

# **Chapter 51 Hearing**

## **October 4, 2010**

Hello, my name is Denise Johnson, and I am the coordinator for a state-funded project whose goal is to improve the AODA treatment outcomes for persons who are Deaf, deaf-blind or hard of hearing. As you can imagine, most treatment providers aren't well prepared to assist persons from this target population, so my goal is to improve the provider's ability to serve this population. In the 10 years or so that I've been doing this, we've expanded our outreach to include mental health, domestic violence, bullying, suicide prevention and other related issues. So, although my initial focus was on AODA, I have expanded my outreach to include numerous other related areas.

First of all, you should know that in general, persons who are Deaf, deaf-blind or hard of hearing often experience barriers to communication access in receiving any type of mental health and/or AODA services, which mostly results in those persons not getting the proper care.

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Today I want to share an experience with you; however, I will not identify the people who are involved in order to respect their privacy. The wife is Deaf and the husband is hard of hearing. They have a teenager who is hearing. This family lives in Waukesha. Recently, one night, the son became very upset and was out of control. The couple decided to call for help; so they called 911. Upon arrival of the police, the husband spoke with one police officer while the other police officer spoke with the teenager. The next thing the couple saw was the police handcuffing their son, but they had no idea why? Then the police told the couple that they were taking their son to the local hospital. The couple still did not know why their son was being handcuffed, there was no explanation and no interpreter was present. The wife decided to follow the police to the hospital. The wife was very upset and puzzled because she simply just wanted help.

At the hospital, the wife waited more than 3-1/3 hours to receive an interpreter. You must know how stressful that was for both the mother and child. The mother felt helpless to see her child handcuffed to the bed and not getting any services. And not only that but there were several police sitting around the son and the police even continue to talk with her son for the 3 and half hours, the mother was clueless what her son and the police were discussing. The mother nervous and worried that whatever her son and police were discussing about that the police would use the information against her son in court... The mother didn't know if she

had the power to tell the police to stop talking to her child. The hospital even had the nerve to bring in a co-worker to interpret for the mother – someone who supposedly knew sign language, but who really didn't know much at all. The co-worker was not qualified at all - he was signing like this: very, very slow, what is your name... and he couldn't even voice and interpret for the mother.

The mother finally got an interpreter but the nurse or doctor didn't show up and then they waited another 40 minutes before finally, the doctor and nurse came in the room and spoke few minutes and then left out of the room. The son was to be transferred to Milwaukee County Mental Health Complex (which was located in another city & county). Again the hospital did not explain why her son needed to go to another hospital and did not ask the mother which hospital that she preferred that her son get professional help.

The mother and the interpreter decided that the interpreter will interpret at the MMHC. Upon the arrival, the mother was faced with another difficult situation. The MMHC refused to use the interpreter that came with the mother because they had a policy to use their own interpreter; the mother knew the Milwaukee County-preferred interpreter and refused to use this person because this interpreter is NOT qualified to interpret for the mother and the son. Again the mother and son had to wait three more hours for the interpreter who lives in Milwaukee. Why would it take three hours for the interpreter to arrive when this person lives in Milwaukee? The son was finally admitted to his room at 3:30 AM. Both the mother and the son were very exhausted.

Individuals who are Deaf, deaf-blind or hard of hearing have a wide range of ability to function, communicate and to speak and hear.

In this particular instance, the mother was faced with another problem after several weeks later. The mother learned that she has to pay two huge hospital bills. The mother has private health insurance and she learned that her health insurance will not pay for the services because it was a "Medical Clearance." The mother was very upset and didn't understand what does medical clearance mean? She got professional help to explain this situation and she learned that her son was being handcuffed due to Chapter 51. The mother didn't understand what Chapter 51 means ... Now the mother still does not understand why the health insurance will not cover this type of medical situation, she only asked for help. The mother stated now she fears calling the police for help.

I would like for the council to take a look at this situation and make sure that health insurance cover this type of services. Or simply remove Chapter 51 and change it to something that health insurance will cover when these people are calling for the only chance to get help.

I worried that the people who will not ask for help may end up being hurt or killed because they didn't asked for help.

Thank you for your time today!

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