



Council on Crime and Justice

# Understanding Sexual Violence in the Deaf Community

## *A Preliminary* Report on the Deaf Community Perspective

Researching Sexual Violence Project (RSVP)

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## **Abstract**

This study is an exploratory investigation into sexual victimization perceptions, needs and experiences of persons who are Deaf in the Twin Cities, Minnesota. Currently there are about 22 million individuals living in the United States with hearing loss (Williams & Abeles, 2004). In the United States, 3 in every 1,000 births are of children with some degree of neonatal hearing loss, a third of which have profound hearing loss or deafness (Samson-Fang, Simons-McCandless & Shelton, 2000).

Some studies indicate the level of sexual victimization to be 50% of all Deaf individuals as compared to 25 % of hearing females and 10% of hearing males prior to adulthood (Sullivan, Vernon & Scanlon, 1987). However, research regarding the Deaf community's perceptions around sexual abuse is minimal. The Deaf community mirrors other minority communities in their experience of oppression, particularly as it relates to isolation, segregation from others and distrust of the mainstream society (Glickman, 1996). A primary focus of this study is to broaden our understanding of sexual violence in the context of cultural deafness. The findings suggest that reactions to sexual violence ranging from fear to shock to disappointment. Views on points of disclosure are mixed. There are fears of reporting sexual assault because of concerns for privacy. Finally, response to victims and survivors by the hearing community appears to be rather inconsistent. Suggestions for the future include education and training for both hearing service providers and Deaf citizens.

In the United States, 1 of every 1,000 births is of a child with profound hearing loss or Deafness (Samson-Fang, Simons-McCandless & Shelton, 2000). While approximately 22 million individuals in the United States of America have experienced some form of hearing loss it is estimated that only 200,000 to 500,000 individuals in the U.S. consider themselves to be culturally Deaf (Williams & Ables, 2004). Traditionally, research on Deaf individuals has incorporated a medical model, which has focused on deficits in function, on hearing loss, instead of recognizing the communities linguistic and cultural minority status (Glickman, 1996). One of the shortcomings of the medical model in the context of the Deaf community is its failure to recognize that while individuals with hearing loss and Deaf individuals often share similar characteristics; those with the onset of profound hearing loss or deafness at birth or at a young age often share a common distinct culture and language.

According to a study conducted in 2002 by Sandusky and Obinna, Deaf women do not necessarily see themselves as having a disability, but as possessing a culture and way of communicating that is denied by dominant (hearing) culture. This study also noted that while Deaf women may share a unique perspective, they do not necessarily share the same perceptions and opinions about what would be an appropriate response to domestic and sexual violence. Sandusky and Obinna also noted that there appears to be cultural distinctions between those who consider themselves “Big-D” Deaf (culturally Deaf), versus others who consider themselves “small-d” (non-culturally) deaf (2002).

The Deaf community, as a cultural and language group, experiences significant barriers in communication with the general hearing population and has limited access to media information that hearing people take for granted (Modry, 1994). Additionally, the Deaf community has been typified as a “small, closed system with a strong sense of conformity” (Modry, 1994) possessing unique values, stereotypes, and social norms that

differ from the mainstream hearing culture (Williams & Abeles, 2004). Research in the culturally Deaf community presents unique and distinct challenges from working with individuals who have experienced hearing loss.

Little research exists on the prevalence of sexual assault in the deaf community specifically. As Deaf individuals are considered to be members of a disability group, research has yielded that an estimated eighty-three percent of women with disabilities will be sexually assaulted in their lifetime (Stimpson & Best, 1991). Additionally, women with disabilities experience abuse for longer periods of time and by more perpetrators than non-disabled women. (Nosek, Howland, and Hughes, 2001). Among developmentally disabled women, for example, of those who report being victims of abuse, 49% experienced 10 or more incidents of abuse (Valenti-Heim, 1995).

One of the only studies to explore this topic suggests that 50% of all Deaf individuals experience childhood sexual abuse compared to 25 % of hearing females and 10% of hearing males (Sullivan, Vernon & Scanlon, 1987). From the few available studies that exist on Deafness and sexual assault, it appears that Deafness maybe be a vulnerable attribute in terms of sexual violence, as is gender and age.

