives**

When interpreting in contexts of domestic and sexual violence I will be able to:

- Recognize the dynamics of power and control and avoid colluding with those dynamics as an interpreter;
- Understand how trauma may impact interpretation and be able to navigate that impact;
- Develop a vocabulary specific to interpreting for Deaf survivors;
- Incorporate best practices for interpreting and
- Develop a plan to enhance emotional and physical safety.



# Let's get to know each other....



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# I traveled more than 1000 miles to be here



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## I traveled less than 50 miles to be here



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# I have been interpreting for less than 5 years



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# I have been interpreting for more than 10 years



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## I have a dog



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### I have a cat



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# I have traveled out of the country more than 5 times



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# I have interpreted in DV or SV settings in the past



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# How can we create a safe space?



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Confidentiality Mutual respect Express yourself Communication



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# Language Video



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## Discussion



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# (power) (power) Culture/Society $\rightarrow$ Oppression $\rightarrow$

messages, permission, privilege

Hierarchy

(power) DV/SV → Trauma

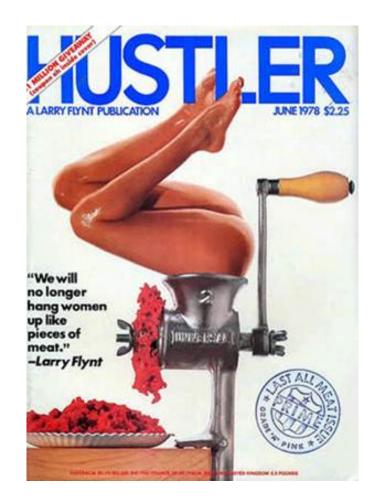


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- Lower pay (70 cents on the dollar)
- Grand Theft Auto
- Media portrayal, body image
- FGM, Honor Killings
- **Bambi Hunting**
- Pornography/Sex Trade







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# Posted in the men's bathroom at the University of Miami:

#### Top Ten Ways to Get Away with Rape

1) Put drugs in the women's drink, therefore she wont remember you

2) When you see a women walking by herself take advantage of the fact that she is alone

3) Wear protection

4) If a women's window is unlocked sneak in and rape her to teach her not to do it again

5) Sex with an unconscious body does count, so don't back down if shes sleeping

6) Honesty is the best policy, if the girl says she doesn't want to have sex tell her you are going to get her a drink, slip some roofies in it and you'll have her in bed in no time

7) Practice makes perfect, the more you rape, the better you get at it

8) If your afraid the girl will identify you slit her throat

9) Never take pictures with or give your number to the girl you rape

10) RAPE RAPE RAPE, its college boys live it up!!



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# "If it is inevitable, just relax and enjoy it."

Republican Gubernatorial Candidate

Clayton Williams (TX)

March 25, 1990



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🕒 Man Debates: Rape: Deaf vs. Blind 👘

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🕙 blog. mandebates.com/2009/09/rape-deaf-vs-blind.html

+



Rape: Deaf vs. Blind

Introduction:

Rape is a common thing that we all have to deal with in everyday life, like making a sandwich, watering flowers, or turning those shit-stained boxers inside out when you wash them. There's a good chance (if you're a girl or a little boy) that you will get raped at one point, if you haven't been already. Wolves like to pick off the smallest and weakest members of the pack, and this goes for humans, as well. If someone has to be raped, who should it be? The deaf or the blind?

#### Fisty Fillmore's Take:

Hands down, deaf people are the better of the two to rape. If you're raping a girl, what does she do? She cries and screams for help. Well, if she's deaf she'll be whining, but she won't be calling out for someone to save her ass. She'll squawk something that sounds like a seal with his slippery little cock slammed in a door. This will be annoying, of course, but no one will care. People will probably just think that some retard sprained her ankle. Thus, nobody will come to help her, and the neighbors will be pissed off at all the ruckus. Plus, I don't have to stuff a sock in her mouth, which is one less thing I have to bring along in my rape tool kit, which includes the following:



# A woman is battered every 15 seconds.



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## A woman is raped every two minutes.



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# DV is the leading cause of death for women between the ages of 15 and 44.

More than car accidents, muggings and rapes combined.



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# 90% of patients in hospital for SV are women.



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### There are nearly 3 times as many animal shelters in the US as there are shelters for women and children.



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# Women who leave are at a **75%** greater risk of being killed by the batterer.



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# 3 out of 4 survivors are raped by people they know.



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Deaf people are at higher risk of experiencing long-term domestic and sexual violence due to the lack of accessible services.



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## **Group Brainstorm**

# What causes violence against women?



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- Anger management
- Drugs and alcohol
- Money problems
- Psychological problem (ie depression)



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## Violence is rooted in the patriarchal power structure in our society. It is created and encouraged by sexism, oppression and abuse of power.



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# See you @ 10:45



Ponder this:

How does your understanding of the cause of domestic and sexual violence impact your interpretation?



