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The Evolution of Coda Interpreters

By Athena Crosby-Martin

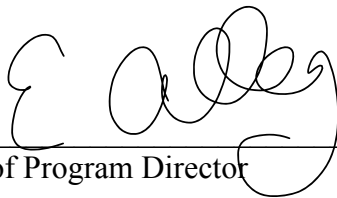
A Thesis Submitted in Partial Fulfillment Requirements for the
Degree of Master of Arts in Interpreting Studies and Communication Equity

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A handwritten signature in black ink, appearing to read "Erica Alley", written over a horizontal line.

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6/3/18

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Abstract

Hearing children born to deaf parents, known as Cudas are born into a world where they are bimodal bilingual, as well as bicultural. They must navigate the distinct differences between spoken and signed languages and hearing and Deaf communities, often acting as interpreters for situations well beyond their maturity level. Cudas simultaneously belong to both worlds, but to neither. Many Cudas go on to become professional interpreters, and their unique childhood experience and identities create a space of complexity within the interpreting community. Older Cudas grew up in a time before technological aids to the Deaf were available, or professional interpreters were available to the Deaf community. This qualitative study, which uses a phenomenological approach, explores two different generations of Coda childhood experiences and how they have shaped their identities and work as professional interpreters. Thematic analyses reveal that, in spite of generational differences, there are few cultural differences between the older and younger generation. Notably, they all share a feeling of isolation and, at times, hostility from non-Coda interpreters, while feeling preferred by Deaf clients. They also tend to feel a large sense of responsibility to their Deaf clients, rooted in the adult responsibilities placed upon them as children.

Definitions of Key Terminology

Bimodal (bilingualism)- the ability to produce and perceive two languages at the same time, due to separate perceptual and motor systems being used simultaneously, via both auditory and visual channels. (Bishop & Hicks, 2005).

Coda- a term that represents people who were raised by one or more deaf parent. “The Coda label establishes that there are cultural and linguistic differences between hearing adults with Deaf parents and hearing adults with hearing parents” (Bishop & Hicks, 2005 p. xvi).

CODA- the non-profit organization known as CODA International

Deaf-individuals who are deaf and identify with the Deaf culture and Deaf community. Used to describe the cultural practices of a group within a group that focuses on beliefs, practices and particularly the role of sign language in their everyday lives (Padden & Humphries, 2005)

deaf-referring only to the audiological and or medical condition of not having auditory function. “This refers only to the condition of deafness” (Padden & Humphries, 2005 p.1).

Hearing-referring to population that subscribes to cultural hearing norms

hearing-referring to audiological status only

Unimodal- “having only one input and output channel for language” (Bishop & Hicks, 2005 p.3).

Chapter One

Introduction

Hearing children born to Deaf parents are born into a world in which they are bimodal bilingual as well as being bicultural. A child with this experience is called a Child of a Deaf Adult (Coda). “The Coda label establishes that there are cultural and linguistic differences between hearing adults with Deaf parents and hearing adults with hearing parents” (Bishop & Hicks, 2008 p. xvi). The distinct differences between spoken and signed languages and Hearing and Deaf Culture create disparate worlds that these children must navigate. Sometimes they accomplish this easily, while at other times the navigation is more challenging. When Codas are growing up, their socialization is different than that of their hearing counterparts. Regardless of the age of the Coda, these children are often the family’s hearing representative, even in the most inappropriate of situations (Adams, 2008). They are audiologically hearing, but are raised culturally deaf, with their first language being that of a signed language. Codas often fall between the two cultures, not really belonging to either. “We are neither deaf nor hearing. We are both deaf and hearing” (Preston, 1994 p.236). This situation often creates a space of complexity within the interpreting community, for the Coda interpreter, the Deaf consumers, as well as Hearing colleague interpreters as well due to a lack of understanding as to what the experience of straddling both of these worlds’ means.

