

Developing Deaf Inclusive Policy Initiatives During National Emergencies



A COVID-19 National Survey by Health Signs Center

Researchers: TraciAnn Hoglind, MPH; Abbi Simons, MS; Alicia Wooten, Ph.D.

COVID-19 INFORMATION (N = 351)

1. Where do you go to the MOST to get general COVID-19 information?

Internet: 51%
Social Media: 32%
TV: 11%
Friends/Family: 3%
Doctor: 2%
Newspaper: 1%

2. Where do you go to the MOST to get general COVID-19 information about the state you live in?

Internet: 50%
Social Media: 25%
TV: 18%
Friends/Family: 4%
Newspaper: 2%
Doctor: 1%

3. Which social media platform do you use the MOST to get information?

Facebook: 64%
Instagram: 15%
Twitter: 12%
YouTube: 6%

4. Did you experience internet issues accessing information online (can't connect to the internet, ASL videos won't load, etc.)?

Yes: 38%
No: 62%

ASL VIDEOS

5. Did you find information about COVID-19 in ASL to be helpful?

Yes: 60%
Somewhat: 26%
No: 2%
I did not get any COVID-19 information in ASL: 13%

Of the 86% who found it helpful: 6. How much do you trust COVID-19 information explained in ASL?

A lot: 29%
Most: 51%
Little: 9%
None: 1%

7. What would encourage you to watch ASL videos?

Deaf experts in field: 73%
CDI: 71%
Deaf native signers: 60%
BIPOC Representation: 56%
Other: 9%

8. What features would encourage you to watch ASL videos?

Visual graphics: 69%
Captioning/Subtitles burned in: 62%
Option to speed up videos: 54%
Option to turn off captions: 32%
Other: 7%

Other answers from questions 7/8:

- Availability to adjust speed
- Use of credible sources
- Shorter videos
- Deaf organization leaders
- Well executed translations
- RID certified interpreter
- Captioned videos
- Description and transcript

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STATE-SPECIFIC COVID-19 INFORMATION

9. In the past several months, how much did you understand COVID-19 updates and information in your state?

A lot: 35%
Most: 45%
Some: 19%
None: 1%

11. In the past several months, how satisfied were you regarding accessibility of COVID-19 updates from your state government?

Completely: 19%
Mostly: 46%
Little: 29%
Not at all: 6%

13. Other than live events, what kind of ASL resources were provided by your state government and/or the Deaf and Hard of Hearing Office?

Brief ASL video recaps: 35%
One-stop info website page: 34%
None: 33%
Video descriptions and transcripts: 31%
Other: 6%

15. What kind of support services did you receive?

69% did not receive any support services.
Among those who did:

Mental health services: 11%
Unemployment benefits: 10%
Food stamps: 8%
Peer support services: 4%
Other: 4%
Housing support services: 3%
Substance use disorder/addiction services: 1%

10. In the past several months, how much did you understand information provided from press conferences in your state?

A lot: 25%
Most: 32%
Some: 26%
None: 3%

12. During live events (i.e. press conferences) by your state government, what kind of ASL resources were provided?

Deaf ASL interpreters: 62%
Hearing ASL interpreters: 61%
Live captioning: 56%
None: 7%
Other: 7%

14. What kind of support services are available in your state?

Unemployment benefits: 76%
Mental health services: 65%
Food stamps: 64%
Housing support services: 56%
Substance use disorder/addiction services: 49%
Peer support services: 41%
Other: 11%

16. Do you feel that your state government's emergency preparedness and policies were inclusive of, or accessible to, the Deaf and hard of hearing community?

Yes: 16%
Somewhat: 53%
No: 26%
I don't know: 5%

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STATE-SPECIFIC COVID-19 INFORMATION

17. Do you feel that your state's commission/office of the Deaf and Hard of Hearing represents your needs as a deaf, hard of hearing, deafblind, or deafdisabled person?

Yes: 25%
Somewhat: 36%
No: 29%
I don't know: 9%

18. Which of the following state services/agencies are you familiar with?

Dept. of Education: 68%
Dept. of Health: 67%
Dept. of Disabilities: 44%
Emergency Management: 38%
Commission on Civil Rights: 34%

19. Do you know where to file a complaint within your state if you experience discrimination?

Yes: 49%
No: 51%

COVID-19 EXPERIENCES

20. When COVID-19 started to become widespread in March 2020, how worried were you that you would be impacted?

Very worried: 54%
Worried: 28%
A little worried: 14%
Not worried at all: 1%

21. How worried are you now that you may be impacted by COVID-19?

(Survey was disseminated July–September 2020)
Very worried: 36%
Worried: 39%
A little worried: 20%
Not worried at all: 4%