While the prevalence of rape and sexual assault in the Deaf community is not clear, research is clear that rape and sexual abuse can and often does have a tremendous impact on victims and survivors, both psychologically and physically (Atkinson, Calhoun, Resick, & Ellis, 1982; Burgess & Holstrom, 1979; Ellis, 1983; Kilpatrick, Veronen, & Resick, 1979 & 1981). In examining the immediate consequences of rape, researchers conclude that responses during the first 3-4 months post-rape include intense feelings of anxiety and fear (Burgess & Holstrom 1974 & 1979; Kilpatrick et al., 1979); physical and psychiatric symptoms (Atkinson et al., 1982; Kilpatrick et al., 1979); and

difficulty with social adjustment (Atkinson et al., 1982; Burgess & Holstrom 1974 & 1979; Kilpatrick et al., 1979 & 1981).

Post-sexual assault, positive social support can help maintain and enhance self-esteem, according to a number of researchers (Cobb, 1976; Kutash, 1978; Silver & Wortman, 1980). Ullman (1996), studied whether the type of positive and negative social reactions by significant others had a significant effect on sexual assault victims' adjustment. He found that friends are the most common support source for sexual assault victims and that positive emotional support and neutral support from friends are associated with better recovery. Only a small group of sexual assault survivors utilize formal systemic support systems. Research indicates that approximately 5% of adult rape victims report recent rape attacks to the police and 5% seek rape crisis center services (Koss, Gidycz, & Wisniewski, 1987; Fisher, Cullen & Turner, 2000).

A study conducted by Sadusky and Obinna in 2002 on domestic violence included two focus groups with Deaf and hard of hearing women. Respondents reported that isolation and communication are significant barriers for Deaf individuals. Services in hearing agencies were generally unavailable to them. For instance, even service agencies with listed TTY lines failed to train staff in the use of the TTY if a Deaf individual would call. Deaf women then would be forced to use an interpreter; however reliance on interpreters meant giving up privacy and sharing intimate details of your life with a stranger. Deaf women also indicated they lacked confidence that interpreters would accurately represent their words and experiences. Deaf women also stated that they cannot rely on the deaf community to be supportive in assisting them with abuse issues (Sadusky & Obinna, 2002).

## **Methodology**

This needs assessment was an exploratory examination into the Deaf community's perceptions of sexual victimization. This exploratory study employed qualitative methods in order to contribute in the creation of a theoretical framework to better understand help seeking patterns and behavior with the deaf victims of sexual violence. The aim of this study is to answer the empirical questions: 1) what are the perceptions of the deaf community around the scope of the problem of sexual assault in their community; 2) who do individuals in the Deaf community tell about their experiences of sexual assault and why; and 3) what service gaps exist for the deaf community? The study focused on collecting primary data from individuals who are Deaf using qualitative methods.

A secondary aim of this study was to implement a Participatory Action Research (PAR) approach in researching a topic in the Deaf community and determine how effective the PAR approach was in this investigation. PAR is characterized by three components: 1) an iterative process for research that includes reflection and action; 2) involving community members and stakeholders in the research process; and 3) using research findings to promote positive community change (Hall, 1993; Rose, 2001). In conducting studies of adults with disabilities, Researchers have employed participatory qualitative methods or a combination of both qualitative and quantitative approaches (Krogh & Lindsay, 1999).

In the needs assessment portion of this study, structured interviews were conducted with 51 members of the Deaf community. The community member interviews were intended to capture the views of survivors and non-survivors alike, as informal support systems (such as friends and family) are the most common and often the most influential form of support for a survivor of sexual assault (Ulman, 1996). This study

surveyed the Deaf community as a whole in the hopes of yielding a more complete picture of Deaf cultural norms, expectations, and beliefs around sexual assault.

Participants were recruited using snowball-sampling techniques. This project employed a Deaf interview coordinator in charge of recruitment. This proved to be essential in establishing the study's credibility in the Deaf community. This study also employed the skills of a consultant who was a Child of a Deaf Adult (CODA) to educate the researchers around Deaf cultural competency and effective approaches to participant recruitment. Using Participatory Action Research (PAR) approaches, CCJ easily recruited participants in the Minneapolis study, and actually had to turn people away at the end of the interview period

Deaf community interviews incorporated videotaped scenarios as a tool to ascertain Deaf individuals' perceptions about sexual victimization. Each video scenario depicted a story about a Deaf individual who was first sexually assaulted and then, in the second part of the scenario, raped. A well-known member of the local deaf community told these stories in American Sign Language (ASL) on video. The sexual adult survivor in each scenario varied by age and gender, incorporating a variety of individuals in a variety of settings. Similarly, the perpetrator in the story also varied; in some scenarios the perpetrator was a family member, or boyfriend or stranger (See Appendix A). Trained interviewers showed various scenarios and asked follow-up questions about the situation shown on video. Questions included asking the interviewee their perception of what had happened in the story, what the victim should do, and when they felt the victim should incorporate formal or informal support systems. Finally, interviewers asked participants if they were survivors of sexual abuse and if they were willing to answer questions regarding their experiences.

