

'I owe my career to inspirational deaf people'

Andy Cornes talks to Ian Florance

Deaf people are not just hearing people whose ears happen not to work. 'They are a group with their own unique culture who have suffered oppression from the hearing majority.' Talking to Dr Andy Cornes before this interview it was clear he wanted to raise awareness of working as a psychologist specialising in deafness. So, how did he get interested in the area?

A light bulb moment

'I was planning to work in construction in Toronto. I had no degree, few prospects and my passport had just been stolen. At that time UK employment was very high

and I was worried about the future. My mum cut out an advert for a training course in communicating with deaf people and sent it to me in America. I don't think I'd even met a deaf person before but that was it. I took a total immersion course in sign language with no talking allowed, then secured a job as an unqualified social worker with deaf people. I simultaneously did a master's degree in Deaf Studies at the University of Durham whilst undertaking social work training.'

Why did the group have such a big effect on you? 'I saw a perfect match with my values, not least those relating to social justice, derived in part from my working-class upbringing. The more I learnt the more I realised how much ignorance there was about deaf people, how pernicious some attitudes towards them were and the extent to which mental health professionals were letting them down. I had travelled a fair bit (even more so now!) and have always tried to learn about what makes people's worldviews and cultures different, and sign language and deaf culture blew me away!'

Andy specialised a long time in the areas of mental health and child protection, then sent CVs to deaf societies and was offered interviews in Melbourne, Sydney and in New Zealand, finally getting a job as a Family Counsellor and Manager of Community Services for the Deaf Society of New South Wales. He emigrated to Australia in 1997 and began working in Rivendell

Adolescent Psychiatric Unit. 'While I was there I enrolled on a PhD in Psychological Medicine and did a psychology degree alongside it. That's the second time I've done two degrees at the same time. I helped to set up and run mental health services for deaf children in NSW and started to write and lecture on deaf mental health.' Andy also trained at the Institute of Psychiatry in Sydney. He lived in Sydney for eight years and has dual citizenship but came back in 2005 for family reasons.

The need for experts in deafness

So, what is the situation he would like to change? 'Of course there are excellent specialist services for deaf people but non-specialist services tend not to be responsive to deaf people's clinical needs and access is often poor. Deaf people tend to present in crisis at psychological services, sometimes with intractable problems.' Andy cites legal work – he acts as an expert witness – as an example of this. 'Deaf people are overrepresented in the court system, and they generally get a very poor service. I became professionally and ethically outraged at reading "expert" reports written by psychologists, psychiatrists and social workers who simply did not possess the requisite skills to offer an opinion on complex matters such as how deaf parents raise children, their values and their experience as a minority and misunderstood cultural group. Unfortunately, the wrong experts are appointed and the implications are highly damaging.'

'Some people have the oddest ideas. Deaf IQ is consistently under-measured due to the lack of good focused assessments. The fact that deaf people come out of schools with an average reading age of 7.5 years is taken by some to indicate lack of intelligence. Hearing aids or cochlear implants don't provide perfect hearing, and there is a significant lack of access to information due to lack of provision of sign language interpreters. In addition, British Sign Language (BSL)



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is not – contra the views of some comedians and media – just flapping your arms about. It is a distinct and natural language with its own grammar and dialects and different versions in different countries: For example, when I'm working in Australia I use Australian Sign Language (Auslan).'

We need more positive deaf role models

I asked Andy to explain some of the issues in more detail and to suggest what needs to be done.

'We need more assessments standardised on deaf populations and translated into relevant sign languages. I've been doing work with Professor Margaret Brown of Melbourne University using an Auslan translation of the Strengths and Difficulties Questionnaire, which I developed for my PhD thesis. Mental health assessments of profoundly deaf children are very complex. For example, psychological states are described differently in BSL and English. Many words and phrases cannot be translated literally and require clarification for interpretation while certain concepts (e.g. "panic attack") in English do not have direct equivalents in BSL, therefore several signs have to be used in order to convey one concept.' Andy adds 'It's vital that schools with deaf children have baseline psychological data to guide, track and develop programmes that support and promote emotional well-being.'

Is there a greater incidence of mental health problems among the deaf? 'Research suggests there is, although hearing impairment as such does not create that risk on its own. The context within which deafness exists influences psychological outcomes – for example, how a family is affected by their child's deafness is likely to impact upon how they relate to the child, and affect how children view themselves. Educational input is also key, yet its psychological impact is little understood and underresearched.'

