



Comparison Report

Phases I & II Deaf Consumer Needs Assessment

SUBMITTED ON BEHALF OF THE
NATIONAL CONSORTIUM OF INTERPRETER EDUCATION CENTERS (#H160A&B)
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Foreword

The National Consortium of Interpreting Education Centers (NCIEC) is authorized and funded by the Rehabilitation Services Administration (RSA), U.S. Department of Education. Through grants awarded by the Department, the National Interpreter Education Center (NIEC) and five Regional Interpreter Education Centers (RIECs) that comprise the Consortium are working collaboratively to increase the number of qualified interpreters nationwide and ensure that quality interpreter education opportunities and products are available across the country.

A primary requirement of the NCIEC grants is to conduct ongoing activities to identify needs in the field of interpreter education. This report has been prepared based on the findings and conclusions of a national needs assessment specifically designed and carried out to assess the needs of deaf consumers across the country. This Deaf Consumer Needs Assessment Final Report is submitted by the NCIEC on behalf of the NIEC and the five RIECs. The report provides an overview of the needs assessment process, discussion of primary assessment findings, and presentation of conclusions and next steps for responding to those findings.

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Phase I and Phase II Deaf Consumer Needs Assessment Comparison Analysis

Executive Summary

This document has been prepared to present a comparison analysis of information collected in two discrete NCIEC needs assessment efforts, both designed to identify the current and projected needs of deaf consumers as they relate to the availability, quality and overall use of interpreter services.

The Phase I Deaf Consumer Needs Assessment effort was designed as the first in a series of on-going activities planned by NCIEC to collect input from deaf consumers. Upon recommendation by its external evaluators, it was agreed that the Phase I effort would target just those deaf consumers that could be easily reached through an electronic survey, a data collection tool used successfully in the previous needs assessment efforts. Therefore, the Phase I effort centered on design and dissemination of a survey instrument, developed by the NCIEC through a collaborative process that included opportunities for input and feedback on the part of content experts and stakeholders in the field of interpreter services. The survey was disseminated electronically to deaf consumers through the National Association of the Deaf (NAD) eZine membership list. That survey effort was completed in March 2008. The survey instrument was also distributed to and collected on-site from participants of the ASL Festival at Northeastern University in April of 2008. Through those efforts, 1,250 completed surveys were collected from deaf consumers. An analysis of the information collected through the Phase I effort has been developed as the Phase I Deaf Consumer Needs Assessment Final Report, September 2008. While the Phase I survey collected input from 1,250 individuals, it was recognized at the outset that focusing on deaf consumers that are members of NAD would result in data that was representative of just a segment of the nation's deaf population, or deaf consumers that would likely be highly educated and employed.

By comparison, the Phase II Deaf Consumer Needs Assessment effort was designed to reach deaf consumers who would typically not have access to an electronic survey, or who would not typically be a member of NAD. In addition, the Phase II effort also specifically sought to elicit input from deaf individuals that currently are or have been consumers of vocational rehabilitation (VR) services. Because it was expected the targeted Phase II consumer pool would not have access to an on-line survey format, the Phase II needs assessment effort was carried out through conduct of live focus groups and interviews in each of the five NCIEC regions. The process of inviting individuals to participate in the Phase II effort was carefully designed to ensure that participating consumers were equitably distributed across all geographic areas covered by the grant, and that they were characteristic of the non-NAD population of deaf individuals in this country. In total, 61 individuals participated in the Phase II focus group and interview sessions. An analysis of the information collected through the Phase II effort has been developed as the Phase II Deaf Consumer Needs Assessment Final Report, July 2009.

While the Phase II information gathering process differed from the Phase I effort with regard to the conduct of focus groups and interviews to collect input versus the dissemination of an on-line survey, the questions utilized during the focus groups and interviews were the same questions that comprised the Phase I survey instrument. To that end, the findings and results of the two discrete efforts can be ‘broadly’ compared, question to question. For the purposes of this report, data collected through the two efforts is compared as two discrete composites of responses:

- Composite 1** Data collected through the 1,250 electronic surveys disseminated and analyzed in the Phase I needs assessment effort
- Composite 2** Data collected through the focus group and interview sessions with 61 individual consumers

Throughout this report, data and findings specific to each of two composite groups are presented and compared. However, comparison of findings and results of the two efforts can only be broadly based as the respondent pool size of the two efforts differed significantly: there were 1,250 completed surveys collected in the Phase I effort as compared to 61 focus group and interview participants in the Phase II effort. Because of the significant difference in the size of the two respondent groups, comparisons can only be made with regard to overall perceptions of the Phase I composite group as compared to overall perceptions of the Phase II composite group, versus based on actual numbers and percentages of participants.

The purpose of this comparative analysis is to provide NCIEC with a broad base of information that helps to identify similarities and differences in Phase I versus Phase II consumer perceptions related to the availability, quality and overall use of interpreter services – recognizing that each of the two needs assessment efforts sought at the outset to target different segments of the nation’s deaf consumer population.

The remainder of this report is organized into two primary sections. Section I presents a broad comparison of findings developed in the Phase I and Phase II efforts. Section II presents a summary overview of the primary similarities and differences to emerge through that comparison.

I. Comparison of Findings

In comparing the data collected through the two needs assessment efforts, many perceptions that were similar or shared by the two consumer respondent groups emerged, as well as areas wherein perceptions differed. In order to better understand those similarities and differences, data from the Phase I and Phase II efforts are presented on the tables provided in this section of the report. The data is presented in this manner in order to be used as a point of comparison between the perceptions of the two composite groups of respondents.

The organization of the comparative findings follows the organization of the Phase I and Phase II Deaf Consumer Needs Assessment Final Reports.

A. Information about Respondents

This first category of comparison presents specific demographic and other descriptive information about the Phase I and Phase II survey respondent pools.

Respondent Self-Identification

In both surveys, respondents were asked to identify themselves as either: Deaf, Hard of hearing, Deaf-blind, or having a Cochlear implant. They were also provided an “Other” option.

Respondent Self-Identification				
Table 1				
Consumer Self Identification	Phase I Composite		Phase II Composite	
	# of Responses	% of Respondents	# of Responses	% of Respondents
Deaf	1036	83%	56	91%
Hard of Hearing	121	10%	4	7%
Deaf-blind	20	2%	0	0%
Cochlear Implant	2	0%	0	0%
Other	3	0%	0	0%
No response	68	5%	1	2%
Total	1250	100%	61	100%

In both needs assessment efforts, the majority of individuals identified themselves as “Deaf”; (83% of individuals in Phase I and 91% of individuals in Phase II). The second highest category of identification in both efforts was “Hard of hearing”, with significantly fewer individuals in both efforts selecting that category of identification (10% in Phase I and 7% in Phase II). When considering the high number of respondents in both composite groups that selected the “Deaf” self-identification option, it may be that consumers often feel that the deaf identification option carries with it more value, recognition, support and resources than other options.

Respondent Gender

The surveys also collected information regarding respondent gender. Responses are presented on Table 2.