Interpreting within the family unit was different prior to the advent of technological innovations, and therefore, Deaf parents were often depended upon their hearing children for interpreting phone calls, television programs and assorted appointments. With the advent of the Americans for Disabilities Act of 1990, closed captioning, video relay service, texting and the

availability of professional interpreters available to interpret appointments, it is logical to assume that the demand on children as interpreters would decrease over time, and yet that is not what is reported by the participants in this research.

The participants in this research all reported not making a decision to become an interpreter. All responded saying they were following a calling with regards to the profession. “Codas live in an in-between space within the sign language interpreting profession. We are not hearing. We are not deaf. As such, we are often not seen nor valued. We are; however, both vilified and worshiped in good measure” (Williamson, 2012 p.1). This position of being both vilified and worshiped creates this complex space for Coda interpreters, as well as having an impact professional interpreters and how this manifests itself in the work place. This experience must come from the childhood experiences of Coda children as they are growing up. The questions for this research project are 1) is the impact of the childhood experience different for separate generations? And 2) If so, how is it different?

Adams (2008) notes that finding information on Coda's is challenging, which is why more studies about the Coda are necessary. A majority of the information so far has been focused on linguistics, particularly in the matters of language acquisition (Adams, 2008) or the pathways to becoming a professional interpreter (Williamson, 2015). However, information regarding the belief and value systems of professional interpreters based on their experience growing up within the deaf community and how this differs between generations is sparse at best. The scarcity of research regarding the Coda experience is further compounded by the focus on defining whether Coda identity is between or on the edge of one or both cultures- Deaf and/or Hearing- instead of adopting a more holistic approach. As such, it seems that what little research there is, tries to identify and often fails to explore other aspects of the Coda experience (Adams, 2008).

This is an exciting time for the Coda community, as more research is being accomplished within the community, even research about Codas by Codas. Different aspects of the Coda experience are gaining ground and voices. For example, the experience of child language brokering and the struggle with identity discovery are some of the venues of recent research (Adams, (2008), Angelini, (2010 & 2017), Bauer, (2017), Emmorey, Borinstein, Thompson, Gollan, (2008), Hoffmeister, (2008), Mathers & Andrews, (2008), Napier, (2017), Emmorey, Borinstein, Thompson, & Gollan (2008) and Singleton, & Tittle, (2000)). Looking at belief systems and values based on generational demographics is going to add a new lens to the ever-increasing body of information regarding the Coda. This project will be examining the evolving experiences of the Codas, who become professional interpreters and how those experiences, values, identity and belief systems impact their decision-making processes at work.

Chapter Two

Literature Review

Codas navigate through two distinctively different worlds: the spoken and auditory world of the Hearing world and signed and visual world of the Deaf world. Sometimes the navigation between them is easy and sometimes it is more challenging. The identity of these children, as they grow up, becomes more complex because they often do not fit into the Deaf world or the Hearing world. As noted by Preston (1994), Codas often say, “We are neither deaf nor hearing. We are both deaf and hearing” (p.236). This experience often creates a space of complexity within the lives of Codas, as well as within the interpreting community, where they work with Deaf consumers and hearing colleague interpreters as well.

The dichotomy between the Hearing world and spoken language and the Deaf world and manual language means that a person is a part of both respective worlds and yet not being a full member of either (Pizer, Walters, Meier, 2012). Having auditory function and being able to speak, but processing the world visually and living from a place of Deaf culture, it is having a foot in both worlds-but not a firm footing in either. Most people who grow up taking for granted what is taught to them through their language and culture. Hearing people for example, can in fact talk through a closed door or talk to someone in another room and understand one another. Deaf people must have eye contact in order to have conversations with one another. Codas may have the auditory functioning of a hearing person, but have the visual needs of a deaf person (Bishop & Hicks, 2005). They may hear someone talking in another room and without being able to see the person, may not clearly understand the words. For a Coda, fitting neither into the Hearing world nor the Deaf world can be a struggle that may not be resolved, even well into adulthood. The impact of this overlapping reality for Codas that begin working as American Sign Language interpreters and are caught between the two places creates a complex world.