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# Domestic Violence in the Deaf Community



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# **Learning Objectives**

As a result of this module, participants will be able to:

- Recognize general power and control tactics
- Describe unique barriers for Deaf survivors
- Identify tactics abusers use against Deaf survivors
- Identify key resources and support systems available for Deaf survivors



### **Definition**

### A pattern of behavior that is used to gain and maintain power and control over an intimate partner



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### Terms

### Domestic Violence, Abuse

## Intimate Partner Violence

- Married, formerly married
- Living together (not as roommates), formerly living together
- Engaged, formerly engaged
- Dating, formerly dating
- Have a child in common
- Includes same sex couples





#### Raise your cards to indicate your answer



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# There are almost one million reported incidents of domestic violence each year.



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# Survivors need therapy to stop the cycle of violence.



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# People who are violent in an intimate relationship are violent in all of their relationships.



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# Police officers are effective protection for battered women.



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### Batterers can be loving partners.



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# If women changed their behavior, their partner would be less violent.



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## Most battered women cannot leave their batterers without assistance.



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# Children should be with their father even if he is violent to their mother.



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### Discussion

# Why is it important as an interpreter to distinguish myths from facts?



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### Let's practice self-care....



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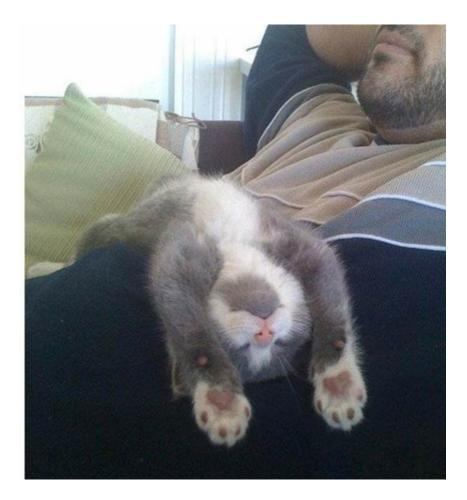
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### **Power and Control Wheel**

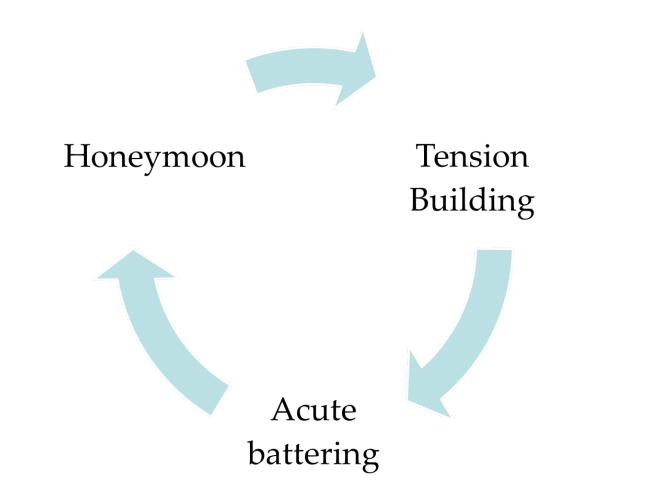
## **Group Brainstorm**



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**Cycle of Violence** 





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### **Frequency and Intensity**

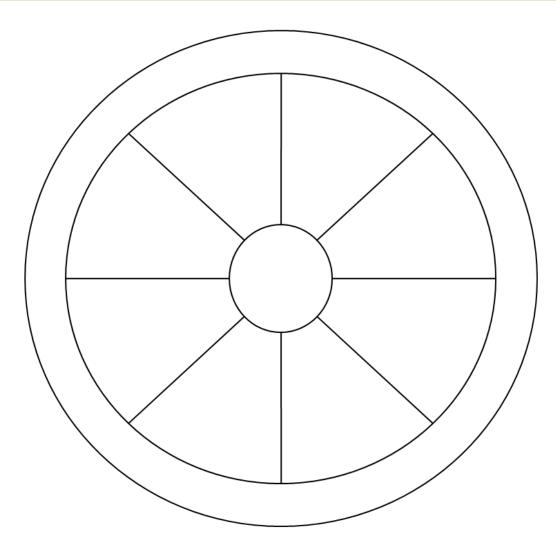




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### **Blank Wheel**

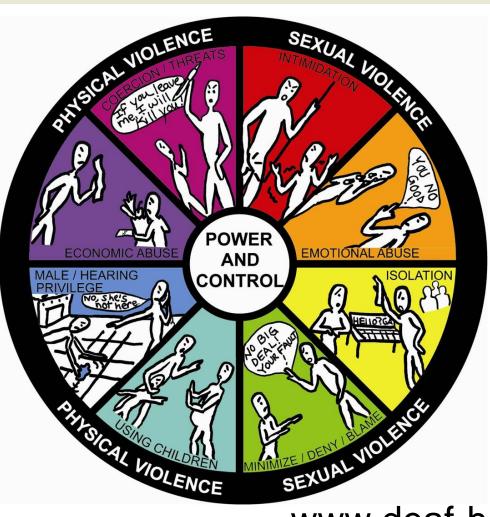




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### **Power and Control Wheel**