Respondent Gender				
Table 2				
Respondent Gender	Phase I Composite		Phase II Composite	
	# of Responses	% of Respondents	# of Responses	% of Respondents
Female	767	61%	31	51%
Male	483	39%	30	49%
Total	1259	100%	61	100%

The Phase II effort successfully increased participation of male consumers to achieve a more equitable distribution of respondents across the two gender groups.

Respondent Age

The surveys also queried respondents with regard to their age. Six age ranges were provided as possible selection options. Responses are presented on Table 3.

Respondent Age				
Table 3				
Average Age	Phase I Composite		Phase II Composite	
	# of Responses	% of Respondents	# of Responses	% of Respondents
21 - 30 years old	170	14%	10	16%
31 - 40 years old	267	21%	11	18%
41 - 50 years old	321	26%	19	31%
51 - 60 years old	272	22%	11	18%
61 - 70 years old	133	11%	8	13%
70+	82	7%	2	4%
No response	5	0%	0	0%
Total	1250	100%	61	100%

Respondents in both composite groups fell into approximately the same age groups. Looking at the data in aggregate, in both efforts, 83% of respondents identified themselves as ‘working age’, or between 21 and 60 years of age.

Respondent Ethnic or Racial Background

The surveys also sought to determine the race or ethnic background of survey respondents by using the U.S. Census demographic categories. Responses are presented on Table 4.

**Respondent Ethnic or Racial Background
Table 4**

Race/Ethnicity	Phase I Composite		Phase II Composite	
	# of Responses	% of Respondents	# of Responses	% of Respondents
European American/White/Caucasian	1035	83%	28	46%
Latina/o/Hispanic	56	4%	11	18%
Native American/American Indian/Alaska Native	33	3%	0	0%
African-American/Black	30	2%	13	21%
Asian American	18	2%	3	5%
Pacific Islander	3	0%	0	0%
Prefer not to answer	51	4%	0	0%
Other, please specify	13	1%	6	10%
No response	11	1%	0	0%
Total	1250	100%	61	100%

Respondents in the Phase I composite group were predominantly white/Caucasian (83%). The Phase II survey specifically sought to achieve a higher level of diversity among focus group and interview participants. In the Phase II composite group, respondents were spread across three primary cultural groups: White/Caucasian (46%); African-American/Black (21%), and Latina/o/Hispanic (18%), thereby achieving a higher percentage of diversity in that composite group than in the Phase I composite.

Looked at broadly, it could be stated that respondents in the Phase I survey composite are more 'typical' as a whole of the NAD membership, that is, they are largely white, educated (Table 5), and employed (Table 6). By comparison, the Phase II composite might be considered broadly as more representative of the nation's deaf population, that is, more culturally diverse, lower education achievement (Table 5) and less likely to be employed (Table 6).

Respondent Academic Status

Both surveys asked respondents to indicate their highest level of completed education. Information reported by respondents in both composite groups is presented on Table 5 on the following page.

Highest Level of Completed Education				
Table 5				
Education Level	Phase I Composite		Phase II Composite	
	# of Responses	% of Respondents	# of Responses	% of Respondents
1st - 5th grade	2	0%	3	5%
6th - 8th grade	10	1%	4	6%
High school	262	21%	44	72%
Certificate	Not asked	Not asked	3	5%
AA/AS	225	18%	1	2%
BA/BS	359	29%	2	3%
MA/PhD	391	31%	1	2%
No response	1	0%	3	5%
Total	1250	100%	61	100%

In the Phase I survey, respondents reported high levels of academic achievement, with 78% of the respondents having achieved at least an undergraduate or graduate degree. Of those, 29% reported they possessed a BA/BS degree and 31% reported they possessed a graduate degree. The Phase II survey specifically sought to increase input from deaf consumers that had not achieved this level of academic accomplishment. In the Phase II survey, the majority of respondents reported they had not achieved higher than a high school degree, specifically 72% reported having achieved a high school degree.

The difference between the two composite groups is interesting to consider. It might be assumed that because the Phase I respondents are more educated, they would be better able to advocate for their right to an interpreter, and might also be more knowledgeable about how to secure the services of an interpreter. Conversely, it might be considered that the Phase II survey respondents, having largely achieved a high school degree, might have less capacity to self-advocate and might therefore experience more difficulties or problems related to accessing and using interpreter services.

Respondent Work Status

An open-ended question in both surveys asked respondents to list their current job/career. Because of the open-ended nature of the question, responses varied widely. In order to best analyze and compare responses, six primary categories of job/career were established:

- Academic professional (includes professor, teacher, school administrator or employee of an academic institution)
- Business professional (includes lawyer, doctor, consultant, business owner)
- Hourly workforce

- Student
- Retired
- Not working

Respondent Job/Career Status				
Table 6				
Type of Job/Career	Phase I Composite		Phase II Composite	
	# of Responses	% of Respondents	# of Responses	% of Respondents
Academic professional	337	27%	0	0%
Business professional	267	21%	5	7%
Hourly workforce	160	13%	8	13%
Not working	152	12%	37	61%
Retired	0	0	3	5%
Student	62	5%	2	4%
Other	0	0%	6	10%
No response	272	22%	0	0%
Total	1250	100%	61	100%

In the Phase I composite group, 61% of respondents reported they are currently working, with the largest percentage, or 27%, holding academic-related jobs. Another 21% of respondents were counted in the business professional category, and 13% as hourly employees. Only 5% are currently enrolled as students, and 12% reported they are not currently working. It must also be noted that 22% of the Phase I respondents did not answer this question. By comparison, in the Phase II composite group, far fewer respondents reported they are currently working: only 7% of respondents reported they are business professionals and 13% employed in the hourly workforce. What is particularly striking in the Phase II composite data is the high percentage of respondents that reported they did not have a job and were not currently working, or 61% of respondents. However, it must be taken into consideration that 47% of the Phase II respondents reported they are currently a VR consumer (see Table 6a below). This could account for a significant portion of those respondents that reported they did not have a job at the time of the survey. In addition, the 10% of Phase II respondents that reported in the “Other” category indicated they were previously a VR consumer, had attained employment, but then had been laid off or had lost their job.

Comparison between Phase I and Phase II composite groups suggests that Phase I respondents were more likely to have achieved ‘white collar’ jobs than the Phase II respondents. This comparison is consistent with information gathered from the two composite groups regarding education accomplishment, in which higher levels of educational achievement were reported by the Phase I composite than the Phase II composite (Table 5).

Respondent VR Status

Only the Phase II survey included a question related to whether or not the respondent was a VR consumer.

Respondent VR Status Table 6a				
VR Status	Phase I Composite		Phase II Composite	
	# of Responses	% of Respondents	# of Responses	% of Respondents
Yes	Not asked	Not asked	29	47%
No	Not asked	Not asked	17	28%
Other	Not asked	Not asked	6	10%
No response	Not asked	Not asked	9	15%
Total	1250	100%	61	100%

Again, the Phase I survey did not include a question related to VR status. However, looking at the Phase I composite group, 61% reported they were working. It can therefore be assumed these respondents were not a VR consumer at the time of the survey, although it is impossible to determine if they received VR services in the past. In the Phase II composite group, 47% of respondents reported they were a VR consumer. Looking more closely at the “Other” category, all Phase II respondents that selected that option reported they had received VR services in the past, bringing the total percentage of Phase II respondents that are or had been a VR consumer to 57%.

