

Child Maltreatment in the Deaf Community: Cultural Considerations, Risks, and Barriers to Disclosure

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Author Note

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Abstract

Maltreatment of children in the Deaf community is a pervasive issue that is rarely discussed. This article identifies specific aspects of Deaf culture that influence best practices in communication and etiquette for Children's Advocacy Center staff and others who work with Deaf children. Deaf children may have different experiences in their victimization than those of hearing children, and those experiences, along with aspects of their culture, can impact disclosure of abuse to authorities. This article also discusses how social media plays a part in the grooming and abuse of Deaf children.

Keywords: *Deaf culture, Deaf children, disclosure of abuse*

Children in the Deaf community are often overlooked when Children's Advocacy Centers develop procedures and practices. In my professional roles, I have discovered that while Deaf children are at high risk for maltreatment, there is limited research specific to abuse within the Deaf community, and few opportunities for professionals to receive training specific to working with the Deaf community. Children in the Deaf community often share some similarities that are helpful to consider in an investigative and service response. While their involvement in the Deaf community is an important part of their identity, it is crucial to keep in mind that every child is different, regardless of their abilities. This article identifies specific aspects of Deaf culture that influence best practices in communication and etiquette for Children's Advocacy Center staff and others who work with Deaf children. A companion article in this issue (Pegler, 2026) provides advice on conducting forensic interviews with Deaf children.

Deaf Culture and Etiquette

To be a more effective, culturally competent child abuse professional, it is important to have a basic understanding of Deaf culture and etiquette when serving a child from the Deaf community. The Deaf community is extremely diverse, and members may also identify with other cultural and community groups. Each person should be viewed as an individual with their own needs and abilities. However, knowledge of the Deaf community can help the interviewer gain rapport with the child and avoid potential misunderstandings.

Nearly all Deaf and hard of hearing people prefer the terms "Deaf" and "hard of hearing" (National Association of the Deaf [NAD], 2020). "Hearing impaired" is an older term that was regarded as a politically correct attempt to be less blunt or direct about the person's deafness. However, it is no longer widely accepted, as it focuses on what someone

cannot do (NAD, 2020). The term “impaired” also has a connotation that implies something is wrong with the individual or that they are damaged in some way (Holcomb, 2013; NAD, 2020).

The word “Deaf” is written with an uppercase “D” when it is referring to people who are Deaf and who also identify with the Deaf culture, thus sharing language, knowledge, beliefs, and practices (Chapple, 2019; Holcomb, 2013; Padden & Humphries, 1988). It is written with a lowercase “d” when it is referring to the audiological condition of someone who has hearing loss. However, using a lowercase “d” can be a bit controversial. In academia, it is common to see d/Deaf used when referring to a group of people who may vary in how much they identify with Deaf culture, if at all. To some people in the Deaf community, writing “d/Deaf” is seen as offensive and divisive of their already small community (K. Walker, personal communication, October 17, 2020).

The Deaf community is an umbrella that encompasses many different individuals, and no matter how much hearing they may have, or how much American Sign Language (ASL) they may know, as long as they identify themselves as a Deaf person, they are included in the Deaf community and the “D” should be capitalized (Deaf Counseling Center, 2006; K. Walker, personal communication, October 17, 2020). While acknowledging the use of “d/Deaf” or “Deaf” is not currently agreed on within the Deaf community, for the purposes of this paper, “Deaf” will be used to encompass people with hearing loss, no matter how severe, and those who identify with the Deaf community.

“Hard of hearing” usually refers to a person who has mild to moderate hearing loss (NAD, 2020). They may or may not identify with the Deaf community (Holcomb, 2013). Hard of hearing individuals may feel as though they do not fully belong in the Deaf community and do not fully belong in the hearing community, which can cause feelings of loneliness and isolation.