www.deaf-hope.org



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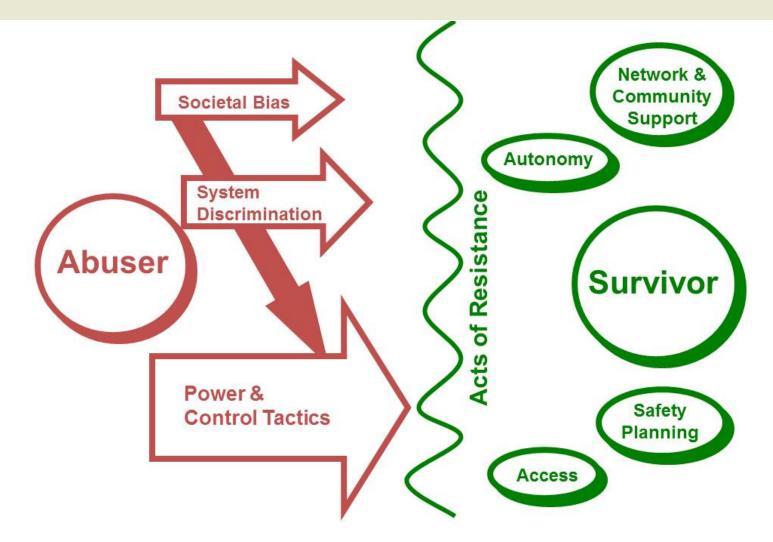
#### Till Domestic Violence do us Part



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## **Compounding Impact...**





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#### **Scenario**

You arrive to an interpreting assignment for a woman receiving counseling services. You realize that you have interpreted for her at a previous assignment where she has indicated that she still accepts the abuse. You are severely concerned about her safety.

How do you handle your concerns in a way that maintains ethical and empowering interpretation?



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#### Lunch-See you @ 1:15



Ponder this:

What are some of the specific manipulation tactics abusers use regarding interpreters and communication access?



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## Sexual Violence in the Deaf Community



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## **Learning Objectives**

As a result of this module, participants will be able to:

- Define and describe key aspects of sexual violence;
- Identify the complexities of coercion and consent in a sexual violence context; and
- Describe the unique dynamics of sexual assault against Deaf survivors.



#### What is Sexual Violence?

- Any forced sexual activity
- Violence using sexual acts to control
- Definition depends on jurisdiction
- Penetration or not



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## **Forms of Sexual Violence**

- Incest
- Pedophilia
- Acquaintance Rape
- Date Rape
- Spousal Rape
- Gang Rape
- Child Sexual Abuse
- Drug facilitated rape
- Hate crimes

- Stranger rape
- Unwanted touch/talk
- Molestation
- Internet/technologybased
- Sexual harassment
- Stalking
- Statutory rape
- Trafficking/sexual exploitation



#### At the core, all forms of sexual assault are committed or attempted against a person's will, without their consent.



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## Rape is not about a need for sex – it is about gaining power over others

## Sex is only the mechanism for rape



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Small group discussion



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## Rape is a last-minute thing, an impulsive act.



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#### **MYTH**



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# Women can avoid rape if they just fight back.



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## Most rapists choose a stranger as their victim



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#### **MYTH**



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#### Many reports of rape are false



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#### **MYTH**



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## Men have sexual urges they can't control which leads them to rape.



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#### **MYTH**



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#### **Recall previous discussion**

Why is it important as an interpreter to distinguish myths from facts?



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#### Anyone can be a target...

- Age
- Ability
- Gender
- Race
- Sexual Orientation
- Socioeconomic Status
- Women are the most affected



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to determine if sexual assault occurred:

Age of consent

16-18 depending on state

Ability to consent

alcohol? developmental disability?

• Willingness to consent

free from threat, NOT required to say "no"



#### CONSENT =

## Understanding

&

## Willing



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#### **Small Group Discussion**

How does defining sexual violence in terms of **consent** shift the framework for understanding this issue?

How can these concepts shape your work in the interpreting context?



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## **Perpetrators – Study Findings**

- Why rape? Because they can.
- Men across all demographics
- Average age 21-22
- Started raping at age 13
- 10% raped over 25 times before being caught
- In general rapists got away with 10 rapes for every 2 they got caught for



#### **Tactics of Perpetrators**

- Give her a false sense of security, build trust
- Take advantage of her lack of sexual knowledge
- Give her drugs without her knowledge
- Find her vulnerability, a means to coerce
- Attack before she can sense what is coming



#### **Tactics of Perpetrators**

- Exploit the lack of access to accommodations
- Exploit the fact that people will not believe her
- Steal adaptive equipment so she can't get help
- Exploit the size of the Deaf community
- Use hearing privilege



#### Let's practice self-care....



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#### **DV/SV** in Context



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## What barriers exist for Deaf survivors seeking help?