Another PAR approach that this study utilized was to employ both Deaf individuals and certified American Sign Language (ASL) interpreters as interviewers who received training on the dynamics of sexual victimization. Allowing Deaf participants a choice was essential for some individuals who did not want an interviewer who was a member of the Deaf community, perceiving confidentiality to be compromised if they knew the interviewer personally. Conversely, for others having someone from their own culture made the interview setting more comfortable.

This study considered the safety concerns of participants who had experienced sexual assault. During the initial screening for participation, if an individual stated that they had physical safety concerns, the trained interviewer explored options with the participant and attempted to empower them to make their own choice regarding participation in the study.

In order to analyze the data from the community and key informant interviews, the study incorporated a team of researchers, Deaf community members who had assisted on the interviews and transcription of the interviews as well as practitioners who work with the Deaf community. These individuals helped in the lengthy process of transcribing the interviews from videotaped ASL to written text.

The community survey was semi-structured in that all interviews were categorized by the scenario and then themes. Cross-case analysis between different areas identified broader themes that spanned various subject areas. Data analysis for interviews consisted of the coding of themes in NVivo 2.0, a popular software program developed by Qualitative Solutions and Research International (QSR). The interviews were coded into themes and compared to the researchers' experience, advisory committee members' experience and lessons documented in previous research.

## **Findings**

A total of 51 participants were interviewed during the period of June 2004-October 2004. Of these 51 participants, twenty-three (45%) disclosed as being a survivor of sexual abuse, seventeen (33%) were men, four (8%) were African-American and one (2%) was Deaf/blind. Of the 23 survivors only 9 (39%) agreed to be interviewed about their experience.

This analysis is based on a stratified sample of 18 interviews from the 51 interviews conducted with the Deaf community participants, stratified by gender and survivorship status. The sub-sample consists 9 men and 9 women. Ten (55%) disclosed being survivors of sexual violence at some point in their lives. Of the 10 that disclosed their survivorship status, 9 agreed to the survivor's interview. Of the 9 survivors that agreed to be interviewed, 4 were men.

Several themes emerged from the interviews with both survivors and non-survivors and men and women. One thing that is notable about the responses from the participants is that whether participants were discussing the event in the scenario or sharing their own stories, the feelings of fear, anger, shock, disappointment, embarrassment and self-blame are prevalent. Sometimes family members are seen as sources of strength; sometimes participants thought that families would not understand. Police are almost always thought of as a place to call for help and yet, many discuss experiences in which contact with the police as frustrating. Few survivors called the police after their experience with sexual abuse. In the "date rape" scenario many made comments about why Yolanda invited Derek into her home after just 3 dates. However, no one blamed her for what happened.

In terms of thinking about the future and what can be done to improve the response to sexual victimization and support prevention, many noted that workshops are

key. Workshops held in the Deaf community to educate individuals about self-defense and self-protection are viewed as essential. At the same time, Deaf culture workshops with hearing service providers are viewed as equally as important to improve the experience of Deaf victims and survivors. Knowing how to communicate, how to find an interpreter and how to protect the rights of Deaf individuals are areas to be stressed.

### *Points of Disclosure*

Some of the scenarios focused on the abuse of young people. This is because there is some evidence to suggest that individuals who are Deaf experience childhood sexual abuse at rates that are greater than that of the hearing community. When we asked about who should be told about the abuse in the scenarios, some thought of family members as a source of support. One participant suggests,

“Well I think she should tell her parents first, because they are her number one advocates and if she told the principal the principal might not believe, or another teacher might not believe her, but if she talks to her parents first its going to be heard but then she can approach the principal with her parents, you know, I think its best to have the parents involved and then they can help Abby tell the principal.”

Others were more cautious, particularly if the parents are hearing. One participant states,

“It depends on her relationship with her mother, if she has a very good, close relationship with her mother, she will actually tell her. But if she doesn’t, it really depends. Like if her mother is deaf and she is deaf, then there would probably be a better chance that there would be some sharing going on, but if Abby is deaf and her mother is hearing, there might be that communication breakdown, you know, if it is the school for the deaf, and she stays at the dorm for a couple of weeks they are separated, they would not have that contact.”