Late-deafened individuals are people who were born hearing, acquired language, and then lost their

hearing ability at some point after that (Association of Late Deafened Adults, 2020; European Federation of Hard of Hearing People [EFHHP], 2018). Late-deafened individuals can be adults or children. There is no consensus on the youngest age at which an individual can be identified as “late-deafened”. There are major differences in how a preschool-aged child experiences deafness after previously being able to hear, as compared to an adult (National Deaf Center on Postsecondary Outcomes, 2022). Hearing loss could occur gradually or suddenly. It can be very difficult for late-deafened people to adjust (EFHHP, 2018).

Historically, there has been considerable stigma associated with being deaf. While media, especially social media, is beginning to destigmatize deafness through exposure and giving Deaf individuals a way to show their capabilities, some people still equate limited hearing or speaking abilities with intellectual delays (Gingiss, 2018).

Forensic interviewers and other Children’s Advocacy Center (CAC) multidisciplinary team members may hold preconceived and problematic ideas about Deaf children and their families. In professional literature and trainings, Deaf children are often included with children who have a range of disabilities, including those with developmental disabilities. This inclusion can perpetuate misinformation regarding their intelligence and cognitive abilities. Deaf children should not be seen as delayed, nor should people have low expectations of their cognitive and intellectual abilities because of their deafness (A. Blades, personal communication, May 7, 2020). Many Deaf people reject the term “disabled,” as they have their own language and are not limited in their communication with other members of the Deaf community (Holcomb, 2013). They may feel some degree of annoyance at being lumped in as a member of “people with disabilities” rather than “culturally Deaf” – a source of pride, not something to be pitied or corrected (Holcomb, 2013).

In general, Deaf people prefer “identity-first” versus “person-first” language (Riechers, 2020). With other disabilities, it is a good general practice to say,

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“person who has” and the disability – also referred to as “person-first” language (Riechers, 2020). Deaf people often view being part of the Deaf community as a cultural identity, rather than a disability, and prefer to be referred to as a “Deaf person” rather than “person who is Deaf” (Riechers, 2020).

Gannon (2012) explains that the stigma and biases that can come with being in the Deaf community can be traced back to Aristotle. He felt Deaf people were incapable of learning and developing cognitively, pronouncing them “deaf and dumb” – an offensive term that some still use today. Even if an individual is saying “dumb” to mean “silent” as opposed to “incapable of learning,” the term remains offensive, as does the term “mute,” since Deaf people communicate in a variety of ways. Most have fully functioning vocal cords and are not silent (NAD, 2020).

In the United States, most Deaf people use ASL, which is considered an integral part of Deaf culture (Holcomb, 2013). ASL is a language that combines movement of the hands, arms, torso, and head, along with facial expressions (Liddell, 2003). While many hearing people believe ASL mimics English, ASL has its own grammatical structure that differs significantly from English. Deaf individuals are accustomed to looking for meaning in postures, gestures, and facial expressions. Even if a professional is not using sign language, a child may look at these non-verbal aspects of the professional’s communication to gain more information about meaning. ASL and Deaf culture are extremely direct and may be considered “blunt” to the hearing community (Hall, 1983; Holcomb, 2013; Smith & Hope, 2015).

The direct nature of the culture is partially due to the cultural importance of information-sharing (Holcomb, 2013). The Deaf community places strong value on collectivism versus individualism (Holcomb, 2013; Smith & Hope, 2015). People in the Deaf community are often deeply connected to one another and expect fierce loyalty to the Deaf community (Holcomb, 2013). Many people will identify strongly with the culture and want to do

what is best for the Deaf community as a whole and for others in the community, rather than what is best for themselves as individuals (Holcomb, 2013). In any collectivist culture, sharing information is important to promote unity within the community (Holcomb, 2013). In the Deaf community, individuals may not have as much access to information as hearing people due to communication barriers, so information is precious to them (Hall, 1983; Holcomb, 2013).