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#### **Barriers to Getting Help**





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#### **Unique Barriers in the Deaf Community**

- Hierarchy of power in the Deaf community
- Abuse in educational settings
- Lack of accessible/culturally competent services
- Fears that exposure will lead to the closing of Deaf schools loss of Deaf culture
- Perceived as more vulnerable, easier to isolate
- Learned "need to please"
- Fear/Mistrust of people in positions of authority
- Tradition of secrecy protection of perpetrators who are members of the community



## **Empowerment Philosophy**

- No judgment
- Believe
- Unconditional support
- Listen
- You are the expert
- Normalize their experience you are not alone
- Don't assume ASK



## **Empowerment Philosophy**

- Support survivor in getting sense of power back
- Present options to choose from
- Show respect
- Identify and cultivate strengths
- Exchange information among equals
- Encourage them to take responsibility and action



### Discussion

In what ways do these principles of empowering advocacy relate to your role as an interpreter?

Which tasks are appropriate for the interpretation process?



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### Scenario

You arrive at an interpreting assignment with a woman who is meeting with her hearing Department of Rehabilitation counselor regarding her job search. During the assignment it is disclosed that she was molested as a child (AMAC). This has clearly affected her self-esteem, she feels she is not deserving/capable of personal goals.

What are some empowering interpretation/boundary choices available to you?



### **Locations**

- First response at the scene of the crime
- Police Interview
- Hospital Exam
- Services at a Shelter or Rape Crisis Center



### **First Response at the Scene**

- Staging
- Safety
- Triage
- Give information for local Deaf advocates



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### **Police Interview**

- Staging
- Safety
- Understanding the criminal process
- Videotaping



### **Hospital Rape Exam**

- SART
- Collection of evidence
- Who is in the room and where?
- Discharge and follow-up
- Vocabulary



### **Rape Crisis Center**

- Intake
- Immediate needs
- Collaboration with other service providers
- Advocate role



### **Service Providers**

- Community DV/SV advocacy services
- Domestic violence shelters
- Transitional housing programs
- Survivor centered legal advocacy services
- Children's advocacy services
- State DV/SV coalitions
- National hotlines



### **Legal Services**

System based advocates:

- Protection order advocates
- Victim Witness support and advocacy
- Prosecutor's office and advocacy
- Civil court remedies and resources
- ADA and civil rights resources



### **Resources in the Deaf Community**

- The Deaf community as a support system
- Deaf Advocacy services
- DV/SV Deaf advocacy services
  - Justice for Deaf Victims National Coalition (JDVNC)
- DV/SV "aware" interpreters & referral services



### **Personal Resource Cards**

- Domestic Violence
- Sexual Violence
- Professional Decision-Making
- Trauma and Self-care
- Task list



### **Sample Domestic Violence Card**

### Terminology

- Restraining order, IPV, hearing privilege
- Protocol
  - Shelter intake: Use care interpreting regarding alcohol and drug use
- Local Resources
  - Haven 248.334.1274 www.haven-oakland.org
  - Deaf CAN 313.340.3234
- National Resources
  - JDVNC



### **Sample Sexual Violence Card**

### Terminology

- SART, SANE, colposcope
- Protocol
  - 911 First Response: stand on the opposite side of the officer's gun

#### Local Resources

Sex Workers Outreach Project www.swop-mi.org

### National Resources

rainn.org



### Break-See you @ 3:30



Ponder this:

What are some specific barriers interpreters can support survivors to navigate?

What are more appropriately within the advocate role to navigate?



### Trauma-Informed Understanding the Effects of Trauma and Implications for Interpretation



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### **Learning Objectives**

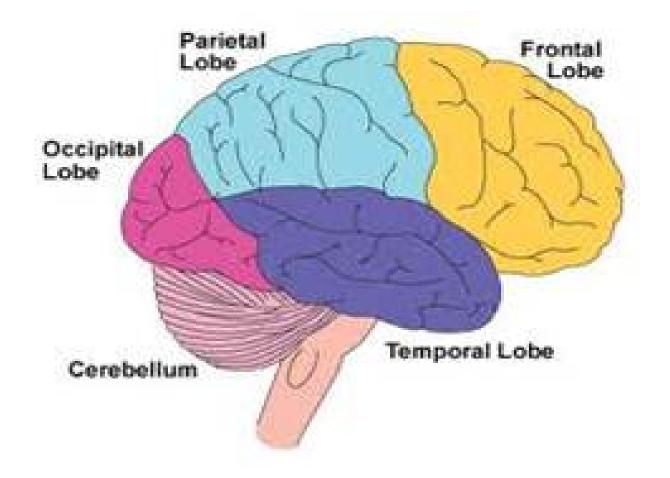
## As a result of this module, participants will be able to:

- Describe how the brain is impacted by violence;
- Identify how trauma manifests with survivors; and
- Describe how an understanding of trauma impacts decision-making as an interpreter.



