

Joint Informational Forum on “Access to Healthcare for Persons with Disabilities”

Sponsored by the Joint Legislative Committees on Public Health and Human Services
Legislative Office Building, Hartford, CT 06106

Wednesday, September 13, 2023

I, Luisa Gasco-Soboleski, a third generation deaf, am here to present on behalf of the Deaf, DeafBlind and Hard of Hearing Community as the President of the Connecticut Association of the Deaf and Co-Chair of the State Advisory Board for Persons who are Deaf, DeafBlind and Hard of Hearing. I serve as a board member of the Disability Rights Connecticut. I am also a retired principal of the American School for the Deaf. Thank you for giving us the opportunity to speak before you on this important topic on persons who are deaf, deafblind and hard of hearing. It is important that we work together to better serve our community especially in this area of healthcare for persons with disabilities.

As an educator, I strongly believe that working together will help us to improve the services especially with what we have experienced through the pandemic. I have been working with the deaf community and they have expressed frustrations that they faced during the pandemic due to communication barriers. This lack of accessibility was not well received by most of our community members.

In general, approximately 90 percent of deaf children have hearing parents and they do not get meaningful access to language right away. About 10 percent of deaf children who have deaf parents have immediate access to language from day one. It is because the deaf parents communicate in American Sign Language from the very beginning. For those who do not have deaf parents, their communication may start much later. Linguists say that between the ages of 0 to 5, language learning is at critical phase. Lack of early language access and acquisition leads to language delay or deprivation. Thus, we see some of these children grow into adults with effects of language delay. However, most of them function in life using American Sign Language.

As a deaf advocate I often receive feedback about many issues regarding communication access in the medical setting.

The issues we see are that the hospitals or health care facilities kept using VRI (Video Remote Interpreting) which may be problematic for some deaf and hard of hearing individuals. Many DeafBlind individuals could not use VRI at all. The issues we are having:

1. Poor internet connections causing freezing pictures on the screen.
2. VRI (interpreter) on the screen often is not from Connecticut therefore the signs used are not locally based. For example, the VRI interpreter might not know the sign for the towns in Connecticut.
3. Hospitals/healthcare facility that have contract with one interpreter agency is operating in a silo environment. Often the consumers are told that there is no interpreter available. If that agency has reached to another agency where they may have available sign language interpreter. In this medical setting, this may be a life-or-death matter for the deaf community members who may have serious medical situation.

There is a document, "The Connecticut Statewide Needs Assessment Report" done by Innivee Strategies, that I have shared with the organizer for this Forum. This is for your reading as this will give you the feedback from the Connecticut Deaf, DeafBlind and Hard of Hearing Citizens on their views of living in Connecticut.

We need your support and of course we will work with you to make this state a great place to live for deaf, deafblind and hard of hearing citizens. It is a long overdue that our community needs to be recognized and heard.

Thank you