If a deaf or hard of hearing person lip-reads, there is no need to oversimplify things, exaggerate mouth movements, or yell. These actions can change the way the mouth looks when certain words are spoken and may make it more difficult for the deaf person to lip-read (Cassady et al., 2005). According to Holcomb (2013), if a deaf person is not confident in their vocalization abilities, but does choose to vocalize to a hearing person, he/she often speaks in a quiet voice, which can cause the hearing person to lean in and turn their ear toward the Deaf person’s mouth, limiting the person’s ability to lip-read. This is often frustrating and upsetting for a Deaf person. A better option is to enable the Deaf person to maintain eye contact and attempt to lip-read.

Touching and physical interaction within the Deaf community is very common (R. Garcia, personal communication, April 13, 2020). Touching someone’s arm or shoulder is culturally appropriate and generally the most acceptable way to get their attention (Smith & Hope, 2015). Other ways to get the attention of someone who is deaf or hard of hearing include turning lights on and off, waving a hand at them, and stomping on the ground. (Hall, 1983; Holcomb, 2013; Green et al., 2015). In the presence of hearing people, foot stomping and flashing lights are often not used, as hearing people could react negatively (Holcomb, 2013). Waving should only be done if the person is too far away to touch (Holcomb, 2013). While physical contact is common in the Deaf community, it is unacceptable to take or hold someone’s hand when speaking with them (Hall, 1983). In the hearing community, it may be seen as a form of comfort, but in the Deaf

community, it can be seen as equivalent to putting a hand over their mouth to silence them (Hall, 1983).

ASL interpreters and hearing children of Deaf adults (often referred to as a “CoDA”) are also considered members of the Deaf community (Smith & Hope, 2015; Holcomb, 2013). Younger CoDAs may prefer to sign, since ASL is most often the language used at home and likely to have been their first language (Holcomb, 2013). If the child is not yet in school, they may not have verbal language skills yet or may be less advanced in spoken English than similarly aged children who speak English at home. For CoDAs, even though they may be hearing, ASL is often their primary language (Holcomb, 2013). Children of Deaf parents may identify more with Deaf culture than mainstream culture, even if they are hearing.

Abuse in the Deaf Community

There is little research specific to child abuse in the Deaf community, and much of the research that has been done is outdated (Mertens, 1996; Ridgeway, 1993; Sullivan et al, 1991; Sullivan, Vernon, & Scanlon, 1987). The prevalence of child abuse in the Deaf community is difficult to determine because findings vary in the few Deaf-specific studies that have been conducted.

However, there is evidence that child abuse and domestic violence in the Deaf community occur more often than in the mainstream community (Anderson & Leigh, 2011; Schenkel et al, 2014; Kvam, 2004; Wakefield et al, 2018). In fact, Kvam (2004) concluded that deaf children have a two to three times higher risk of maltreatment than hearing children, with 45.8% of Deaf girls and 42.4% of Deaf boys reporting some form of unwanted sexual experiences before age 16. These instances of abuse were very rarely reported.

Schenkel et al. (2014) found that Deaf and hard of hearing youth were significantly more likely to be victims of child maltreatment as compared to their hearing counterparts, with 76% of Deaf college students reporting that they had been victims

of child maltreatment. In this study, the severity of deafness was also a factor, with Deaf students reporting more instances of maltreatment than hard of hearing students, and hard of hearing students reporting more instances of maltreatment than hearing students. In comparison to hearing students, Deaf students also reported experiencing more types of child maltreatment—including emotional abuse, physical abuse, sexual abuse, physical neglect, and emotional neglect.

Disparity in what victims consider to be abuse and a lack of consistent definitions of abuse could contribute to inaccurate or inconsistent statistics regarding its prevalence in the Deaf community. Adult women in the Deaf community are more likely to be victims of interpersonal violence than hearing women (Anderson & Leigh, 2011). However, Anderson and Pezzerossi (2011) found that over 50% of Deaf victims of interpersonal violence chose not to label their experiences of psychological maltreatment, physical assault, and sexual coercion as abuse. Some research participants, for example, acknowledged being strangled in the past year but did not label the incidents as “abuse.” While the dynamics of victimization as an adult are different than the dynamics of victimization as a child, these findings indicate a possible normalization of violence in the Deaf community. In addition to being a risk factor for child maltreatment (Devaney, 2015; Appel & Holden, 1998), domestic violence in the home can create barriers to disclosure and make the child feel as if violence is a normal part of relationships. The child may also fear what may happen if they disclose.