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### **Diagram of the Brain**





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### **Brain Functioning Under Threat**

- Oldest part of the brain ("reptilian brain") senses risk
- Blood flow is diverted to the peripheral muscles, in preparation to Fight Flight or Freeze
- Energy is used to escape the danger or overcome it
- We experience escape or "victory":
  - energy dissipates
  - feel a sense of success and capability
  - Ife resumes its rhythm and "norm"
- Until another perceived threat emerges...



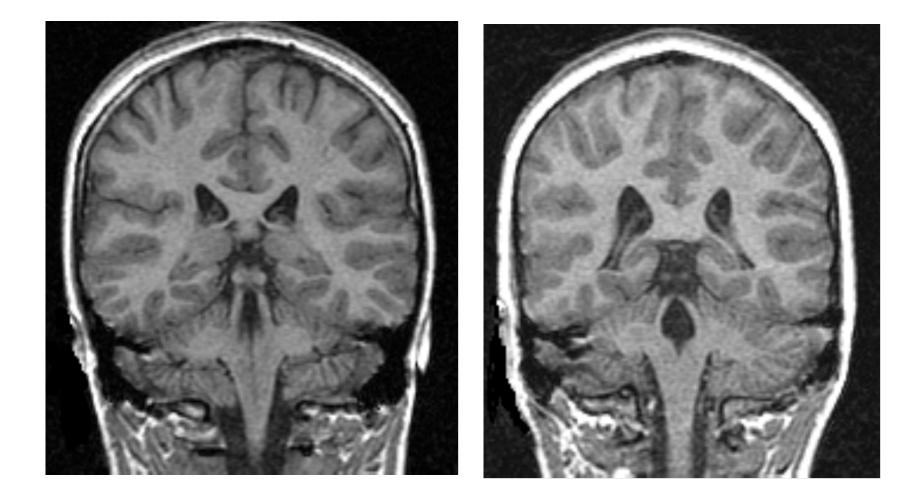
# Events that cause trauma for one person may not cause trauma for another.



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### Brain (De Bellis et al., 1999)





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### How does trauma show?

- Survivor's affect may not reflect internal emotions
  Frustrated, annoyed, flat, withdrawn
- Fear, depression, lack of trust, inability to feel safe
- Difficulty staying in the "here and now"
- Memories fragmented, non-sequential, gaps
  - Timelines may be distorted.
  - Gaps may be filled in with what seems logical.
- All responses are "NORMAL" for that person



### When Survivors Reach Out

They have:

- Hope that the abuser is wrong
- Knowledge of who to contact
- Belief that someone will understand, care and attempt to meet their needs
- The words to explain what they need
- Access to communication modality
- Trust in an interpreter to communicate needs





# How is an understanding of trauma relevant to my work as an interpreter?



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# EVERY interaction is an opportunity for healing.



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### Research- not mistakes



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### **Scenarios**

You arrive at a hospital to interpret for a survivor during a Sexual Assault Forensic Examination. When you introduce yourself to the survivor, she begins giggling.

You arrive at a rape crisis center to interpret for a survivor during an intake. The survivor seems depressed and crying inconsolably.



### Small group discussion

- How might your introduction of yourself be different depending on the survivor's affect?
- Would you have to combat any of your own belief systems?
- How could that impact your interpreting relationship?



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### As an Interpreter

- See the individual!!
- Remain calm
- Do not see responses as a lie, resistance, unwillingness to "cooperate"
- Interpret accurately, check with the survivor for clarity if needed
- Foster an atmosphere of "research" rather than mistakes
- Expect that people who have been traumatized will behave as if they have been traumatized
- Know where your boundaries are and communicate them clearly



### Resources

- "Waking the Tiger" by Peter Levine
- The Post Institute www.postinstitute.com
- "Creating Sanctuary" by Sandra Bloom
- Trauma Stewardship by Laura van Dernoot Lipsky
- David Lisak, Ph.D.
- Each other
- Those you serve



### Day One Closing Discussion

### **Questions & Comments**



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### Day Two



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## How can we create a safe space?



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### Review of Foundational Concepts



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## **Review: Power**

## (power) (power) Culture/Society $\rightarrow$ Oppression $\rightarrow$

messages, permission, privilege

Hierarchy

(power) DV/SV → Trauma



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# Empowerment (survivor choice) is vital to the process of increasing safety



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# How do we achieve that non-judgmental interpretation?

First check yourself (beliefs, biases, personal trauma, need to help).

Second, educate yourself (develop resources, a personal plan).



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## "In Her Shoes" Experiential Exercise



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#### "In Her Shoes" Reflections

- What did you feel?
- How did your perspective change?
- What implications did this experience have for your interpreting work?



#### Break-See you @ 10:45





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#### Language of the Movement

## **Exploring Terms and their Meaning**



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## **Learning Objectives**

## As a result of this module, participants will be able to:

- Identify terms and concepts unique to interpreting in the DV/SV field;
- Describe how these terms can be used in different contexts; and
- Apply specific decision-making tools to improve language choice in various interpreting settings.