22. How would you rate your quality of life during the COVID-19 pandemic?

Very good: 14%
Good: 64%
Not good: 22%

23. How would you rate your mental health during the COVID-19 pandemic?

Very good: 11%
Good: 55%
Not good: 33%

24. Did you lose your job due to COVID-19?

Yes: 12%
No: 88%

25. Do you know where to go for COVID-19 testing?

Yes: 80%
No: 20%

26. Have you ever been tested positive for COVID-19?

Yes: 3%
No: 29%
I haven't taken a COVID-19 test: 68%

27. Is COVID-19 testing free of charge?

Yes: 58%
No: 4%
I don't know: 39%

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COVID-19 EXPERIENCES

28. How familiar are you with the accessibility requirements for COVID-19 testing?

Very familiar: 16%
Familiar: 28%
Not familiar: 56%

29. Do you feel confident that you will receive full accessibility at COVID-19 testing locations?

Yes: 21%
No: 45%
I don't know: 34%

DEMOGRAPHICS

30. State

California: 18%
Texas: 15%
Maryland: 12%
Colorado: 9%
Washington: 9%
Florida: 9.5%
Indiana: 8%
New York: 8%
Illinois: 7%
Massachusetts: 5%

31. Age

18-19: 1%
20-29: 23%
30-39: 31%
40-49: 19%
50-59: 15%
60-69: 10%
70+: 3%

32. Do you identify as:

Culturally Deaf: 66%
Deaf: 25%
Hard of Hearing: 5%
DeafDisabled: 2%
DeafBlind: 2%

33. Are you currently:

Female: 71%
Male: 24%
Non-Binary: 4%
Transgender: 1%

34. Are you Hispanic, Latino/a/x, or Spanish?

Yes: 15%
No: 85%

35. What is your race?

White: 77%
Asian: 10%
Black: 5%
Biracial/Multiracial: 3%
Hispanic/Latinx: 2%

36. What is your occupation?

Employed: 65%
Student: 8%
Unemployed: 8%
Self-employed: 8%
Retired: 7%
Disabled: 4%

37. Do you currently:

Own: 44%
Rent: 44%
Live rent free with family or friends: 12%
College dorm: 0%
Senior living facility: 0%
Nursing home or long term care facility: 0%

38. What is your household income?

Less than \$20,000: 19%
\$20,000 - \$34,999: 13%
\$35,000 - \$49,999: 17%
\$50,000 - \$74,999: 25%
\$75,000 - \$99,999: 11%
Over \$100,000: 13%

39. What is the highest grade or level of schooling you completed?

8-11 years: 1%
12 years or completed high school: 7%
Post high school training other than college: 2%
Some college: 21%
College graduate: 37%
Postgraduate: 33%

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ANNOUNCEMENTS

We thank the participants for sharing their experiences. At the end of the survey, participants voted for organizations Health Signs Center shall donate to. We are happy to say Health Signs Center has donated to the National Black Deaf Advocates, Deaf Queer Resource Center, and Deaf Women of Color. Thank you for your advocacy work!

While the data above presents univariate description statistics of our sample, we have state-specific data for the following states: California, Colorado, Florida, Illinois, Indiana, Maryland, Massachusetts, New York, Texas, and Washington. Deaf/Hard of Hearing State Commissions and/or Associations are welcome to request state-specific data and to collaborate for policy formulation and recommendations. If interested, please contact hello@healthsignscenter.org.

We thank the Communication Service for the Deaf for funding this project.

SUMMARY

During the COVID-19 pandemic, Health Signs Center developed a survey to look into accessibility issues in order to guide the development of Deaf inclusive policies on the national and state level. 351 individuals completed the survey and we found that more than half rely on the internet to get information related to COVID-19. This means that news articles and websites were the main source of information. Approximately 30% use social media, particularly facebook as their main source of information.

For agencies with a goal to increase awareness and accessibility, sharing information on facebook would be an optimal approach to reach the Deaf and Hard of Hearing (DHH) population. How the information is provided in internet and social media outlets has shown to be critical in being deaf inclusive. 86% of people found information presented in ASL to be beneficial and trusted. Very few stated they did not want or trust information in ASL. For national and state agencies to improve inclusiveness, all english text should be presented with an ASL component that can be done using deaf experts in the field and CDIs. There is also high emphasis on Deaf native signers and consideration for BIPOC representation.

(CONTINUED BELOW)

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SUMMARY (CONTINUED)

Future videos created by agencies should consider reaching out to Deaf experts and CDIs to work together to create meaningful and clear content. In addition to ASL videos, additional accessibility content should be considered as the ability to speed up or slow down videos, captioning, and most importantly, increased use of visual graphics. As deaf individuals are often visual learners, increased use of graphics and animations help provide increased education and understanding for all, including those outside the DHH community.

During the pandemic, many live events were hosted and only about 60% of participants said they were given accessibility such as interpreters (both deaf and hearing) and captioning. 7% stated they did not receive any services during live events, thus rendering them unable to obtain important information on the spot. While deaf awareness and providing access are improving, only 16% of participants believed that the state emergency preparedness plans and policies were accessible to the DHH community. Around half (51%) of participants do not know how to file a complaint if they experience discrimination.

As state commissions, offices, and associations work to improve accessibility, please ensure the community, with appropriate representation, is at the table and involved. Outreach efforts are also highly critical to ensure the community stays informed and is aware of the services available for them.

RECOMMENDED APA CITATION

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