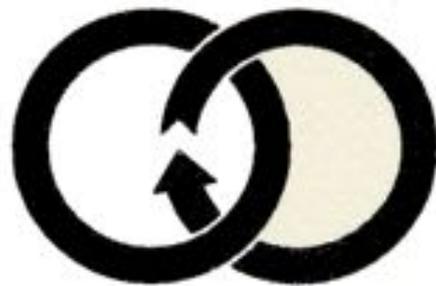


# Annual Review 2015-2016

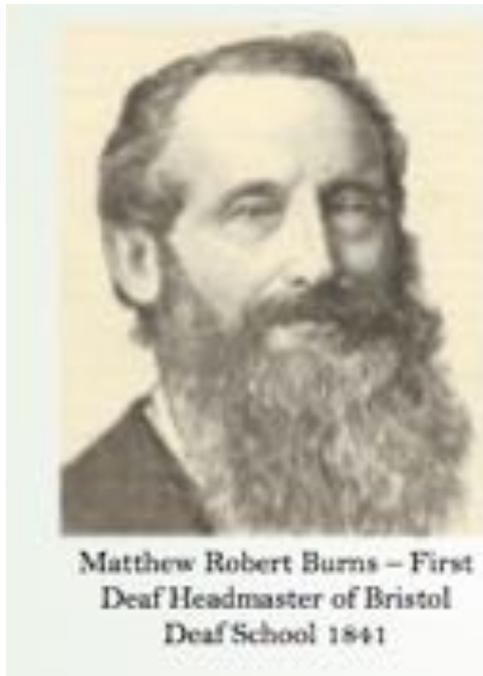
The Trust for Deaf  
Studies



The Vassall Centre  
Gill Avenue  
Bristol BS16 2QQ  
Charity Number: 289302

[www.deafstudiestrust.org](http://www.deafstudiestrust.org)

## Plans, Developing Community, Deaf Awareness and Technologies



**175 years since the opening of the first Deaf School  
in Bristol: a history to celebrate – a special event  
planned in November 2016**

## Chair Report

Since the last AGM, we have seen many changes in the Deaf community as well as in society as a whole. (As of today, we are also gazing into the unknown as Britain votes to leave the EU).

Although many Deaf organisations have experienced severe financial difficulties, we have been fortunate in that the Deaf Studies Trust has been able to maintain a stable position and is able to continue its work as it has in the past.

A significant amount of our time over the last year has been taken up with personal support to the Board of the Centre for Deaf People in Bristol. As it has now reached a relatively stable level of financing, we can perhaps go back to the core activities of the Trust in seeking and using research funds.

We maintain a priority in regard to Deaf people's health and in the last year without major funding have concentrated on the training of medical students. This continues to be a very popular option for them and we believe it is a sound investment for the future of the Deaf community.

As with many trusts we would be happy to have more Trustees and we remain open for volunteers with the range of skills needed these days to support a charitable trust.

Finally our grateful thanks goes to Jim Kyle, our secretary and to the Trustees for helping us to continue to move forward during this difficult time.



Hilary Sutherland,

Chair, 2016

## Secretary's Report

It feels as if the Trust is reporting on a continuing stream of difficulty in the Deaf community in the UK. The general outlook for public financing of difference and disability is gloomy and uncertain. The great steps forward in equalities and discrimination appear to have stalled somewhat and it feels like Deaf people have taken a step backward and maybe even dropped to near the bottom of social priorities.

Last year I talked about “Deaf space” replacing “Deaf place” and this has been very much the theme in the work this year. With the loss of the Bristol Deaf club building in 2015, the community has fragmented. When we organised a Deaf day in November, nearly 20 different groups were represented. Most of the groups have no funding or recognition from society and have arisen because of the lack of a focal point.



When we examined views on the British Deaf Association among community members throughout the UK, we found clear evidence on a loss of focus and a lack of clarity on the place and direction of the community. Even the sense of identity was being challenged.