B. Respondent Means of Communication

Both surveys asked respondents to identify their preferred or primary means of communication. Table 7 presents responses to that question.

Respondent Preferred/Primary Means of Communication Table 7				
Preferred/Primary Means of Communication	Phase I Composite		Phase II Composite	
	# of Responses	% of Respondents	# of Responses	% of Respondents
ASL	883	71%	54	89%
Signed English	84	7%	0	0%
Cued Speech	80	7%	0	0%
Oral	42	3%	0	0%
Contact signing (PSE/Pidgin)	27	2%	0	0%
Total Communications	9	0%	0	0%
Tactile ASL	2	0%	0	0%

Tactile Signed English	3	0%	0	0%
Finger spelling	3	0%	0	0%
Writing	2	0%	0	0%
Other, please specify	102	8%	6	11%
No response	13	1%	0	0%
Total	1250	100%	61	100%

The majority of the Phase I respondents, or 71%, reported they preferred ASL or used ASL as their primary means of communication. The next highest response options were “Signed English” and “Cued Speech”, each selected by 7% of respondents. Of the Phase II respondents, 89% reported they preferred ASL, or used ASL as their primary means of communication.

C. Use of Interpreters and Interpreter Services

This section of comparative findings presents an array of information related to obtaining interpreter services, frequency with which respondents request interpreter services or have difficulty obtaining those services, and respondent perceptions regarding the use of Deaf Interpreters (DI) and Video Relay Services (VRS).

Obtaining Interpreter Services

In the surveys, respondents were asked to indicate if they know how to get an interpreter when they need one. Responses to that question are presented on Table 8.

Respondent Ability to Obtain Interpreter Services				
Table 8				
Type of Response	Phase I Composite		Phase II Composite	
	# of Responses	% of Respondents	# of Responses	% of Respondents
Yes	1112	89%	52	85%
No	108	9%	8	13%
No response	30	2%	1	2%
Total	1250	100%	61	100%

Most respondents in the Phase I composite group reported they know how to get interpreter services when they need them: 89% of respondents reported that they know how to obtain interpreter services and only 9% reported they did not. In the Phase II composite group, 85% of respondents reported they know how to obtain interpreter services, and 13% reported they do not. While this data is very similar across the two composite groups, it is worth considering that 47% of Phase II respondents reported they were currently a VR consumer (Table 6a), and therefore may not actually be

currently involved in securing their own interpreter services as those services would typically be arranged for and provided by the VR agency.

Frequency of Interpreter Use

Respondents in both composite groups were asked how many times during an average month they typically used interpreter services. Responses to that question are presented on Table 9.

Frequency Interpreter Services Used				
Table 9				
Frequency per month	Phase I Composite		Phase II Composite	
	# of Responses	% of Respondents	# of Responses	% of Respondents
0 times	114	9%	0	0%
1 - 3 times	405	32%	17	28%
4 - 6 times	233	19%	19	31%
7 - 9 times	111	9%	6	10%
10 - 12 times	94	8%	6	10%
13 - 15 times	37	3%	2	3%
15+ times	246	20%	11	18%
No response	10	1%	0	0%
Total	1250	100%	61	100%

In the Phase I composite group, 32% of respondents reported they used interpreter services between “1-3 times” per month. The second highest reported level of use was 20% of Phase I respondents reporting they used interpreter services “more than 15 times” per month; the next was 19% of respondents, who reported they used interpreter services “4-6 times” per month. Responses in the Phase II composite are somewhat similar. Of the Phase II respondents, 31% reported they used interpreter services between “4-6 times” per month. The second highest reported level of use was 28% of respondents reporting they used interpreter services “1-3 times” per month, and 18% reporting they used interpreter services “more than 15 times” per month.

It is interesting to aggregate the data in each of the two composite groups to assess the extent to which respondents are utilizing interpreter services more than four times per month. In the Phase I composite, 59% of respondents use interpreter services four times per month or more, and in Phase II composite, 72% of respondents in aggregate reported they use interpreter services four times per month or more. It would also be interesting to learn more in future needs assessment efforts about those consumers in both composite groups that utilize interpreter services 15 times per month or more.

**Frequency Interpreter Services Wanted but Unavailable
Table 10**

Frequency per month	Phase I Composite		Phase II Composite	
	# of Responses	% of Respondents	# of Responses	% of Respondents
0 times	340	27%	18	30%
1 - 3 times	556	44%	36	58%
4 - 6 times	188	15%	3	5%
7 - 9 times	67	5%	2	3%
10 - 12 times	28	2%	1	2%
13 - 15 times	10	1%	0	0%
15+ times	39	3%	1	2%
No response	22	2%	0	0%
Total	1250	100%	61	100%

It is interesting to note the extent to which respondents in both composite groups reported they have difficulty accessing interpreter services. In the “1-3 times per month” interpreter frequency use, respondents in composite groups reported difficulty accessing interpreter services: in the Phase I composite, 44% of respondents reported difficulty accessing services and in the Phase II composite, 58% of respondents reported difficulty. In addition, in the Phase I composite, another 15% of respondents reported they have difficulty getting interpreters in the “4-6 times per month” frequency category. This data may suggest that it is more difficult for those consumers trying to access interpreter services on a more sporadic basis (the 1-3 and 4-6 times per month frequency), than those consumers that utilize interpreters at a higher frequency level, which may indicate more routine use and opportunities for advance scheduling.

It is also interesting to consider the data on Table 10 as it relates to the Phase II composite group, among which 47% of respondents reported they are a VR consumer. Interpreter services are typically arranged and provided by the VR agency, so it is interesting that such a high number of Phase II respondents report difficulty accessing an interpreter when one is needed.

Use of Deaf Interpreters

Respondents of both surveys were asked whether or not they would like to use deaf interpreters. Table 11 on the following page presents responses to that question.

Respondents Feelings about use of Deaf Interpreters				
Table 11				
Type of Response	Phase I Composite		Phase II Composite	
	# of Responses	% of Respondents	# of Responses	% of Respondents
Yes	218	17%	31	51%
No	574	46%	17	28%
Doesn't Matter	397	32%	13	21%
No Response	61	5%	0	0%
Total	1250	100%	61	100%

In the Phase I composite group, 46% of respondents reported they prefer not to utilize deaf interpreter services. In addition, 32% reported it didn't matter to them whether they used deaf interpreter services. Only 17% of Phase I respondents reported they would like to utilize deaf interpreter services. The Phase II composite responses differed; 51% of respondents reported they would like to use deaf interpreter services; 28% reported they would not like to utilize deaf interpreter services, and 21% of respondents reported it didn't matter to them. In comparing the two response sets, it would appear that the Phase II consumer is more likely to feel positively about the use of a deaf interpreter.

