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House Health Policy Committee
Testimony in Opposition to HB 5332
March 11, 2014

Chairman Haines, committee members, thank you for the opportunity to speak with you today. My name is Carmen Johnson. Today I am representing the following organizations to voice concern over HB 5332:

- 1) Michigan Deaf Association
- 2) Black Deaf Advocates of Michigan
- 3) SHI-M=DB (Self Help Organization for DeafBlind individuals)
- 4) Deaf Advocacy Network – Sylvan Lake
- 5) Screenline LLC (Communication Access Realtime Translation)
- 6) Detroit Association of the Deaf
- 7) Michigan Registry of Interpreters for the Deaf
- 8) Hearing Loss Association of Michigan
- 9) Communication Access Center - Flint
- 10) Deaf Link – Battle Creek
- 11) Kathy Mitchell, MSW - Oakland Integrated Health Care Network
- 12) June Walatkiewicz, MSW

The concern is regarding the need for Substance Abuse services for Deaf/DeafBlind and Hard of Hearing residents of Michigan. Michigan has 1.2 Million Deaf and Hard of Hearing residents according to the most recent numbers provided by the Division on Deaf and Hard of Hearing in 2005. Deafness is viewed as an “invisible disability”. Unlike other disability groups, unless a person is wearing a hearing aid or cochlear implant one would never know that they are deaf. Therefore most of us do not understand their numbers or their needs.

Persons who go to counseling prefer to work with an individual who can speak their language and understand their culture. This is true for many foreign language speaking groups such as Arab Americans, Hispanics, etc. Deaf/DeafBlind and Hard of Hearing individuals also speak another language and consider themselves of a unique culture. They also prefer to have a counselor that can speak their language and understand their issues.

Salvation Army Harbor Light has been providing services for Deaf and Hard of Hearing individuals for many years. At one time they had a complete array of services and Deaf and Hard of Hearing staff as well as in-house interpreters. However in recent years all of that is gone.

According to Larry Scott from the Department of Community Health:

Salvation Army Harbor Light (SALVATION ARMY HARBOR LIGHT) is under contract with the Michigan Department of Community Health to provide intensive outpatient services and room and board to deaf and hard of hearing clients from throughout our state. In addition to the provision of treatment and domiciliary services, SALVATION ARMY HARBOR LIGHT is also responsible for assisting regional

substance abuse agencies (CAs) with the costs of interpreter services when requested including funding for: assistance for up to four (4) treatment sessions and four (4) recovery support sessions for persons who completed the program or currently receiving treatment and recovery support funded by the state; program meetings during treatment when an interpreter is needed for outside guest or staff when an interpreter is not available; and for current clients when an interpreter is not available. . .

· It is also important to note that CAs are responsible for arranging access to treatment and recovery services for deaf/hard of hearing clients for their respective regions including the provision of interpreters and other appropriate services covered under the American Disabilities Act. Some CAs, such as Oakland County Health Division, Office of Substance Abuse Services, provide, via contracts, on-site interpreters at treatment programs and deaf/hard of hearing centric programs that are not associated with SALVATION ARMY HARBOR LIGHT.

We contend that plugging an interpreter into the mix does not equate to the services provided to hearing individuals. This is not “linguistically and culturally” appropriate. We asked additional probing questions about the services provided by SALVATION ARMY HARBOR LIGHT:

Also is there any staff at Harbor Light fluent in sign language?

The program provides interpreter services on site. (But how often? This is a residential program)

Is there a reason why the state only contracts with SALVATION ARMY HARBOR LIGHT and there is no RFP for this program?

We are required to contract with SALVATION ARMY HARBOR LIGHT via legislation and boilerplate requirements. (So, no RFP)

Salvation Army Harbor Light provides intensive treatment five days a week to hearing patients but only two days a week for Deaf and Hard of Hearing patients because they only provide sign language interpreters for two days out of five for inpatient care. The other days during the week the staff write notes to the Deaf inpatients. The Deaf and Hard of Hearing can't participate in AA meetings during their stay because no interpreter is provided.

Even the Mental Health and Wellness Commissions 2013 Report “Improving the Quality of Life by Supporting Independence and Self-Determination” makes only one mention of the Deaf and Hard of Hearing work group and that is to *direct the department of Community Health to present budget implications to the legislature for consideration*. This does not suffice.

We support adding language to HB5332 to require Substance Abuse professionals provide “Linguistically and Culturally Appropriate” services for Deaf/DeafBlind/Hard of Hearing Michiganders. We do not believe that the state community health leaders have heard the community and we need language in the bill that would require appropriate services be provided.