Perpetrators of child abuse may specifically seek employment in organizations where they will have access to children with differing abilities, including Deaf and hard of hearing children. These children tend to be particularly vulnerable, conditioned to obey authority, and naïve to what is sexually inappropriate (Smith & Harrell, 2013; Sullivan et al., 1987; Winters & Jeglic, 2017). Often, perpetrators use the guise of love, affection, and acceptance to commit sexual acts, especially for children who have limited access to the social support offered in the Deaf community – a common strategy for offenders

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of both hearing and Deaf children (Ridgeway, 1993; Tanner & Brake, 2013; Winters & Jeglic, 2017). This strategy is especially effective when the child lacks access to the Deaf community and feels unaccepted by the hearing community, and craves affection and acceptance (Ridgeway, 1993; Winters & Jeglic, 2017).

Perpetrators of abuse against Deaf children can be Deaf, hard of hearing, or hearing. They may be a part of the Deaf community or outside of it. The Deaf community is small, and perpetrators of abuse within the Deaf community can use its smallness to their advantage (Smith & Hope, 2015). Children may not want to hurt the offender's reputation within the community, and a perpetrator may tell the child that it is the child's fault if the perpetrator's positive reputation is affected by a disclosure of abuse (Harrell, 2017). Because of the collectivism of the Deaf community, this may give some children pause when determining whether to disclose abuse or victimization. A perpetrator may also spread rumors throughout the Deaf community to discredit the youth, making it more difficult for them to disclose. Information spreads very rapidly in the Deaf community (often called the Deaf grapevine) (Smith & Hope, 2015), which makes it easier for an offender to discredit a victim.

If a perpetrator is within the family, they may tell the child that the family will be ostracized from the Deaf community if anyone finds out about the abuse, causing isolation and loss of friendships (Riechers, 2020). A perpetrator may threaten to move a child away from the Deaf community or not allow the child to participate in Deaf activities to prevent them from disclosing to other safe adults or peers. They may also threaten to injure or take away a child's hearing dog, which the child depends on to be alerted to important sounds such as fire alarms (Smith & Hope, 2015). Often, children have special relationships with their dogs, so threats of this nature can be especially distressing. Also, witnessing animal abuse is correlated with an increased risk of childhood emotional abuse, possibly indicating a family in which more vulnerable members have less value within the family (DeGue & DiLillo, 2009).

An abuser may steal or destroy communication or adaptive equipment so the victim cannot call for help (Smith & Hope, 2015). Hearing aid batteries can be withheld from the child or the perpetrator could install spyware on the victim's smartphone, videophone, or teletypewriter to further limit disclosure and monitor communication. Another way that a perpetrator may limit communication and discourage disclosure is to purposely direct physical abuse to a child's hands if the child primarily uses sign language to communicate.

If a perpetrator is hearing or late-deafened, or grew up in a hearing family, they may be able to use spoken words to gain rapport with law enforcement or other professionals who are not able to communicate as easily with a Deaf child or teen (Harrell, 2017). This allows perpetrators to explain away a child's behaviors that may be signs of abuse without the child having an opportunity to give their own narrative.

Hearing children of Deaf parents may be accustomed to serving as an interpreter for their parent, and law enforcement may communicate mainly with the child, expecting information to be relayed from the child to the adult. However, it is important to be aware of where people are placed in the room if an adult is also present, especially the alleged perpetrator or someone who may be allied with the perpetrator. In one instance from this author's personal experience, a hearing child had disclosed sexual abuse by her Deaf father and police went to her home along with CPS. The child recanted and, during a later forensic interview, indicated that she recanted because her father was standing behind the police officer and was signing to her what she should say while reading her lips to ensure she said what he wanted.