It is worth considering that the higher levels of education achieved by the Phase I consumer may provide them with a greater level of communication confidence and more communication strategies than the Phase II consumer, and therefore more confidence and self-assurance in working with interpreting professionals. By comparison, the Phase II composite group, perhaps having fewer communicative strategies or communication confidence, may feel a higher level of identification and comfort in working with an interpreter professional that is also deaf, or in trying new communication strategies.

Respondents of both surveys were also asked to report on those settings in which they have or have not used deaf interpreters over the past year. Respondents had the option of selecting more than one setting. Table 12 presents responses to that question.

Settings Deaf Interpreters Used Table 12								
Interpreting Setting	Phase I Composite				Phase II Composite			
	Yes		No		Yes		No	
Response Type	#	%	#	%	#	%	#	%
My work/job	385	31%	673	54%	4	7%	57	93%
Conferences	353	31%	656	52%	1	2%	59	96%
Health	300	24%	727	58%	9	15%	52	85%
School	274	22%	730	58%	4	7%	55	90%
Entertainment	247	20%	712	57%	1	2%	59	96%
Religious services	245	20%	731	59%	1	2%	59	96%
Daily Business	186	15%	779	62%	5	8%	56	92%
Legal needs	184	15%	774	62%	6	10%	55	90%
Social Services	160	13%	800	64%	6	10%	54	88%
Voc rehab	123	10%	826	66%	3	5%	57	93%
Mental health	113	10%	823	66%	1	2%	58	95%

While in Table 11, it appeared that the Phase II composite group reported a more positive opinion with regard to using deaf interpreters, when the two composite groups reported on settings in which they have utilized a deaf interpreter (Table 12 above), it would appear that very few Phase II respondents have actually utilized the services of a deaf interpreter. By comparison, the data suggests the Phase I composite group is more likely to have actually utilized the services of a deaf interpreter than the Phase II group.

Use of Video Relay Services

Both surveys included several questions related to respondent use of Video Relay Services (VRS). The first question asked respondents to indicate whether or not they use VRS.

Respondent Use of Video Relay Service Table 13				
Type of Response	Phase I Composite		Phase II Composite	
	# of Responses	% of Respondents	# of Responses	% of Respondents
Yes	1001	80%	51	84%
No	210	17%	8	13%
No Response	39	3%	2	3%
Total	1250	100%	61	100%

Responses of both composite groups are fairly similar with regard to use of VRS: 80% of respondents in the Phase I composite group reported they utilized VRS and 84% of respondents in the Phase II composite group reported they utilized VRS. However, it is unclear from the manner in which the survey question was posed whether the respondents reporting use of VRS were utilizing that technology to communicate directly with deaf friends, or whether they used VRS interpreters. With regard to the Phase II composite group, it is interesting to recall that 47% of respondents reported they are a VR consumer (Table 6a). In another NCIEC data collection effort, initial data collected from state VR agencies suggests that the use of VRS technology in the provision of client services is relatively low.

Respondents were also asked whether they believe that the advent of VRS has made it more difficult for them to access and obtain live interpreter services in the community. Responses from both composite groups are presented on Table 14 below.

VRS Has Made it Difficult to Obtain 'Live' Interpreters				
Table 14				
Type of Response	Phase I Composite		Phase II Composite	
	# of Responses	% of Respondents	# of Responses	% of Respondents
Yes	557	45%	21	34%
No	222	18%	18	30%
Don't know	436	35%	21	34%
No Response	35	2%	1	2%
Total	1250	100%	61	100%

It is interesting to aggregate the “Yes” and “Don’t know” response sets of both composite groups. In aggregating that data, 80% of the Phase I composite group either think that VRS has affected the availability of interpreters in live community settings, or are not sure, and 68% of the Phase II composite group also reported they believe VRS has affected the availability of interpreters in live community settings, or are not sure. Viewing the reported data in this way would seem to indicate that a significant number of consumers believe VRS has had an impact on the availability of interpreter services in the community.

D. Interpreting Settings

Survey respondents were asked to identify the single setting in which it was most important for them to have interpreter services. Table 15 compares responses of the two composite groups.

Settings Identified as Most Important for Interpreter Services				
Table 15				
Type of Setting	Phase I Composite		Phase II Composite	
	# of Responses	% of Respondents	# of Responses	% of Respondents
My work/job	438	35%	6	10%
Health	256	20%	48	78%
School	141	11%	2	3%
Conferences	76	6%	0	0%
Daily business	55	4%	0	0%
Religious services	48	4%	0	0%
Legal	34	3%	0	0%
Social services	20	2%	0	0%
Mental health	15	1%	2	3%
Entertainment	7	1%	0	0%
Voc Rehab	6	0%	1	2%
Other	117	9%	1	2%
No response	37	3%	1	2%
Total	1250	100%	61	100%

In the Phase I composite group, survey respondents reported the settings most important to them to have interpreting services as: “Work/job” (35%); “Health” (20%) and “School” (11%). By comparison, the majority of respondents in the Phase II composite group reported “Health” settings as most important (78%). It is not surprising that only 10% of Phase II respondents selected “Work/job” as the most important setting, considering 47% of Phase II respondents reported they were currently VR consumers, but it is interesting to note that there was so little spread across the various setting options among the Phase II composite group respondents.

In addition, because 78% of the Phase II composite group selected “Health” as the most important setting, it would be interesting in future surveys to further breakdown the health setting to determine which health-related sub-settings are most important, i.e. emergency room visits, in-patient care, out-patient care, doctor’s appointments, substance abuse meetings, etc. It is also worth noting the difference in the Phase I composite group responses regarding the health setting, which only 20% of respondents selected. It might be possible that because of the higher level of educational achievement of the Phase I composite group, the Phase I consumer might

be more likely to communicate in writing with their physician than the Phase II consumer.

Both composite groups were also asked to identify the settings they feel are most difficult to obtain interpreter services in. Respondents were not limited to selecting one setting, but were permitted by the survey instrument to identify multiple settings in which they have experienced difficulty obtaining services. Responses to that question are presented below on Table 16.

Settings Identified as Difficult for Securing Interpreter Services				
Table 16				
Interpreting Setting	Phase I Composite		Phase II Composite	
	# of Responses	% of Respondents	# of Responses	% of Respondents
Health	594	48%	32	52%
My work/job	527	42%	16	26%
Conferences	349	28%	0	0%
Entertainment	309	25%	2	3%
Religious services	262	21%	0	0%
Legal	248	20%	10	16%
School	244	20%	7	11%
Daily business	220	18%	1	2%
Social services	216	17%	4	7%
Mental health	113	9%	2	3%
Voc rehab	73	6%	3	5%
Other	135	11%	18	30%
Total	1250	100%	61	100%

For Phase I respondents, settings identified as most difficult for securing interpreting services were Health (48%); Work/job (42%) and Conferences (28%). In the Phase II composite group, settings identified as most difficult for securing interpreting services were Health (52%) and Work/job (26%). It is concerning that such high percentages of respondents reported it was difficult to attain interpreting services in Health settings (48% of Phase I respondents and 52% of Phase II respondents). Again, it would be interesting to further breakdown the Health setting into health-related sub-settings in future data collection activities. It is also concerning to view the high percentage of Phase I respondents that reported it is difficult to attain interpreting services at their Work/job (42%) and at Conferences (28%), which could likely be work-related.