This leads on to the critical issue of parenting. 'Between 90 and 95 per cent of deaf children are born to hearing parents, and this will cause communication problems and different family dynamics. Unique patterns of social and emotional development seen in deaf children – for instance lack of effective parent-child communication and social isolation – may predispose them to psychological distress. Hearing parents of deaf children need education, parent training and support. Many deaf people fail capacity-

to-parent assessments despite any concrete evidence (e.g. cognitive impairment, mental illness or neglectful or abusive parenting). Deaf parents are, by and large, assessed on the presumption of incompetence. There is no evidence to support deaf parenting as inferior to hearing parenting.'

Andy returned to the role of experts in court proceedings. 'Assessments of deaf people are being undertaken by professionals without specialist expertise. This results in poor-quality, invalid assessments, so a lawyer or even the deaf client may have to fund a second specialist. Experts should not only have experience of working with deaf people but should be aware of their culture, have worked with interpreters and be proficient in sign language. Going into a court and feeling you're not understood or being misrepresented can be a horrendous experience. Having the right knowledge available will ultimately save money and stress. Family members are often asked to fulfil the role of interpreter despite the ethical implications, their lack of qualifications and an obvious conflict of interest.'

Andy feels that we need more research and to raise the profile of deafness on psychological courses, including degrees and on clinical doctoral training. 'And professionals should undergo deaf awareness training and be aware of their obligations under the Equality Act.'

'We desperately need more positive role models for deaf people,' he continues. 'There are high profile deaf people in the public eye – for example, Evelyn Glennie and Marlee Martin – but what we need is more qualified deaf mental health professionals. There are a few inspirational deaf people in this area and I hope we encourage more of them to become involved and make a difference. I owe my career to inspirational deaf people.'

Psychology as positive advocacy

For the past two years Andy has been working for his own company, View Psychology Ltd. 'I'm involved in work with schools to develop and lead therapeutic services that are responsive to psychological needs. My corporate work often focuses on the psychological resilience in professionals working in challenging contexts. I do a lot of supervision, consultancy and training and have delivered a number of master classes and international keynotes. My expert witness work involves assessing kids with emotional, behavioural and psychological problems and also undertaking parental

assessments. I also provide evidence on issues such as the impact of abuse, as well as placement and access for children and parents. I'm rather proud of the fact that I was involved in a high-profile case recently, and I am allowed to mention it as it is in the public domain, in the Court of Appeal, which changed the law on deaf people's access and assessment in Family Court proceedings, in the case of *Re C (A Child)* [see tinyurl.com/nduzcn5]. The bureaucracy in the work I'd done for the previous eight years in the NHS generally stifled creativity, but in my own company I hope to be able to overcome those limitations. It also allows me to have a portfolio of bespoke psychological solutions to a range of diverse clients. I am a Senior Fellow at the Graduate School of Education at the University of Melbourne, a consultant counselling psychologist and one of three world experts on the Panel for Health for the World Federation of the Deaf.'

I learnt a huge amount about deaf people – too much to put into one article – from talking with Andy. He also confirmed two linked conclusions I'd arrived at over recent interviews for the careers section of *The Psychologist*. Some time ago I interviewed Stella Acciarone on autism and she talked passionately about positive aspects of autism. Equally, Andy emphasised an approach to deafness which does not over-emphasise deficits but looks at positive aspects of the condition – one that comes with its own culture and creative language. As Andy put it: 'Many deaf people perceive themselves as culturally different rather than disabled. The deaf community typically comprises deaf people who regard themselves as members of a minority group sharing cultural traditions and values and community aims, such as the preservation of deaf culture.'

The linked point is the extent that someone like Andy has developed high-level advocacy skills, over and above those of an academic, researcher, trainer, supervisor and practitioner. He is now widely regarded as an international expert in the emotional, social and psychological development of deaf children and is currently the only specialist psychologist in deafness in the UK who is qualified to conduct both psychological assessments and capacity-to-parent assessments (as he is also a registered family and systemic psychotherapist). Psychology can be as much about challenging ignorance via a message about funding, service organisation and attitude, as it is about clinical competence.

See www.viewpsychology.co.uk for more on Andy's work