Barriers to Disclosure for Deaf Children and Vulnerability Factors

In addition to barriers that perpetrators may put into place, Deaf children can have other barriers that affect their disclosures of abuse. They may be socially isolated, leaving them with fewer people to

whom they are comfortable disclosing, and fewer people observing the child for signs that something may be amiss. Nonoffending parents might desire children to be “normal” and place them in clubs or activities to reduce social isolation (Johnson & Pawelski, 2011). Normally, this would be beneficial for a child, but parents may lower their guard and put unearned trust in adults who lead activities because they want so badly for their child to feel a part of something (Johnson & Pawelski, 2011). There are few Deaf-specific teams and activities available for Deaf children. For example, a child who requires a basketball coach who knows ASL will have fewer options for a basketball team than a hearing child who does not require ASL. Also, if the child feels uncomfortable with their coach or team leader, they may not have another option to play, causing them to remain silent about their discomfort rather than give up the sport.

Some Deaf children attend residential schools. These schools are excellent at addressing the educational and social needs of Deaf children and provide positive Deaf role models, a sense of belonging, and connection to the Deaf community at large (Holcomb, 2013). Because most Deaf people are born to hearing parents, schools for the Deaf and Deaf clubs are essential to pass down the traditions and culture of the Deaf community (Smith & Hope, 2015). They also provide safe, supportive adults with whom a child can communicate if there are concerns about their home environment. However, children who attend residential schools are more likely to be sexually abused than children who attend non-residential schools (Sullivan et al., 1991; Sullivan & Knutson, 1998), and schools for the Deaf in particular have had higher rates of sexual abuse over the last forty years (Canaff, 2020), whether children live at home or on campus (Kvam, 2004). Residential schools can provide potential abusers with access to children. When a child is feeling uncomfortable or is victimized by a staff member or another student, they may not know who to turn to. They could have fears about staff members siding with other staff members or refusing to investigate allegations, both of which have been demonstrated as a reality for some

children (Seidule & Pollack, 2018; Shakeshaft, 2004; Shakeshaft & Cohan, 1994). They may also have concerns about having to leave the school, which is often one of the only Deaf schools in the state. These fears can contribute to a child’s unwillingness to disclose.

The Deaf child may not be accustomed to voicing when something makes them uncomfortable and so may not know that what they are experiencing is okay to reveal to others (A. Blades, personal communication, May 7, 2020). One protective factor for hearing children is that the adults caring for them may be trained in signs of abuse, but adults who work with Deaf children may not have that training. With Deaf children, the child’s behavior may not be different after experiencing abuse – a child who is passive or acting out frustration because of communication barriers may show similar behaviors if abused (A. Blades, personal communication, May 7, 2020). This makes it more difficult for trusted adults to know when abuse may be occurring.

Approximately 95% of Deaf children have no Deaf parent (Mitchell & Karchmer, 2004) and Deaf children with hearing parents have additional vulnerability factors. Often, Deaf children of hearing parents grow up with limited, awkward communication skills with their parents that are insufficient to convey their feelings and ideas (Holcomb, 2013). If parents do know ASL, they may not know it well, making it difficult for a child to communicate with their parents about their thoughts, feelings, and experiences – including those experiences of abuse (Ridgeway, 1993; Sullivan et al., 1987). When a child does report sexual abuse to a parent or caregiver, and they are not understood, the child can feel defeated and not know where to turn to for help (Sullivan et al., 1987). Also, parents may not be able to communicate with children effectively enough to explain appropriate versus inappropriate behaviors, and what is okay and not okay for an adult to do (Cassady et al., 2005).