The table below provides a comparison of the settings identified by respondents as 'most important' for interpreting services with those settings identified by respondents as 'most difficult' to obtain interpreter services. A one-to-one comparison is impossible as respondents in both composite groups were limited to selecting one setting as the 'most important', but could select more than one setting as 'most difficult.' However, it is

interesting to note the differences in the ranking of settings. Table 17 provides the rank order of settings by ‘most important’ and ‘most difficult’ for obtaining services.

Settings Services Most Needed Versus Settings Most Difficult for Securing Services					
Table 17					
Phase I Composite					
Setting	Services Most Needed		Setting	Settings Most Difficult	
My work/job	438	35%	Health	594	48%
Health	256	20%	My work/job	527	43%
School	141	11%	Conferences	349	28%
Conferences	76	6%	Entertainment	309	25%
Daily business	55	4%	Religious services	262	21%
Religious services	48	4%	Legal	248	20%
Legal	34	2%	School	244	19%
Social services	20	1%	Daily business	220	18%
Mental health	15	0%	Social services	216	17%
Entertainment	7	0%	Mental health	113	9%
Voc Rehab	6	0%	Voc rehab	73	6%
Phase II Composite					
Setting	Services Most Needed		Setting	Settings Most Difficult	
Health	48	78%	Health	32	52%
My work/job	6	10%	My work/job	16	26%
School	2	3%	Conferences	0	0%
Conferences	0	0%	Entertainment	2	3%
Daily business	0	0%	Religious services	0	0%
Religious services	0	0%	Legal	10	16%
Legal	0	0%	School	7	11%
Social services	0	0%	Daily business	1	2%
Mental health	2	3%	Social services	4	7%
Entertainment	0	0%	Mental health	2	3%
Voc Rehab	1	2%	Voc rehab	3	5%

The Health setting option ranked either highest or second highest as important for both composite groups, and for both groups, the setting in which it is most difficult to get an interpreter. This further illustrates the need to better understand the health-related sub-settings, and factors that may contribute to making it difficult to attain interpreter services in those settings.

E. Interpreter Characteristics and Qualifications

Respondents in both composite groups were asked a number of questions regarding their perceptions of interpreter characteristics and qualifications. Specifically, this category of findings reports on respondent perceptions regarding interpreter certification and ethnicity, interpreter knowledge to perform the job, including whether interpreters possess specialized knowledge to work in specific settings.

Interpreter Certification

Respondents of both surveys were asked to indicate whether it was important to them that the interpreter providing services was certified. Table 18 presents information collected from respondents in this regard.

Importance of Interpreter Certification				
Table 18				
Frequency	Phase I Composite		Phase II Composite	
	# of Responses	% of Respondents	# of Responses	% of Respondents
Always	640	51%	31	51%
Often	360	29%	2	3%
Sometimes	149	12%	8	13%
Seldom	16	1%	0	0%
Doesn't Matter	59	5%	20	33%
No response	26	2%	0	0%
Total	1250	100%	61	100%

In the Phase I composite group, 51% of respondents reported certification is “Always” important; another 29% reported it is “Often” important. If those two response sets are aggregated for the Phase I composite group, it can be assumed that certification is very important to the Phase I consumer, with 80% reporting it is “Always” or “Often” important. By comparison, in the Phase II composite group, 51% of respondents also said certification is “Always” important; 3% reported it is “Often” important, and 33% reported interpreter certification “Doesn’t matter” to them. However, with regard to the Phase II composite group, anecdotal observation of the video-taped focus group and interview sessions suggests that a number of respondents did not understand the concept of certification, which may have contributed to the 33% of respondents reporting certification “Doesn’t matter”.

Interpreter Ethnicity

Respondents of both surveys were also asked how important it is to them that the interpreter providing services is from their own ethnic group. Responses of both composite groups are presented on Table 19 on the following page.

Importance of Interpreter Ethnicity				
Table 19				
Importance	Phase I Composite		Phase II Composite	
	# of Responses	% of Respondents	# of Responses	% of Respondents
Always	116	9%	1	2%
Often	110	9%	1	2%
Sometimes	154	12%	0	0%
Seldom	92	7%	0	0%
Doesn't Matter	746	60%	59	96%
No response	32	3%	0	0%
Total	1250	100%	61	100%

It is interesting to note the high percentage of responses in both composite groups reporting that interpreter ethnicity “Doesn’t matter”, (60% of Phase I respondents and 96% of Phase II respondents). With regard to the 96% of Phase II respondents reporting interpreter ethnicity “Doesn’t matter,” it is possible that consumer group has had less exposure to interpreters from ethnically diverse backgrounds, and/or may not understand their rights or be able to clearly and concisely express their rights regarding interpreting services, including requesting interpreters from ethnic backgrounds similar to their own. Simply stated, it may be possible that the more education a consumer has attained (as in the Phase I composite group as compared to the Phase II composite group – see Table 5), the more they may be able to understand their rights and advocate for specialized interpreter services, including requesting an interpreter from a particular ethnic background.

Interpreter Knowledge

Both respondent groups were also asked to indicate the extent to which the interpreters providing service “Know what they are doing.” Responses are presented on Table 20.

Interpreters Know What They Are Doing				
Table 20				
Satisfaction Level	Phase I Composite		Phase II Composite	
	# of Responses	% of Respondents	# of Responses	% of Respondents
Always	426	36%	19	31%
Often	494	41%	24	39%
Sometimes	240	20%	17	28%
Seldom	34	3%	0	0%
Doesn't matter	6	1%	0	0%
No response	0	0%	1	2%
Total	1250	100%	61	100%

It is concerning to note such a low percentage of respondents in both composite groups reporting that interpreters “Always” know what they are doing (36% of Phase I respondents and 31% of Phase II respondents). This leaves a high percentage of respondents in both composite groups sharing the perception that the interpreters they work with do not always know what they are doing (64% of Phase I respondents and 67% of Phase II respondents if the options “Often”, “Sometimes”, and “Seldom” are aggregated). This table in particular may be an indication that consumers do not perceive that interpreters are qualified or best prepared to assist them.

Interpreters Have Specialized Knowledge

Respondents in both composite groups were also asked to report whether they believed that interpreters providing services had the specialized knowledge required to work in specific settings, or whether it mattered whether the interpreter had specialized knowledge of a particular setting. Table 21 presents both the number of responses for each option, as well as the percentage of respondents that selected that option.

