## "Supporting Recovery in the Deaf Community: Creating a Continuum of Behavioral Health Care in Central Massachusetts"

- **Melissa L. Anderson, Ph.D.**, Postdoctoral Fellow, University of Massachusetts Medical School; melissa.anderson@umassmed.edu (corresponding author)
- **Neil S. Glickman, Ph.D.**, Licensed Psychologist, Clinical Director, Advocates, Inc; neilglickman@rcn.com
- **Lisa Mistler, M.D.,** Psychiatrist, Worcester Recovery Center and Hospital Deaf Services; lisa.mistler@umassmed.edu
- **Susan Jones, LMHC**, Rehabilitation Counselor, Worcester Recovery Center and Hospital Deaf Services; susan.jones@dmh.state.ma.us
- **Monika Kolodziej, Ph.D.**, Assistant Professor of Psychiatry, University of Massachusetts Medical School; monika.kolodziej@umassmed.edu
- **Douglas Ziedonis, M.D., M.P.H.,** Professor and Chairman, Department of Psychiatry, University of Massachusetts Medical School; douglas.ziedonis@umassmemorial.org

Across the U.S., there is a paucity of mental health and substance abuse services for Deaf individuals. Without the availability of communication accommodations and specialized clinical expertise, Deaf individuals seeking behavioral health services contend with access limitations, misdiagnoses, and superficial treatments. Moreover, while the assessment and treatment of co-occurring disorders and the infusion of trauma-informed care are key components of effective treatment in the mainstream literature, the investigation and application of these initiatives to the Deaf population has not yet occurred. The proposed poster will outline the current state of specialized behavioral health services for Deaf individuals in Central Massachusetts, identify gaps in the continuum of behavioral health care for this population, and offer recommendations for future behavioral health programming.

Currently, Central Massachusetts is home to two specialized programs for Deaf individuals seeking behavioral health services, the Center for Living and Working's Deaf Independent Living Services and the DMH Inpatient Deaf Services at Worcester State Recovery Center and Hospital. Unfortunately, even with these programs, it is challenging to find appropriate outpatient placement and services that meet the range of psychiatric, intellectual, linguistic, and cultural needs of Deaf individuals.<sup>2</sup> Connections between inpatient units and specialized outpatient services for the Deaf need to be developed or enhanced to increase continuity of care and reduce rehospitalization of Deaf individuals.<sup>3</sup>

At the current time, specialized outpatient psychotherapy and psychiatry services for Deaf individuals are not available in this region. Lack of funding for AA/NA interpreters and the recent closure of a Deaf-accessible substance abuse treatment agency highlight the need for the development of programs that provide accessible substance abuse treatment. Culturally-affirmative, linguistically-accessible, trauma-informed outpatient behavioral health services that are tailored to the Deaf population are vital to promoting the wellness and recovery of the Deaf community.

<sup>1.</sup> Pollard, R. Q. (1994). Public mental health service and diagnostic trends regarding individuals who are adeaf or hard of hearing. *Rehabilitation Psychology*, *39*(3), 147-160.

<sup>2.</sup> Landsberger, S. A., & Diaz, D. R. (2010). Inpatient psychiatric treatment of deaf adults: Demographic and diagnostic comparisons with hearing inpatients. *Psychiatric Services*, *61*(2), 196-199.

<sup>3.</sup> Glickman, N. S. (2009). Cognitive-behavioral therapy for deaf and hearing persons with language and learning challenges. New York: Routledge.