Often, vocabulary for private parts is not taught at school, and if parents are also not teaching vocabulary for private parts due to a lack of

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knowledge of ASL or because they feel a child does not need to know those words, a child may have more difficulty explaining abuse to a trusted adult (Smith & Harrell, 2013). This lack of knowledge can also create difficulties in the interview process. Youth who are hearing may learn about topics related to sexuality from peers, TV, movies, school, and other sources, while Deaf individuals have limited access, creating a large gap in the information they receive about healthy relationships, sexual violence, victims' rights, and sexuality (Green et al., 2015). Deaf youth are more likely to acquire most of their sexual knowledge from peers, with 52.9% saying friends were their primary source of information, and only 5.4% indicating they learned most from their parents, as compared to 25.8% of hearing youth (Swartz, 1993). It is not uncommon for Deaf individuals, even adults, to not know the word for "rape" or "sexual assault" in ASL or English (Green et al., 2015).

According to the Annual Survey of Deaf and Hard of Hearing Youth published by Gallaudet University (2014), 72.7% of Deaf and Hard of Hearing youth do not have family members who regularly sign, and only 13.2% have ASL as a primary language in their home. If parents do not know ASL, a child may not learn ASL until they attend school. Even when parents begin to learn sign language upon discovering their child is deaf, they are often not immersed in the Deaf culture and language and generally have difficulty obtaining fluency (Swisher & Thompson, 1985). Due to early language deprivation, approximately 90% of Deaf children with hearing parents experience delays in language (Holcomb, 2013).

In contrast, Deaf families with Deaf children have an experience very similar to hearing children in hearing families. According to Holcomb (2013), Deaf children of Deaf parents are given the advantage of language access from birth, and do not experience the same language barriers that Deaf children in hearing families experience. Their parents often sign to them from birth, and these children have the benefit of parents who understand Deaf culture and who are not mourning the deafness of their child, but

who instead celebrate their child's abilities.

Deaf children with hearing parents (even when not exposed to an official signing language) will often use gestures to communicate, commonly called "home signs" (Mylander & Goldin-Meadow, 1991; Schick, 2006). If parents adopt these home signs and other gestures, they may be adequate for communicating day-to-day issues, but may not provide sufficient communication for a child to disclose abuse. Once a child begins to learn an official signing language at school, it can take the child time to become proficient enough to communicate abuse (A. Blades, personal communication, May 7, 2020).

When a perpetrator is someone in the Deaf community, it can be difficult for a child to report abuse, and for nonoffending parents to report the abuse to authorities. The collective nature of the Deaf community can be an excellent source of support for a child or family, but loyalty to the community can also create a barrier if the child feels that disclosure will put the community at risk. A child may feel their disclosure is not beneficial to their community if someone in the community will get in trouble, or if the perpetrator's reputation, or the reputation of the community will be affected (Smith & Hope, 2015). Children also may fear that if they report against someone in their community, people in the community will take sides and may not take their side. When the community is essential to their life and is their primary support system, fear of losing that support system is especially profound.

According to Ridgeway (1993), self-esteem issues can also lead to increased vulnerability to offenders. Deaf children often have feelings of diminished self-worth and feel "less than" compared to hearing people in their lives. Some children may feel that abuse is a normal function of being deaf. Ridgeway also lists other risk factors, including but not limited to lack of access to a Deaf peer group and the Deaf community at large, being socially isolated, and being discouraged from learning about Deaf culture and developing a Deaf identity. Deaf children of hearing parents are at a higher risk for physical abuse and neglect than hearing children (Knutson et al., 2004;

Sullivan & Knutson, 1998). Potential reasons for this could include a higher level of financial stress brought on by unanticipated expenses for specialized schooling and medical procedures, and children requiring more attention from parents, leaving parents with less time for self-care (Sebald, 2008). Also, some hearing parents of Deaf children can feel rejected or ignored by their child when their child doesn't interact with them in a way that the parent expects, which can increase a parent's frustration and leave the child more vulnerable to abuse.

Throughout the years, the Deaf community has experienced varying degrees of systemic oppression, such as isolation, exploitation, and marginalization. Their collective experiences with audism and discrimination, both historically and presently, have created a culture in which people with hearing privilege are mistrusted and sometimes feared (Smith & Hope, 2015). When a Deaf child comes into a Children's Advocacy Center (CAC), they are often surrounded by hearing people. When they participate in a forensic interview, they have additional barriers to disclosure in that they are being asked to trust adults outside of their community. Additionally, they may have heard stories of negative experiences or been subject to discrimination themselves, which could cause them to not only fear the interview process, but the interviewer and CAC staff as well.