Interpreters Have Specialized Knowledge for the Setting						
Table 21						
Phase I Composite						
Interpreting Setting	Yes		No		Doesn't Matter	
Health	878	70%	114	9%	115	9%
My work/job	843	67%	110	9%	170	14%
Legal	842	67%	106	9%	75	6%
School	786	63%	105	8%	121	10%
Conferences	736	59%	131	10%	183	15%
Mental Health	683	55%	115	9%	151	12%
Social services	616	49%	136	11%	249	20%
Daily Business	565	45%	153	12%	274	22%
Religious Services	558	45%	146	12%	291	23%
Voc rehab	523	42%	124	10%	295	24%
Entertainment	513	41%	166	13%	300	24%
Phase II Composite						
Interpreting Setting	Yes		No		Doesn't Matter	
Health	23	38%	2	3%	35	57%
My work/job	5	9%	7	11%	49	80%
Legal	29	33%	3	5%	38	62%
School	7	12%	8	13%	46	75%
Conferences	2	3%	8	13%	51	84%
Mental Health	8	13%	6	10%	46	75%
Social services	1	2%	10	16%	49	80%
Daily Business	0	0%	8	13%	53	87%
Religious Services	2	3%	8	13%	51	84%
Voc rehab	1	2%	8	13%	51	83%
Entertainment	1	2%	8	13%	52	85%

Looking first at the Phase I composite group, it would appear that respondents generally have positive perceptions regarding whether or not interpreters have specialized knowledge of particular interpreting settings. Specifically, it is worth noting high percentages of “Yes” responses in Health (70%), Work/job (67%), Legal (67%), School (63%), Conference (59%) and Mental Health (55%) settings. By comparison, a lower percentage of Phase II respondents reported they believe interpreters they work with have specialized knowledge of the setting. Looking at those same settings in which at least 50% of Phase I respondents reported favorably that they believe interpreters have the necessary specialized knowledge, in the Phase II composite group there were significantly fewer “Yes” options selected. Specifically, of the Phase II consumer group, only 38% reported interpreters have specialized knowledge of Health; 33% Legal; 13% Mental Health; 12% School and 9% Work/job, overall representing less favorable impressions of interpreter knowledge of specialized settings.

It is also interesting to compare Phase I and Phase II composite group responses in the “Doesn’t matter” selection column. Based on the data reported by both groups, it would appear that interpreter specialized knowledge of a particular setting is significantly more important to the Phase I composite group than the Phase II group. However, when considering this response set on the part of the Phase II composite group, anecdotal observation of the actual video-taped focus group and interview sessions indicate that not all participants understood the concept of interpreter specialization, thereby potentially impacting the high number of responses in the “Doesn’t matter” column.

F. Respondent Satisfaction with Interpreter Services

Both surveys included a number of questions designed to assess respondent satisfaction with the interpreter services they receive. These questions related to overall satisfaction; respondent comfort level with the interpreters providing services; extent to which interpreters serving them ensure and protect privacy, and perceptions regarding interpreter attitudes and understanding of deafness and deaf culture.

Overall Satisfaction

Both surveys included a broad question that asked respondents to rank their level of overall satisfaction with the interpreter services they receive. Responses are presented on Table 22 on the following page.

**Respondent Overall Satisfaction with Interpreter Services
Table 22**

Satisfaction Level	Phase I Composite		Phase II Composite	
	# of Responses	% of Respondents	# of Responses	% of Respondents
Always	143	11%	25	41%
Often	627	50%	26	42%
Sometimes	365	29%	9	15%
Seldom	65	5%	1	2%
Doesn't Matter	15	1%	0	0%
No response	35	3%	0	0%
Total	1250	100%	61	100%

Responses of both Composite groups are concerning regarding the extent to which consumers are satisfied with interpreter services. Of the Phase I composite group, only 11% of respondents reported they are “Always” satisfied. Another 50% of that composite group reported they are “Often” satisfied, and 29% reported they are “Sometimes” satisfied. By comparison, in the Phase II composite group, 41% of respondents reported they are “Always” satisfied with interpreter services, which while a higher percentage than the Phase I response set, still indicates a significant portion of the Phase I composite group that is not “Always” satisfied with services. Of that composite group, 42% reported they are “Often” satisfied, and 15% reported they are “Sometimes” satisfied.

In considering the higher overall percentage of the Phase II composite group that is “Always” satisfied with services (41% of respondents) compared to only 11% of the Phase I composite group respondents, it may be that the potentially higher level of sophistication of the Phase I group and increased capacity to self-advocate may contribute to higher expectations regarding the performance of the interpreter working with them than the expectations of the Phase II respondent. Simply stated, perhaps a higher level of consumer educational achievement and work/job status (Table 5 and 6) may contribute to increased expectations regarding interpreter preparedness and qualifications.

Respondent/Interpreter Comfort Level

Survey respondents were asked to indicate the extent to which they establish a comfort level with the assigned interpreter and can understand and communicate fully. Responses of both composite groups are presented on Table 23 below.

Respondent Comfort Level with Interpreter				
Table 23				
Type of Response	Phase I Composite		Phase II Composite	
	# of Responses	% of Respondents	# of Responses	% of Respondents
Always	568	45%	15	25%
Often	475	38%	25	41%
Sometimes	159	13%	17	27%
Seldom	11	1%	0	0%
Doesn't Matter	4	0%	0	0%
No response	33	3%	4	7%
Total	1250	100%	61	100%

In comparing the Phase I and Phase II composite group responses, it would appear that the Phase I consumer group is more likely to achieve a higher comfort level with the interpreter they work with are Phase II respondents. It is interesting to consider once again the impact of higher educational achievement and work/job status on consumer responses in this regard. It may be possible that the Phase I composite group, largely more educated and having achieved higher levels of work success than the Phase II group, is better able to advocate for an interpreter of choice, or an interpreter with certain characteristics and/or qualifications, thereby contributing to a higher level of comfort in working with that interpreter.

In future data collection efforts, it may be interesting to look at factors that contribute to consumer/interpreter comfort levels, such as gender match, ethnicity match; etc.

Respondent Privacy

Respondents of both surveys were also asked to indicate the extent to which they felt the interpreter providing services respected and ensured their privacy. Responses are presented on Table 24.

Interpreter respects and ensures Respondent Privacy				
Table 24				
Type of Response	Phase I Composite		Phase II Composite	
	# of Responses	% of Respondents	# of Responses	% of Respondents
Always	513	41%	24	39%
Often	431	34%	17	28%
Sometimes	205	16%	9	15%
Seldom	44	4%	0	0%
Doesn't matter	9	1%	10	16%
No response	48	4%	1	2%
Total	1250	100%	61	100%

Again, it is concerning that less than 50% of respondents in both composite groups report the interpreters they work with “Always” ensure their privacy (41% of Phase I respondents and 39% of Phase II respondents). Looking at the data another way, in aggregate, 54% of Phase I respondents report interpreters do not “Always” respect their privacy, and 43% of Phase II respondents report interpreters do not “Always” respect their privacy. Overall, responses of the two composite groups do not speak well of consumer perceptions regarding interpreter respect for privacy. However, anecdotal observation of the Phase II focus group and interview sessions noted that a number of consumers stated they didn’t know what happened once the interpreter left the interpreting session, with regard to the extent to which private information was shared or protected.