In Scenario 3 participants found it difficult in some cases to identify whom the boy being molested by his uncle would or should tell, particularly when it came to family members.

One participant states,

“He’s just going to have to hold it inside. You know this is family. You know, how many families are going to believe him? You know if he tries to tell his mom, you know and that’s it, his mom’s going to believe him. You know maybe that’s the uncle is the [brother] of his mother. Or, or, you know maybe, you know maybe he’s the brother of his father so I don’t know. I think that’s a very sticky situation.”

### *Perceptions of the Police*

One area we wanted to know more about and actively probe was participants’ views on police involvement. In many cases we found that the participants thought of the police as a helpful resource across each scenario. Reasons cited for involving the police include holding the offender accountable, making the abuse stop and insuring others would not fall victim to the offending behavior.

However, when having had contact with the police, many have found it a frustrating experience. One participant states,

“Another incident with police, related to my work, happened on another occasion. I was on the way to switch with the 2nd shift, and as I was walking by, a car was backing towards me. The individual in this car has had conflict with me before. I didn’t hear a horn or anything, but they kept backing towards me. I pounded on the car to let him know to stop, because his car was forcing me onto the curb. I tried to get his attention because he’s hearing, but he kept moving which upset me. I hit his car, which left a dent. I wasn’t sure if I left a large dent in the car, so I kept walking towards my inspection room at my work and changed shoes. As I was doing so, the police came into the room. I told him I was deaf using gesture, but they wouldn’t listen to me and forced me outside to where the incident occurred. I tried to communicate with the police to no avail. They disrespected me and violated my rights. The police pointed to the side of the car where the dent was on the car. As it had black marks on it also, I knew I couldn’t have made these marks with just my hand. But the argument between us got worse, so I had no choice but to let it go. The cop didn’t allow me to tell my side of the story, so I ceased arguing. The other person involved filed a restraining order against me, which is acceptable for one year. But through the whole ordeal, my rights were violated. Today we have to make changes to improve communication between the deaf and hearing communities to allow for the proper amount of respect.”

Another participant tells this story,

“About 7 years ago a friend called me through the police. My friend lived in Richfield, MN--said that he went to get gas for his car and as he was leaving a car ran into him. The police pulled up and banged out his window and banged on his car, and he said I’m deaf and they thought he was drunk. But he was not; he just sounded funny and so the other guy that hit him was let go. They threw him in the squad car and he was in jail for 4 nights for no reason. He called me to get help, so I called a lawyer and we sued that police officer because he refused to write and to communicate. We went to court and they found out that the officer doesn’t like deaf people. He didn’t want to write any notes and that it was the boy that was 18 years old was drunk and hit the deaf guy and the officer lost his job and the other guy was arrested. And the deaf, my deaf friend, was in jail for 4 nights for no reason. And he felt that the officer should’ve talked to him, get his side of the story, but he yelled at him, took him out the squad car, and took him to jail. That was a really bad experience.”

Deaf participants commonly cite instances of miscommunication. Some deaf individuals are able to vocalize. Even under these circumstances, communication is stained. One participant states,

“Sometimes communicating with the police isn’t easy. The police may not have any experience communication with deaf people. He asked for my D.L. (drivers’ license). I have the ability to speak for myself. I had tried my best to communicate with him. He uses gestures sign for ‘slow down’. Fine. I gave him my D.L. and I was given a paper for me to show up for court.”

Similar communication problems are encountered in using TTY with 911. Though many deaf individuals appear to prefer using a relay service to communicate with the police, some discuss the challenges they encounter in using TTY directly with 911 dispatch centers. One participant states,

“Well, they need to improve their language because deaf people don’t have good English. For example, one deaf person called the police and the operator couldn’t understand them and they were confused and the deaf person said well if you don’t understand ASL, why are you working there. You know the deaf community isn’t the same as the hearing community, period. They have two different languages, period.”

## *Perceptions of Victims*

Scenario 2 is a “date rape” situation between a male and female adult, both from the same Deaf community. Participants struggled with what the victim should do in this scenario. Some thought that the victim used poor judgment in inviting the offender to her apartment. One participant states,

“It is unfortunate that Yolanda decided to let him into her apartment after only the 3rd date; it wasn’t a very wise choice, and there definitely wasn’t enough time to build up trust. It is best to go on group dates, so you can feel safe in the company of others. Now she is stuck in this situation, and she is uncertain as to what to do. She has the right to grab his testicles or inflict some kind of pain on him to get him to stop hurting her, etc. as a means of self-defense. She could try to run, and definitely report it to the police. In this situation, she may have some fear due to a lack of training in relationships or attendance in a workshop of some sort. She could be hopeless in her home.”

