Executive summary

This report outlines the situation for Deaf people in Wales who experience mental health problems and the present position regarding health service provision. The aim is to raise awareness within the Welsh Government and other relevant stakeholders to recommend ways to improve mental health outcomes for Deaf people in Wales.

The All Wales Deaf Mental Health and Well-being Group collaborated with Deaf and hearing professionals to compile this report to provide an overview of the health inequalities experienced by Deaf people in Wales in relation to mental health service provision. A literature search was conducted, then data gathered from case studies from Deaf people and British Sign Language (BSL)/English interpreters, evaluations of mental health promotion initiatives involving Deaf people, statistics from Sign Language interpreting agencies, and information from UK specialist Deaf mental health services.

The report was produced as 40% of Deaf people experience **mental health problems**, which is twice that of individuals in hearing populations (Fellinger et al., 2012).

Wales is the only UK country that does not provide a clear pathway or service to meet the needs of Deaf people experiencing poor mental health (British Society for Mental Health & Deafness, 2020).

The coronavirus pandemic has forced many people into poverty, unemployment and mental health crisis with the exclusions faced by Deaf BSL users even more stark (Redfern & Baker, 2020).

This report draws attention to the following findings:

There are around 575,000 deaf and hard of hearing people living in Wales (Action on Hearing Loss, 2016), and this includes over 4000 people who use British Sign Language (BSL) (Shank & Foltz, 2019).

Deaf people often experience limited access to healthcare, variations in access to education, negative societal attitudes and reduced opportunities regarding work and leisure (Lesch et al., 2019; Dreyzehner & Goldberg, 2019).

Many Deaf people are not recorded as being Deaf in their primary care records. If they are then referred to other health services, specific details that may impact on their health service experience are frequently not passed on and therefore unknown.

In 2019 Public Health Wales commissioned a report to explore health behaviours and barriers experienced by Deaf people in Wales and **reported that access to health services is a major problem and Deaf people often avoid contact with health services due to poor past experiences.** In 2010 the Welsh Government commissioned the Royal National Institute for Deaf People to investigate the inclusion barriers faced by Deaf and hard of hearing people in Wales. 84% of Deaf respondents highlighted that it was hard to use health services because there was limited provision for Deaf people to use services in Wales particularly health services.

Despite having recognised BSL as a language in its own right (National Assembly for Wales, 2006), there is a shortage of BSL/English interpreters across the UK (Department of Work & Pensions, 2017). On the National Register of Communication Professionals working with Deaf and Deafblind people, only 48 individuals are registered as resident in Wales with 6 at training level, which is below the target of 64 set (Welsh Government, 2019a).

A 2020 Freedom of Information request (FoI) suggests that **Deaf people are required to** ask for information in an accessible format, like an information leaflet in BSL, unlike that of Welsh speakers who are afforded an active offer.

Deaf children, particularly those born to hearing parents, are disadvantaged from birth as they do not have access to the same education and health opportunities as their hearing peers (Hermann et al, 2014; Murray et al, 2019). Potentially hearing parents might have had no experience of a visual language (i.e. BSL) nor have they had any contact with Deaf role models. If parents and siblings cannot use BSL, children are isolated, and families struggle with communication (Collinson, 2017).

There is little support or resource for the Deaf child's family to learn BSL (Welsh Government, 2020). The skills and knowledge that people develop in their own culture is limited (Young & Hunt, 2011) as deaf children do not have the opportunity for incidental learning opportunities, to ask questions and pick up news, information or social capital which extends into education (Listman, Rogers & Hauser, 2011).

Deaf people regularly experience isolation, discrimination, and stress daily (Bone, 2019) which contributes to experiences of anxiety and depression.

Deaf people persistently battle to access mental health services, with limited provision for Deaf people in Wales. South Wales has no specialised Deaf mental health network, and the service in North Wales reported by Reader, Foulkes and Robinson (2017) has now dissolved. Mostly Deaf patients requiring in-patient care are referred to England, at great distance from their families and social networks, and at significant financial cost to the health service.

The Secure Anonymised Information Linkage (SAIL) Databank, based at Swansea University, reports **our systems in Wales are not able to provide accurate information about the number of Deaf people, or the number of Deaf people with mental health problems**. The NHS Wales Informatics Services support this view.

New patient forms at General Practitioner (GP) surgeries often do not ask about hearing, so if people attend for a screening appointment this information may be recorded but is rarely collated on health databases or central systems. Many GP surgeries do not know local arrangements for booking BSL/English interpreters to enable Deaf people to engage in meaningful discussions at health appointments.

As over 2500 children in Wales are Deaf, around 1000 children in Wales will likely be at risk of mental health problems in the future (Wright, 2020). Currently there are no established links between Child and Adolescent Mental Health Services (CAMHS) in Wales and Deaf CAMHS services in the UK, as there are between hearing CAMHS services with Wales and other hearing CAMHS service in other UK areas.

There are four main providers of interpreting services for Deaf people in Wales and they provide services to facilitate communication between Deaf and hearing people Arrangements for booking BSL/English interpreters are patchy and not always known to Deaf people. Frequently health staff are unaware of how booking systems work and do not know how to help. Online interpreting can be an alternative, but uptake in Wales remains low due to procedural and technical issues.

The following recommendations based on this report's findings will make significant improvements to the positive mental health of Deaf people in Wales:

Key recommendations:

- Increase health and care workers' knowledge of basic BSL and how to book Sign Language BSL/English interpreters
- Primary care staff to have increased knowledge of available mental health services for Deaf patients and to signpost
- > Deaf patients can directly go to Deaf counselling services
- > Basic training around Deaf issues for all health and care workers
- An accessible helpline and signposting service would direct individuals, families and workers to timely advice
- Monitoring effectiveness of Health Boards' delivery of All Wales Accessible information standards
- Improve access to information for BSL users by adopting same rights as Welsh speakers to services
- Re-establish links with Deaf CAMHS

In summary, the All Wales Deaf Mental Health and Well-Being Group are keen to start a dialogue with the Welsh Government about the issues raised in this report. It is essential that progress is made towards immediate and short-term solutions, as well as effective long- term provision to improve mental health pathways for Deaf people in Wales.