#### How can language choice be:

- Survivor-Centered
- Trauma-Informed



#### **Considerations**

- Survivor's language and word choice
- Conceptual accuracy
- ASL rules
- Impact on the survivor, emotional state
- Political and Social implications
- Setting
- Not "one size fits all"



#### Discussion

## Interpreting scenarios

- •What "specialized" terms might come up in this setting?
- •What are the sign alternatives for these terms?
- •How might this scenario impact language choice?



#### Let's practice self-care....



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#### **Self-Care**





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#### **Self-Care**





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#### **Self-Assessment**

- Is there language that triggers me as the interpreter?
- How does my experience & identity impact my interpretation choices? (as a survivor, or...)
- Do I avoid certain terms/concepts?
- Can I identify situations in which I judge, choose victim-blaming terms?



#### **Personal check in - Can I handle this?**

- Do I know the appropriate vocabulary? Am I willing to use it? Can I be sensitive to the survivor's language needs?
- What are my options if the survivor needs an advocate who understands Deaf culture and communication?
- Do I have a mechanism to safely and appropriately debrief?



# Update DV/SV resource cards with additional terminology



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#### Lunch-See you @ 1:00



Ponder this:

How do you set a boundary with hearing professionals who ask you to do things outside of your role as an interpreter (such as give your opinion or explain something to the Deaf survivor)?

What are some options for redirecting them?



### **Professional Decision-Making** Application in DV/SV Settings



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## **Learning Objectives**

As a result of this module, participants will be able to:

- Identify how the Code of Professional Conduct applies to interpreting in the DV/SV setting;
- Describe how boundaries can be established to maximize interpreter neutrality in this setting; and
- Apply specific tools for ethical behavior to interpreting scenarios with Deaf survivors.



## **Professional Decision-Making**

#### **Primary Goal:**

 <u>Awareness</u> of personal/professional boundaries and options

#### Available Guidelines:

- Domestic/Sexual Violence models
- Code of Professional Conduct
- Demand-Control Schema



#### **DV/SV Models**

- Power and Control Wheel
- Survivor/Empowerment model
- Trauma-informed practice
- Attitudes about violence

"Helper" – "Judge" spectrum



#### **Power and Control Wheel**



www.deaf-hope.org



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#### **Advocate's Role**

- Reframe messages of the perpetrator and the system
- It is not your fault.
- You deserve to be safe. How can we support you in feeling safe?



#### **Survivor's Perspective**

- Why is it important
- Judgment, victim-blaming
- No two experiences are the same



#### **Individual Activity**

Describe personal experiences or beliefs that may impact your professional decision making while interpreting in this setting.

Your writing will not be shared with the group, feel free to write whatever comes.



#### **Privilege**

Rights, advantages and immunities enjoyed by \* white, hearing, straight, young, abled..... \* people in a culture that values those qualities as the norm



#### "An invisible package of unearned assets which I can count on cashing in on each day, but about which I was 'meant' to remain oblivious."

- Peggy McIntosh



#### **Small Group Discussion**

Use scenarios from language module

Discuss power dynamics from each perspective

Where do I have privilege? How does that impact my interpretation, my interaction with consumers? How can I minimize it or use it for good?



#### **Discussion**

Where do I have privilege? How does that impact my interpretation, my interaction with consumers?



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#### Let's practice self-care....



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#### **Seated Self-Care**







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## **Code of Professional Conduct**

- 1. Confidential communication
- Possess the professional skills and knowledge (2.1 judiciously share resources)
- Manner appropriate to the situation (3.4 mandatory reporting?)
- 4. Respect for consumers
- 5. Respect for colleagues
- 6. Ethical business practices
- 7. Professional development



#### Demand-Control Schema Dean-Pollard

#### Demands:

- Environmental (setting)
  - Limited space, temperature, specialized terminology
- Interpersonal
  - Cultural difference, power dynamics, access to information, interactional goal of consumers
- Paralinguistic
  - Clarity of the "raw material", accent, signer has an object in their hands



#### Demand-Control Schema Dean-Pollard

#### **Control Options:**

Skills, decisions, or other resources that can be brought to bear in response to demands

Education	Experience
Preparation	Peer support
Behavioral interventions	Positive self-talk

**Translation decisions** 

Acknowledging the demand



## Demand-Control Schema Dean-Pollard

**Control Options:** broad array of interpreter characteristics, abilities, judgments, and actions that contribute to effective work. The term does *not* refer to "taking control," "having control," or "being in control" over demands

#### **Pre-assignment controls**

- Language fluency
- Assignment preparation

#### Assignment controls

• Behavioral and translation decisions

#### **Post-assignment controls**

- Check in with support person
- Continuing education



#### **Scenario**

You are asked to an interpret for a police interview. You do not know the name of the Deaf consumer. Upon arrival, you discover that you previously interpreted for this consumer in middle school for several years. He is now being accused of rape and the police are gathering evidence.



#### Discussion

• How might this prior relationship affect your interpretation?

• What would the CPC guide us to do?

• What demands and controls are present?