Others were reluctant to report due to concerns about privacy. One participant states:

“You know the deaf culture tend to be negative, causing rumors. We need to be more open among the deaf community no matter whose identity is. We need to let them know that there are some deaf people in this community are victim through crisis like that. It’s possible for that deaf person to take a bold step to come out and share his/her experience in order to heal from this share their story. No need to be ashamed of what has happened to him/her. This will help them see that there are other victims out searching for help and can help others too. This means we need to provide workshop with person who signs. And with same experience, share the resources so that others may know what can do to help them now. No more postponements, enough.”

## *Services*

Many believe that the key to improving the response to sexual violence in the Deaf community is to educate both the hearing community and the Deaf community about various topics. Primarily, the hearing community needs to be educated about Deaf culture and the Deaf community needs education about crime safety.

Having more culturally competent hearing services are seen as useful only as long as they aware of the basics. One participant states,

“Well, I guess number one, you have to have an interpreter and before they didn’t have any and now today, there’s supposed to have an interpreter because they can all be sued whether they’re staff or the police and they should all be able to sign so that the deaf community can understand them you know, they’re emotions and stuff and that’s the key for the deaf community.”

Some want Deaf specific programs. One participant states,

“I want the same kind of program the hearing community has for the Deaf community. That includes TTY, pager, staff who knows sign skills, they should have the same accessible program as the hearing community has. Back in the day I had nothing that would help me. We knew of no program that would help me deal with what I went through back then. My mother encouraged me to go get some counseling, which I did but it didn't help me get the help I needed. I shared my problems with the counselor but nothing helps at all.”

Participants also value the importance of staying safe and educating each other on safety skill, particularly at young ages. One participant suggests,

“It is probably a good idea to have workshops to teach students from twelve to eighteen years old. Training youth to protect themselves from rape or any kind of crisis is very important. As of yet, I haven’t heard of any kind of workshop like this for the deaf community. I feel this is important and much needed.”

Another suggests,

“It would be great if service providers could supply workshops that specialize in sexual assault, rape, getting arrested, speeding, and other issues in which the deaf community lacks know-how.”

## **Discussion**

A primary focus of this study is to broaden our understanding of sexual violence in the context of cultural deafness. At the risk of comparing hearing and Deaf experiences, many reactions, fears, and responses by services and the system sound similar to each other when reflecting on the hearing literature. However, there are

specific barriers faced by persons that are Deaf that are important not to overlook and declare as the same as found in other groups' experiences.

In terms of seeing family members as a key resource, views are often mixed because in many cases Deaf children are born to hearing parents and are a part of hearing families. Levels of engagement and connection among Deaf and hearing family members vary. This can be due to the Deaf youth's attendance at a residential Deaf School that removes the youth from the family setting. At the same time, hearing family members may not learn sign language or are not able to communicate fully and meaningfully with their Deaf child.

Though there appears to be a great deal of trust placed upon law enforcement to assist when sexual violence occurs, there are also contrary experiences held by many that illuminate barriers to communication and help-seeking. Specific to the Deaf community includes the ability for 911 dispatchers to use TTY machines, the mislabeling of Deaf persons as drunk or mentally ill, and the misreading of body language as aggressive when a Deaf person is moving in closer to lip-read.

Many communities struggle with the duality of providing support and fears of privacy. The Deaf community shares in the same struggle. The gossip mill is alive in the Deaf community and can influence whether a person tells anyone about their experience.

Finally, response to victims and survivors by the hearing community appears to be rather inconsistent. Many of these inconsistencies appear to stem from a lack of understanding of Deaf culture or knowing that there is a Deaf culture. For many hearing service providers it appears that they think that a person who is Deaf shares their same cultural knowledge, values and customs; and that the only difference is the sense of hearing. For example, this explains why hearing providers try to pass notes using English or use other forms of writing before arranging for an interpreter. Recognizing various

aspects of deafness can improve communication and understanding between the two groups.

It is recommended that both hearing and Deaf communities educate themselves about responding to deafness and protection one's self, respectively. With additional education and dialogue it is suggested the prevention of and response to sexual victimization will improve. Suggestions for the future include education and training for both hearing service providers and Deaf citizens.

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