Interpreter Attitude and Understanding of Deafness

Both groups of survey respondents were asked to indicate whether the interpreters they work with have good attitudes toward deaf people. Responses are presented on Table 25.

Interpreter Attitudes Toward Deaf People				
Table 25				
Type of Response	Phase I Composite		Phase II Composite	
	# of Responses	% of Respondents	# of Responses	% of Respondents
Always	449	36%	17	28%
Often	525	42%	23	38%
Sometimes	202	16%	19	31%
Seldom	22	2%	0	0%
Doesn't matter	9	1%	2	3%
No response	43	3%	0	0%
Total	1250	100%	61	100%

Data reported by both composite groups is concerning with regard to interpreter attitudes toward deaf people. Of the Phase I composite group, only 36% of respondents reported interpreters “Always” have a good attitude toward deaf people, and of the Phase II composite group, only 28% of respondents reported in the “Always” selection column. Looking at the respondents in aggregate that do not feel interpreters “Always” have a good attitude toward deaf people, 60% of Phase I respondents selected either “Often”, “Sometimes”, or “Seldom”, and 69% of Phase II respondents selected either “Often”, or “Sometimes”.

Respondents of both composite groups were also asked to report their perceptions regarding interpreter understanding of deaf and deaf-blind people and culture. Table 26 presents responses in that regard.

Interpreter Understanding of Deaf People and Culture				
Table 26				
Frequency	Phase I Composite		Phase II Composite	
	# of Responses	% of Respondents	# of Responses	% of Respondents
Always	335	27%	9	15%
Often	514	41%	14	23%
Sometimes	274	22%	21	34%
Seldom	46	4%	0	0%
Doesn't Matter	16	1%	0	0%
Doesn't apply	22	2%	17	28%
No response	43	3%	0	%
Total	1250	100%	61	100%

Once again, it is very concerning to note the low number of respondents in both composite groups that selected the “Always” option, thereby indicating they believe that the interpreters they work with understand deaf people and deaf culture. Of the Phase I composite group, only 27% of respondents selected that option; another 41% of Phase I respondents reported in the “Often” column and 22% in the “Sometimes” column. Responses were even lower on the part of the Phase II composite group. Of that group, only 15% reported they believe interpreters “Always” understand deaf people and deaf culture; another 23% reported in the “Often” column and 34% in the “Sometimes” column.

Interpreter Understanding of Deaf-blind People and Culture				
Table 27				
Frequency	Phase I		Phase II	
	# of Responses	% of Respondents	# of Responses	% of Respondents
Always	122	10%	1	2%
Often	172	14%	2	3%
Sometimes	238	19%	2	3%
Seldom	165	13%	0	0%
Doesn't Matter	33	1%	0	0%
Doesn't apply	405	32%	55	90%
No response	115	9%	1	2%
Total	1250	100%	61	100%

In looking at the data on Table 27, it must be recalled that very few respondents in either composite group identified themselves as “deaf-blind” (Table 1). This is likely the reason responses are low in each of the selection categories other than “Doesn’t apply”, particularly in the Phase II composite group.

Adequate Number of Interpreter Education Programs

One final question in both surveys asked respondents to indicate whether they believe there are enough interpreter education programs available today. Responses of the two composite groups are compared on Table 28.

Adequacy of Interpreter Education Programs				
Table 28				
Type of Response	Phase I Composite		Phase II Composite	
	# of Responses	% of Respondents	# of Responses	% of Respondents
Yes	282	23%	19	31%
No	631	50%	19	31%
No opinion	299	24%	23	38%
No Response	38	3%	0	0%
Total	1250	100%	61	100%

The Phase I composite group of deaf consumers appears to understand issues related to the shortage of Interpreter Education Programs. In the survey, 50% of Phase I respondents reported they do not believe there are enough Interpreter Education Programs available today, with only 23% reporting they believe there are enough of these programs in place. In comparison, of the Phase II composite group, 31% of respondents reported they do not believe there are enough interpreter education programs in place, and another 31% reported there are enough programs. In addition,

38% of Phase II respondents reported having “No opinion” regarding the issue. Once again, observation of the Phase II focus group and interview session videotapes suggests that a number of Phase II respondents did not understand the nature of the question, or the scope of what would be considered an interpreter education program.

This concludes the Comparison of Findings section of the report. The next section provides a summary overview of the primary similarities and differences across the two composite groups.

II. Summary Overview

This final section of the report is organized in two categories of information: Areas of Similarity with regard to information reported by the two needs assessment composite groups, and Points of Difference. Within each category, specific examples of similarities and differences between Phase I and Phase II consumer perceptions are presented.

Areas of Similarity

The majority of both composite group respondents identified themselves as “Deaf”. Specifically, 83% of Phase I respondents and 91% of Phase II respondents identified themselves as “Deaf” when completing the survey. Very few consumers participating in either needs assessment effort identified themselves as hard of hearing, deaf-blind or having a cochlear implant, and neither survey included a self-identification selection option of low-functioning deaf.

Both needs assessment efforts obtained fairly equitable input from female and male consumers.

The majority of respondents in both composite groups are working-age, or between 21 and 60 years of age. Neither needs assessment effort obtained input from transition-age consumers.

ASL is the primary and/or preferred means of communication for respondents in both composite groups. Of Phase I respondents, 71% reported they preferred ASL or used ASL as their primary means of communication, and of the Phase II respondents, 89% reported they preferred ASL, or used ASL as their primary means of communication.

Respondents know how to get interpreter services when they need them. In the Phase I group, 89% of respondents reported that they know how to obtain interpreter services, and in the Phase II composite group, 85% of respondents reported they know how to obtain interpreter services.

The majority of respondents use interpreter services more than four times per month. In aggregate, of the Phase I composite, 59% of respondents use interpreter

services four times per month or more, and in Phase II composite, 72% of respondents reported they use interpreter services four times per month or more. In addition, of the Phase I group, 20% reported using interpreter services more than 15 times per month, and 18% of Phase II respondents also reported using interpreter services 15 times per month or more.

Respondents in both composite groups experience difficulty accessing interpreter services when they need them. In the “1-3 times per month” interpreter frequency use, respondents in composite groups reported difficulty accessing interpreter services: in the Phase I composite, 44% of respondents reported difficulty accessing services and in the Phase II composite, 58% of respondents reported difficulty. In addition, in the Phase I composite, another 15% of respondents reported they have difficulty getting interpreters in the “4-6 times per month” frequency category.

VRS services are utilized by a majority of respondents in both composite groups. In the Phase I composite group, 80% of respondents reported they utilized VRS, and 84% of respondents in the Phase II composite group reported they utilized VRS. However, it is unclear whether the respondents reporting use of VRS were utilizing that technology to communicate directly with deaf friends, or whether they used VRS interpreters.