### **Scenario**

You are interpreting at the courthouse for restraining order hearing. Upon arrival you find that you are the only interpreter for BOTH the survivor and the perpetrator. The judge says they are trying to cut costs and can't afford two interpreters.

- What are your options?
- How could the DCS be helpful?



### Scenario

You are called to interpret for first responders at a 911 domestic violence call. Both the survivor and abuser are Deaf. When you arrive, you discover that there are three young hearing children present, who witnessed their father beating their mother.

- What impact does this have on your interpretation?
- What self-care options are present?
- What are the mandatory reporting considerations?



### **Mandatory Reporting**

Certain professionals are required by law to report to DCFS (Department of Children and Family Services) if they have reason to believe that a child is in danger



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### Rescuing

- Thinking we can change someone else's life
- Power and Control?
- The survivor
- Learned helplessness??
- We think it will work
- Survivors ask us to
- It is concrete, easy
- Feeling of power
- Impatient with the system, slow



## Warning Signs

- Spend a lot of time thinking about the survivor
- Emotional, angry about her decisions
- Consider loaning money, taking her home
- Work on her case during my time off
- Making excuses for her
- Think I know what is best for her



### **Dyad Discussion**

- How will I know if I am ready to work in DV/SV settings?
- What skills are important to possess?
- Identify two areas where I can further develop my skills.



# Create your ethical behaviors resource card



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### **Sample Ethics Card**

- General Resources
  - Take a DC-S workshop
- I will debrief cases once a month with:
  - Janet Doe 313.555.1212
- Local legally certified interpreters
  - Janet Doe 313.444.5656
- Mandatory Reporting resources:
  - www.michigan.gov



### Interpreter Safety in Domestic/Sexual Violence Settings



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### **Learning Objectives**

As a result of this module, participants will be able to:

- Understand the safety planning process for survivors;
- Identify ways to improve safety before, during and after an assignment; and
- Develop resources to support ongoing personal and community safety.



### **Working Definition**

Safety planning in this context is a process of being aware of possible additional risks posed by situations involving domestic or sexual violence, to the survivor as well as to the interpreter, and planning to avert injury, danger or loss



### **Survivor-Centered Safety**

• The survivor is the expert - self determination is the best pathway to safety

• Don't use safety planning as a band-aid, mean it!

• Safety planning is an ongoing process for the survivor.



### **Implications for Interpreters**

- Safety planning requires flexibility
- Boundaries vs. limits Remember your role
- Prepare:
  - Know communication access laws, have materials to share with professionals
  - Strategize with advocates
  - Be aware of the communication environment
  - Know local domestic/sexual violence resources



### **Planning Ahead**

- Should I accept this assignment?
- Gather information
- Prepare for safe arrival/departure
- Ask about site security
- Communicate with a safety partner
- Be prepared cell phone, gas, cash
- Practice personal safety skills



### At the assignment

- Remove credentials
- Make sure car doors are locked
- Be cautious about sharing personal information
- Be mindful about interpreting menacing gestures, tone and incorporation of affect to fully inform professionals involved as to levels of risk on the scene

### Ask for support from DV/SV professionals



### **Considerations for Safety**

- Think about the precedent you are setting
- Demand-Control Schema
- Think about perceived alignment with either the survivor or abuser
- Position for privacy (who can see interpreter?)
- Position for safety (do I have access to exit?)



### **Immediately After**

- Remember everyday safety skills
- Ask for security escort to your car
- Do not leave with the participant/s
- Have keys in hand
- Check your surroundings
- Inform your partner when you arrive home
- Debrief with another professional



### Discussion

Using safety scenarios handout:

What are safety plan techniques that can be applied to each phase of the scenario?

(before/during/after)



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# Create your safety plan resource card



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## Sample Safety Plan Card

### Before

 I will discuss with my agency detailed information about an assignment which might include a perpetrator to prepare my safety plan ahead of time.

### During

 I am practicing clearly interpreting any menacing gestures at the assignment. I make note of possible options in interpreting decisions to discuss with my debriefing partner.

#### After

 I debrief each month with an appropriate colleague about general challenges in the interpreting process



### Break-See you @ 3:30 PM



### Ponder this:

Who in your interpreting community is an appropriate person to debrief or staff difficult assignments with? What qualities are important in that person?



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### Self-Care Considerations for Interpreters



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### **Learning Objectives**

## As a result of this module, participants will be able to identify:

- The definition of secondary trauma;
- Strategies to process feelings and reactions to affectladen information; and
- Strategies that promote health and self- care.