As a result of this perception, most of our work has been to do with “repair”. By this I mean, the work to re-build Deaf confidence that there is a role in society, that there are jobs and respect. At the same time, there is a need to create a financial base and a forward plan. DST has been involved with the Board of the Centre for Deaf People to try to reach a point where the community can feel they are able to plan and to have a good chance of achieving a meaningful role in society. This struggle is being repeated in other parts of the UK.

DST research has been reduced this year and the major activities have been to do with R&D (research and development – more practical activities) rather than pure research work. One project related to learning difficulties and the other to creating Deaf events. The DST 30 years AGM last year was considered a great success and this was followed by other community work. DST is continuing to train medical students and in doing so is able to pass on the information developed over the years.

Thanks to the members of the Board, the sign language tutors and the researchers who have all contributed this year. Special thanks to Esther Drewe who manages our finances.

Jim Kyle, Secretary

## Deaf Health Awareness and Service

Our research in recent years has confirmed the outcomes of poor access to health services. That is, we are now beyond the point of asking only for access to GPs, A&E and so on, but are now able to demonstrate the negative outcomes (and thereby the cost to the National Health Service) of the failure to address the problems at point of contact.



It is not just a matter of providing sign language interpreters, it is more about understanding the impression that Deaf people have, that “health” is something conducted in a hearing professional world and one over which they have no control. Community Medicine recognises the importance of the individual’s sense of well being in maintaining health but as yet has not been able to engage with Deaf well being. Without this feeling of control over health outcomes, Deaf people have little incentive to seek out and implement their own solutions in diet, exercise and post-operative care. As a result, Deaf people tend to be seen as ill and in need of treatment and prevention and fitness have not been on the agenda..... at least in a form which is appropriate to the Deaf community. Simple access provision as in a BSL interpreter appearing in a consultation, allows the health practitioner to shift responsibility for communication; the Deaf person then sees the consultation as populated by two hearing people.

In our extended course for medical students, we present the view that a doctor may share in the problem in delivering the health care, rather than the Deaf person being disabled by a lack of communication ability. Better interaction and shared responsibility becomes the target.

### **BoldShield – for those with learning disabilities (LD)**



Bold Shield was a short project over 6 months funded by the Small Business Research Initiative. Often LD is not associated with competence but rather with the extent of service provision and care offered to an individual. Attempts to express themselves are often hampered by the service provision itself. BoldShield was set up to address this weakness ie to find a user-centred design for video technology to increase independence and improve quality of life.

We provided a Deaf perspective on video communications. We collected data through focus groups about access to health care and technology designed to improve access, to provide efficient health servicing and to achieve cost savings.

Twenty Deaf people took part in focus groups. Thirteen were already receiving social care and help with independent living (ie had an individual care plan)

and were either in a sheltered housing location or were in the community. We found that:

- (a) Deaf people have no direct means to reach help in the case of a personal health problem. They have to “hope for the best”, hope that the problem will go away or else wait until there is a hearing person who can intervene on their behalf
- (b) Few people had confidence in the provision of text information and some reported personal health issues arising from their inability to read leaflets or instructions regarding medication
- (c) Most of the participants view interpreting provision as the solution – whether live on-site or through relay services online
- (d) Total Conversation – video, voice and text – is the telecoms standard which Deaf people prefer for person to person and person to relay conversation
- (e) Devices which help deaf people to monitor their own health characteristics were welcomed with enthusiasm



Deaf people who have LD have the greatest difficulty in explaining their needs and have special problems with health care. DST see one solution in providing enabling technology to support independence and well being.

## Interpreting Services

In March 2016, DST submitted a response to questions asked by the Department of Work and Pensions. Their concern was about interpreting in the UK and particularly about the costs of the Access to Work scheme. You can see more of the detail on the DST website but here are some of the points we wished to make based on our research.

1. Deaf people *prefer* to interact directly in their own language, rather than to use intermediaries who affect their privacy
2. However, Deaf people need to employ sign language interpreters for nearly all contact with hearing services and organisations.
3. Deaf people consider there are too few interpreters, meaning there is no service except those bookings which can be predicted 3 weeks in advance.
4. Deaf people consider interpreting is too expensive; the cost should be shared because hearing people need the interpreter as well..
5. Deaf people think that the provision of interpreters often relieves hearing people of the need to adjust and tends to reduce their Deaf awareness. In The interpreter is seen as being “attached to the disabled Deaf person.”
6. Deaf people believe that there is a lack of adequate interpreter training.