The connection and allegiance to the Deaf community that a Coda has creates a space of alliance to a group that we are members of, but not one-but are also members of the community who have historically been the oppressors of the minority Deaf community. Codas have often witnessed the oppression of Deaf people, which can create some disdain toward the Hearing community, despite being audilogically, considered a part of this group (Preston, 1994). This internal angst can create separateness in our professional sphere, sometimes from our own internal processes and sometimes from our colleagues, who may have their own perceptions of Codas, which makes our place in our community challenging. The in between space, truly not belonging to one world or the other, but being a part of both, is typically not understood in either

the Hearing or Deaf communities. Angelelli, (2017) reports that very few studies have been conducted on the life experiences of Coda interpreters. In this study, I looked at the values and belief systems of Codas and how they have evolved over time. I also explored Codas' perceptions of how their value and belief systems manifest themselves during their work as professional interpreters, especially as they affect their decision-making. Finally, I investigated the impact of the Codas' value and belief systems on their interpersonal interactions and whether or not there were generational differences.

Coda

The majority of children born to deaf parents can hear (Napier, 2017). These children often called Codas (Children of Deaf Adults) are presented with some unique challenges that hearing children who have hearing parents do not encounter. Deaf parents raising their hearing children are not unlike parents who are from a culture different than that of their child's (Singleton & Tittle, 2000), such as in a case of a couple adopting a child from a foreign country and culture, whose language and cultural norms may be completely different. The cultural and linguistic differences between the Hearing world and the Deaf world shape these Coda children into a minority culture within the Deaf community. Codas are typically bimodal, bicultural, and bilingual and as such, they use both visual-gestural and auditory-vocal channels to acquire language (Mather, & Andrews, 2008).

The term Coda was developed in 1983 by Millie Brother in 1983 as a result of research that was she was doing as a graduate student at Gallaudet University (Children of Deaf Adults, n.d.). The CODA organization was started to connect Codas with others who share the similar experience of being both a part of the Deaf world and a part of the Hearing world but belonging to neither. But being different is the common denominator and is the thing that bonds Codas as a

distinct group. The organization started small as a grassroots organization, and since 1983 has become an international organization with annual domestic and international conferences.

Adams (2008) found that there are four common identity themes that adult Codas may identify with: a) Misfit, b) Foreigner, c) Middleman and d) Glass Ceiling. According to Adams (2008), the Misfit feels as though they don't fit in either in the Hearing world or the Deaf world. It means not completely identifying with the mainstream majority of the Hearing community, despite automatic membership due to audiological function: yet at the same time, not completely belonging within the Deaf community (due to audiological function), despite having language and cultural functions, but having the mainstream majorities audiological function. Codas in essence are straddling both the Deaf and Hearing communities with language as the crux of the intersection (Williamson, 2016).

In Adams (2008) study, one theme was the Foreigner feeling that Codas experience, which is similar to that of a foreigner in a strange land. Participants reported feeling as though they were different from those around them, and living in someone else's country (Adams, 2008). Codas share some aspects of their parents' Deaf culture, and some aspects of the majority hearing culture, but cannot own either culture completely.

As the Middleman, Codas are often the intermediary between the Deaf world of their parents and the Hearing world they live in (Adams, 2008). Codas share their parents' culture and language; however, unlike their parents, they are able to use visual-gestural language as well as auditory-vocal languages. They are living with a foot in both worlds, but really not being from one or the other, but rather they are from a combination of the two. They are not deaf, as their parents are; however, they share language and culture with their parents and, as a result, Codas share traits and values with this minority group. Although Codas do not share their parents

hearing loss, they do share their linguistic and cultural heritage. (Mather & Andrews, 2008).

Codas are often encoded with the visual language and the cultural norms that are part and parcel of the Deaf community. Thus, when they enter elementary school and become immersed in the Hearing culture, possibly for the first time, they must learn a new culture and way of operating in the world. Their parents and other family members are often not able to be a part of the new cultural and linguistic education, as it is a foreign and unknown realm.