### **Vicarious/Secondary Trauma**

Pervasive, cumulative change in the helper's inner experience resulting from empathetic engagement with traumatic material (Figley)



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## **Contributing Factors**

- Intensity of contact
- Degree of "need to help"
- Limited opportunities to debrief
- Lack of resources to cope in a healthy way
- Personal history
- Contentment with your work and workplace
- Life circumstances (health, stress, relationships)
- Professional preparation, self-esteem
- Use of first person language



## **Physical Impact**

- Continued disruption of chemical levels
- Tissue Damage
- Exhaustion/fatigue
- Depression
- Insomnia or sleeping too much
- Headaches
- Gastrointestinal problems
- Ulcers

- Frequent colds or flu
- Shortness of breath
- Weight loss or gain
- Hypertension
- High cholesterol
- Heart disease
- Impaired speech
- Inability to concentrate
- Sexual Dysfunction
- Organ Failure



### **Emotional Impact**

- Inner sense of emptiness 'nothing left to give'
- Inability to cope with stress
- Anger, bitterness, resentment, disgust, guilt, worry, boredom
- Disillusion/loss of idealism
- Feelings of powerlessness
- Overconfidence/risk taking
- Rigidity to change
- Loss of concern/apathy
- Emotional exhaustion
- Distancing/labeling

- Changes in identity, world view, spirituality
- Inability to manage feelings
- Loss of connection to others
- Poor judgment, decision making
- Sense of futility, loss of meaning
- Decreased sense of safety, trust, esteem, intimacy, control
- Change in perception, memory
- Cynicism about previously valued things
- Devoid of joy, unable to laugh
- Feelings of failure



### **Behavioral Impact**

- Low job performance
- Low job satisfaction
- Decreased communication
- Withdrawal
- High job turnover
- Increased absenteeism
- Loss of enthusiasm for job
- Increased drug/ alcohol use

- Lack of focus on job
- Lack of priorities
- Lack of sense of purpose
- Accident prone
- More complaints about job
- Forgetfulness
- Poor concentration
- Workaholism

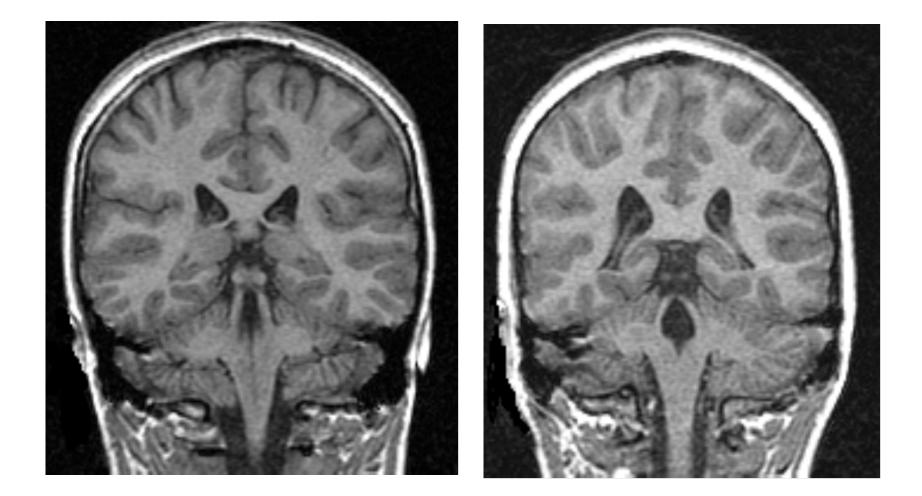


### For Interpreters...

- Interpreters are in unique roles where they "hold" information about individuals across situations and time – often without knowing the outcome
- Our presence and experiences affect what we bring into the room and how the dynamics play out
- Bound by confidentiality, we often can experience a sense of helplessness and loss of control.



### Brain (De Bellis et al., 1999)





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### **Individual Activity**

### Take the Vicarious Trauma Self Assessment questionnaire



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# What did you notice about your self-care habits?



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### **Ethical Imperative**

Successful trauma work requires attention to the needs and experience of the professional.



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### **Develop Personal Resiliency**

- Diminish intensity in your life
- Stop over-nurturing, detached concern for clients
- Limit exposure to outside traumatic material
- Set boundaries between home/work (clothing, rituals)
- Change your circumstances
- Keep your sense of humor
- Review priorities
- Nurture a sense of joy, beauty, love and connection
- Seek out experiences/people which instill comfort, hope



### **Develop Personal Resiliency**

- Exercise
- Sleep
- Meditative Activities prayer, yoga, music, tai chi, gardening, walking, running, meditation
- Healthy nutrition
- Enjoy nature as a healing force
- Develop hobbies, creative interests



### **Develop Personal Resiliency**

### Create meaning

- Slice of life
- Re-framing
- Choose the ending of the story
- Challenge negative assumptions



### Discussion

### What are your self-care options?

- I know both the perpetrator and survivor.
- I am interpreting for a child during a sexual assault exam.
- The interpreting circumstances trigger a personal experience of trauma.



# Create a specific and executable plan that you commit to.



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### **Sample Self-Care Card**

Two habits I intend to implement for self-care are:

- I commit to reducing traumatic TV material
- I check in with \_\_\_\_\_ (name of an appropriate colleague to staff cases) once a month about challenging interpreting scenarios



# Review Task list resource card and make additions



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### **Sample Task Card**

Skills to develop

Resources to develop

People to contact



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### **Day Two-Closing Discussion** Questions & Evaluation



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### You Rock!-The Power of Positive Thinking





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