7. All of the interpreters are hearing; some Deaf people believe the interpreter is on the side of the hearing person.
8. The provision of on-demand, online sign language *relay* interpreting was demonstrated in UK. It was very well received by Deaf people as a major step towards freedom of access and equality.

We are yet to learn if DWP will make changes and help to develop interpreting.

## **Lost Spaces** – funded by the Research Council in partnership with University of York St Johns

In 2008, the Bristol Deaf community was a thriving, active and integrated community of sign language users. By 2014, it had lost its centre, all its services, all of its staff and had fragmented into small interest ad-hoc groups meeting in varying locations. The Lost Spaces project team in conjunction with the Deaf Studies Trust, set out to analyse the remaining community feeling and to repair the damage of the previous years. In order to do this, events were arranged and an action team formed which met regularly between Easter 2015 and December 2015.



By early 2016, much had been saved and the Centre for Deaf People (the core charity) had formed an action plan, created a budget, begun the process of re-networking. Several events were arranged by DST

(a) ***Deaf Past***

A participation evening with performance, displays and artefacts. Bristol Deaf Memories (June 2015) collected materials, cuttings, photographs and even videos of the community as it was. Participants were invited to dress in period costume and to recount their own stories stimulated by a historical pageant acted out in sign language.

(b) ***Deaf present***

(i) Two weekend workshops were set up: one to develop skills in video editing and film-making and the other to explore sign language poetry.

(ii) ***Deaf Showcase Event***

This event (7<sup>th</sup> November 2015) was designed to build Deaf confidence and to allow the community to show to each other what they were doing. Nearly 30 groups came and set up a stall and over 100 people attended the all-day event. This was the first major step forward in re-integrating the community and it was an opportunity to explain what had happened and to offer a business plan for 2016 and beyond..

(c) ***Deaf Aspiration***

A public march (21<sup>st</sup> November 2015) was organised and took place

through the streets of Bristol to demonstrate that the Deaf community was still alive and still expecting to contribute to society in general. On the back of the march, a new Bristol Deaf Accord was devised and is being taken forward in 2016 as part of the community planning.

All in all, there has been activity on a wide range of fronts. With the development of the Centre for Deaf People, the support from DST reduces and we will go forward into the next year with new ideas and a return to our core values of research and communication.

## Treasurer's Report

### **The Statement of Financial Activities for the Year to 31st March 2016**

The best yard-stick of the state of financial health of the Trust is the total of the “unrestricted” funds. This stands at £19,441- comfortably up on last year’s figure of £11,085 (see Note 7 in finance statement). In a healthy business, this should be equivalent to at least 3 months “unrestricted” spending. The “unrestricted” spending came to £5,817 for the whole year (see P 4) or £1,454 per 3 months. The Independent Examiners feels that £3,000 would be a safer figure to aim for. The actual figure is £19,441. This indicates a very healthy situation.

The other useful yard-stick is the total “restricted” funds. This total is made up of monies we have received for work currently in progress. This work should result in profits which will then become “unrestricted” funds. Note that this is only a guide to future activity. There is no guarantee as to how much profit we will make nor when we will receive it. At the beginning of this year, “restricted” funds stood at £8,990. At the end of the year, this stood at £4,086 – a decrease of £4,904. This is only an indicator. It shows that the trust has lost some ground during the year, but is still in good financial health.

Clive Kittel,

June 2016

**The Deaf Studies Trust continues to move forward in its work. It succeeds with low overhead margins and does not seek to generate large profits on its work.**

**The Deaf Studies Trust strives continuously to make Deaf people's lives more valued and understood by the society at large.**



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Sutherland**



**Treasurer Clive Kittel**



**Secretary Jim Kyle**



**Trustee Lorna  
Allsop**