Child protective services (CPS) and law enforcement are often perceived negatively by people in the Deaf community, stemming from the fact that most law enforcement officers and CPS workers are hearing. When they are not culturally competent, it can have serious negative effects on the families they encounter (R. Garcia, personal communication, April 13, 2020). Many families in the Deaf community do not want law enforcement to become involved in their lives because they believe the officer could not possibly understand their life. In addition, they may believe a hearing person should not be able to tell them what to do or weigh in on something that they don't understand (A. Lathrop, personal communication, March 20, 2020). Also, people not involved in the Deaf community are seen as

"outsiders" – and Deaf people often have extreme loyalty to those in their community (Holcomb, 2013).

As indicated previously, information-sharing is important in the Deaf community. As such, when someone has a negative experience with law enforcement or CPS, that negative experience is discussed throughout the community. According to A. Blades (personal communication, May 7, 2020), difficulties that Deaf people face include police being impatient with communication, refusing to utilize an interpreter, and expecting Deaf people to lip-read. Blades shares stories that have circulated of unfair arrests, and Deaf people have heard of events where Deaf people were killed because police thought they were resisting arrest when they were attempting to communicate. Blades further indicates that there is a sense of mistrust towards police in the Deaf community because Deaf individuals are unsure if they are safe, if the police will be patient with their attempts to communicate, or if they are being regarded as incapable. An interpreter can help alleviate some of the mistrust that a Deaf person may feel when dealing with police or CPS.

Parents and other family members in the Deaf community may not report incidents of child maltreatment because they are afraid the child will be removed from their care (Smith & Harrell, 2013) and removed from the Deaf culture (R. Garcia, personal communication, April 13, 2020). They may be viewed as uncooperative with the investigation or as refusing to access resources given by CPS because the resources and information provided are not accessible. In some cases, parents are referred to classes that do not utilize interpreters and are seen as uncooperative when they do not attend (R. Garcia, personal communication, April 13, 2020). Also, people in the Deaf community prefer to keep problems out of public view, as they do not want to present the community in a negative light.

Hearing families may access community resources and advocacy groups to help them through the reporting process when their child discloses abuse. Many people in the Deaf community do not know about safe, supportive resources in their community

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(R. Garcia, personal communication, April 13, 2020). Often, victim advocacy organizations and other community organizations do not have knowledge of Deaf culture, and in some cases, their services may not be accessible (Harrell, 2017; Smith & Hope, 2015). Some members of the Deaf community have discussed experiences in which they attempted to call a sexual assault or domestic violence hotline or advocacy center, and were not able to access help because the staff did not have practice working with videoconferencing or teletypewriters or had a limited understanding of how communicative devices work (Harrell, 2017). This creates frustration for the survivor and sends a clear message that those services are not available to them. Many Deaf organizations excel at supporting Deaf community members, but are untrained in victim services and interpersonal violence, or may be unequipped to support survivors in ways that are needed (Smith & Hope, 2015). Also, Deaf-serving organizations may also serve the perpetrator, which can make a victim and their family wary about reaching out for help (Harrell, 2017).

When disclosing abuse, a victim may also be concerned about a lack of confidentiality. The Deaf community is small and close-knit. Most Deaf individuals in a community know one another, and allegations of abuse may be quickly conveyed throughout the community (Smith & Hope, 2015). It is not uncommon for Deaf adults in a city or even a state to know one another (Cassady et al., 2005). It can be difficult for a child to know who to trust and whether their experiences will be shared with others.