Respondents in both groups believe VRS has had an impact on the availability of interpreter services in the community. Of Phase I respondents, 80% either think that VRS has affected the availability of interpreters in live community settings, or are not sure, and 68% of the Phase II composite group also reported they believe VRS has affected the availability of interpreters in live community settings, or are not sure.

In both composite groups, the highest number of respondents identified “Health” settings as the most difficult for securing interpreting services. Specifically, for Phase I respondents, settings identified as most difficult for securing interpreting services were Health (48%); Work/job (42%) and Conferences (28%). In the Phase II composite group, settings identified as most difficult for securing interpreting services were Health (52%) and Work/job (26%).

The majority of respondents in both needs assessment efforts reported that interpreter ethnicity “Doesn’t matter” to them. Specifically, 60% of Phase I respondents and 96% of Phase II respondents reported that interpreter ethnicity “Doesn’t matter”.

The majority of consumers in both composite groups reported they don’t believe the interpreters they work with “Always” know what they are doing. Specifically, only 36% of Phase I respondents and 31% of Phase II respondents reported interpreters “Always” know what they are doing. This leaves a high percentage of respondents in both composite groups sharing the perception that the interpreters they work with do not always know what they are doing (64% of Phase I respondents and

67% of Phase II respondents if the options “Often”, “Sometimes”, and “Seldom” are aggregated).

Less than half of respondents in both composite groups report the interpreters they work with “Always” ensure their privacy. Specifically, only 41% of Phase I respondents and 39% of Phase II respondents reported the interpreters they work with respect their privacy. Overall, responses of the two composite groups do not speak well of consumer perceptions regarding interpreter respect for privacy.

Low numbers of respondents in both composite groups reported that the interpreters they work with “Always” have positive attitudes toward deaf people, or “Always” understand deaf people and deaf culture. Of the Phase I composite group, only 36% of respondents reported interpreters “Always” have a good attitude toward deaf people, and of the Phase II composite group, only 28% of respondents reported in the “Always” selection column. Of the Phase I composite group, only 27% of respondents reported interpreters “Always” understand deaf people and deaf culture, and 15% of Phase II respondents selected that option.

Points of Difference

As a composite group, Phase II respondents are more culturally diverse than Phase I respondents. Respondents of the Phase I composite group were predominantly white/Caucasian (83%), while in the Phase II composite group, respondents were spread across three primary cultural groups: White/Caucasian (46%); African-American/Black (21%), and Latina/o/Hispanic (18%).

Phase I survey respondents have achieved higher levels of education than the Phase II respondents. Of Phase I respondents, 78% have at least an undergraduate or graduate degree. Of those, 29% reported they possessed a BA/BS degree and 31% reported they possessed a graduate degree. In the Phase II survey, 72% of respondents reported having achieved only a high school degree.

Phase I respondents have achieved higher levels of employment and attainment of ‘white collar’ jobs than the Phase II respondents. Specifically, 61% of Phase I respondents reported they are currently working, with the largest percentage, or 27%, holding academic-related jobs. Another 21% of respondents were counted in the business professional category, and 13% as hourly employees. By comparison, 61% of the Phase II respondents reported they did not have a job. In that composite group, only 7% of respondents reported they are business professionals and 13% employed in the hourly workforce. However, 47% of the Phase II respondents reported they are a VR consumer, perhaps accounting for a portion of those respondents that didn’t respond to the question regarding work status.

Phase II respondents are more likely to receive VR services than Phase I respondents. Although the Phase I survey did not include a question related to VR status, 61% of respondents reported they were working so it can be assumed these

respondents were not a VR consumer at the time of the survey, although it is impossible to determine if they received VR services in the past. Of the Phase II respondents, 47% reported they were a VR consumer and another 10% reported they had received VR services in the past.

The Phase II consumer feels more positively about the use of a deaf interpreter than the Phase I consumer, however, the Phase I consumer is much more likely to have actually used such services. In the Phase I composite group, only 17% of Phase I respondents reported they would like to utilize deaf interpreter services. In comparison, 51% of Phase II respondents reported they would like to use deaf interpreter services. However, when the two composite groups reported on settings in which they have utilized a deaf interpreter, it would appear that very few Phase II respondents have actually utilized the services of a deaf interpreter, and that the Phase I respondent is much more likely to have utilized such services.

Interpreting settings selected as ‘most important’ to Phase I respondents were work, health and school; the one setting selected as ‘most important’ by the majority of Phase II respondents was health. Specifically, of Phase I respondents, 35% selected “Work/job” as most important, 20% selected “Health”, and 20% selected “School”. By comparison, 78% of Phase II respondents selected “Health” settings as most important.

Interpreter certification is considered more important to the Phase I composite group than to the Phase II group. In the Phase I composite group, 51% of respondents reported certification is “Always” important; another 29% reported it is “Often” important. If those two response sets are aggregated for the Phase I composite group, it can be assumed that certification is very important to the Phase I consumer, with 80% reporting it is “Always” or “Often” important. By comparison, in the Phase II composite group, 51% of respondents also said certification is “Always” important; 3% reported it is “Often” important, and 33% reported interpreter certification “Doesn’t matter” to them.

Interpreter specialized knowledge of particular settings is more important to Phase I composite group respondents than to the Phase II respondent pool. Phase I respondents generally have positive perceptions regarding whether interpreters have specialized knowledge of particular interpreting settings. By comparison, low percentages of Phase II respondents reported they believe interpreters they work with have specialized knowledge of specific interpreting settings. It is also interesting to compare Phase I and Phase II composite group responses in the “Doesn’t matter” if interpreters have specialized knowledge of a particular setting selection column. Based on the data reported by both groups, it would appear that interpreter specialized knowledge of a particular setting is significantly more important to the Phase I composite group than the Phase II group.

The Phase II composite group reported higher levels of satisfaction with interpreter services than the Phase I group. Of the Phase I composite group, only

11% of respondents reported they are “Always” satisfied. By comparison, in the Phase II composite group, 41% of respondents reported they are “Always” satisfied with interpreter services. In considering the higher overall percentage of the Phase II composite group that is “Always” satisfied with services compared to the Phase I composite group respondents, it may be that the potentially higher level of sophistication of the Phase I group and increased capacity to self-advocate may contribute to higher expectations regarding the performance of the interpreter working with them than the expectations of the Phase II respondent.

The Phase I consumer group is more likely to achieve a higher comfort level with the interpreter they work with than are Phase II respondents. It is interesting to consider once again the impact of higher educational achievement and work/job status on consumer responses in this regard. It may be possible that the Phase I composite group, largely more educated and having achieved higher levels of work success than the Phase II group, is better able to advocate for an interpreter of choice, or an interpreter with certain characteristics and/or qualifications, thereby contributing to a higher level of comfort in working with that interpreter.

In summary, looking at the primary points of difference between the two composite groups, it is evident that the higher levels of academic and career achievement of the Phase I consumer group may be a contributing factor to many of the subsequent perceptions expressed by both groups throughout the course of completing the survey questions.