Interpreters are often essential for communication, but the use of interpreters can also raise additional concerns. A victim may not realize they can request an interpreter to report abuse to law enforcement or may not know that they will have access to an interpreter if they need to attend court (Riechers, 2020). Interpreters need to be vetted appropriately to ensure the interpreter does not know the offender or their family well. Also, there have been instances in which an interpreter wants to be helpful and become more integrated in the Deaf community, so they set

poor boundaries, offer extra help to the family, or break confidentiality under the guise of helping (R. Garcia, personal communication, April 13, 2020). Once an interpreter breaches confidentiality, it affects that family's perception of interpretation services from that point forward.

Social Networking in the Deaf Community

For the Deaf community, texting and social media are seen as extremely positive additions to their lives (Gingiss, 2018). Social media is often closed-captioned and allows easier communication with friends and family – both Deaf and hearing. Social media allows Deaf youth to have friends who are hearing, and expands their world (A. Lathrop, personal communication, March 20, 2020). It can also play a part in reducing the social isolation that can come with deafness, break down stigmas, and bring a sense of pride and togetherness to members of the Deaf community who may otherwise feel disconnected (Parfitt, 2018). However, social media comes with risks for children and teens regardless of their hearing status, and being more involved with social media platforms puts children at risk for abuse and trafficking. It provides access to Deaf children that people outside of the Deaf community would not have had before social media became popular.

As previously mentioned, communication can be difficult for Deaf youth who have hearing parents. Parents may not have the communication skills necessary to effectively teach their children internet safety or have ongoing discussions with their children about what they are doing online. Because of these communication challenges, parents are often not able to guide their children in what is appropriate and inappropriate online behavior and what might be grooming behaviors of offenders.

Most mainstream schools do not have a formal internet safety curriculum, and place greater emphasis on cyberbullying, privacy, and online reputation than they do on sexual predators and sexting (Jones et al., 2013). Many Deaf youth think

that warning signs and coercive behaviors could be just a part of mainstream culture that they are unaware of because of their immersion in Deaf culture (R. Garcia, personal communication, April 13, 2020). It is rare for residential Deaf schools to have specific curricula around boundaries and Deaf violence (R. Garcia, personal communication, April 13, 2020). Internet and social media safety should be taught to deaf students by someone who is familiar with the Deaf community (or ideally within the Deaf community) and who can adequately explain what behaviors may be cause for concern.

In domestic minor sex trafficking, the use of technology by traffickers is increasing (ICMEC, 2018). Traffickers use technology in every stage of the process to recruit, groom, and advertise victims (Thorn, 2018). Social networking sites have been increasingly utilized by traffickers to recruit victims and groom victims (Choo, 2009). In addition, online advertising of victims is increasing, so trafficking of Deaf youth is easier. Instead of youth being forced to advertise on the street and having communication barriers with buyers, youth can now be trafficked through online methods. Children who are deaf and hard of hearing are more likely to be victims of child maltreatment (Schenkel et al, 2014), and past victimization increases their vulnerability to traffickers (Thorn, 2018).

Conclusion

The abuse and neglect of children in the Deaf community is a topic that requires significantly more attention and research. Professionals, especially those in the child maltreatment field, should receive education and training to help them become culturally competent to better interact with and serve children and families in the Deaf community.

Deaf children have a variety of risk factors that increase the chances that they may be victims of abuse. Disclosure of abuse can be a complicated and fraught process, especially for Deaf children. Deaf children may have different experiences from those of hearing children, and those experiences, along with aspects of their culture, can impact disclosure of abuse to authorities. They may encounter more barriers to disclosure than hearing children. These risk factors and barriers are important for professionals to consider, in both the forensic interview process and in supporting the family through a time of crisis. Positive experiences with professionals who understand Deaf culture can be instrumental in a child's disclosure process and ability to participate in any potential case moving forward. ■

About the Author



Deedee Pegler, BS, graduated from Washington State University with her Bachelor of Science in Psychology. She then was a victim advocate for four years, a lead victim advocate for four years, and a forensic interviewer for eight years. In all her roles, she has worked with a diverse population, including several Deaf families, and has helped to develop policies and procedures within a Children's Advocacy Center. She has also provided trainings for other professionals on a local, state, and national level regarding a variety of topics related to child abuse and forensic interviewing.

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