Coda children feel as though there are expectations that are placed upon them, even from a young age. They may work as a gatekeeper between the Hearing and Deaf worlds, becoming interpreters, service workers, or teachers. The Glass Ceiling, as described by Adams (2008) prevents them from moving outside of those expectations.

Hearing children from Deaf families, represent a relatively invisible linguistic and cultural minority. Many hearing people are unaware of the fact that American Sign Language (ASL) is a separate language, with its own grammatical structure unlike English (Bishop & Hicks, 2005) as well as cultural norms and values. Wilhelm (2008) shares some insight from a Coda,

I am neither Deaf nor Hearing. I have a bit of both, both cultures combined in me, and that means of course also that I cannot live my life neither fully among the Deaf nor among the hearing. I somehow jump between both cultures (p.174).

A Coda embodies two worlds, yet not belonging to either community fully is a common theme amongst the Coda community. The common themes of identity struggles, not fitting in and culturally conflicted are many of the sentiments that Codas who have participated studies regarding Codas (Preston, 1994, Adams, 2008, Williamson, 2015, Williamson, 2016, Angelelli, 2017).

The internal angst that has been documented in various research (Preston, 1994, Adams, 2008, Napier, 2017, Bishop & Hicks, 2008, Williamson, 2015, Williamson, 2016, Angelelli, 2017) shows the challenges of being part of two worlds, but not belonging to either and how it can and does create a feeling of separateness in the professional sphere. This can sometimes be generated from their own internal processes and sometimes from colleagues, who may have their own perceptions of Cudas, all making the place for a Coda within the community challenging. As members of a minority group, Cudas often have a more difficult time finding their own identity as children and adults of the monocultural hearing society (Wilhelm, 2008).

Bilingual, Bicultural, Bimodal

The phenomenon of bilingual children interpreting for older monolingual parents is not a new concept. The research about the children and their experience with child language brokering, as well as the effects of being bilingual and bimodal is an opportunity for further study. As early as the era of the Spanish conquest of Mexico in the 16th century, young interpreters played a crucial role of facilitating language between the newly arrived Spanish conquistadors and the natives that inhabited Mesoamerica (Angelelli, 2017). As immigration has increased world wide, more and more children are being called on to act as interpreters for their parents and the new environment their families have come to inhabit.

Hearing children who are born to deaf parents are unique however. They are not only bilingual and bicultural; there is a third component to the Coda experience as well. These children also are bimodal. Unimodal bilinguals have a single output channel, which is the vocal tract. In contrast, bimodal bilinguals have two output channels, which is the vocal tract as well as sign language (Bishop & Hicks, 2008). Bimodal bilingualism is distinct from unimodal

bilingualism because the phonologies of the two languages are expressed by different articulators thus allowing simultaneous articulations (Emmorey, Borinstein, Thompson, & Gollan, 2008).

Four important characteristics of any culture include: language, rules for appropriate behavior, values and a sense of traditions or history (Bienvenu, 1987). The characteristics in a visual-gestural language are different from those in an auditory-spoken language. For example, eye contact, spatial use, and the need for face-to-face communication are more highly valued in a visual-gestural environment than in an auditory-spoken language environment. They are norms that become part of a Coda's internal schema. Codas have a cultural identity defined in part by their bimodal bilingualism as well as by shared childhood experiences in Deaf families (Emmorey, Borinstein, Thompson & Gollan, 2008). As a result, Codas are members of a minority group, within another minority group (that of being Deaf) often have a more difficult time finding their own identity than children of the hearing society (Wilhelm, 2008).

Child Language Brokering

Children who engage in brokering communication and advocacy between their parents and/or families and the outside community are referred to as Child Language Brokers (CLB) (Angelelli, 2010). The research on bilingual language brokering is scarce and is a relatively new field of study (Angelelli, 2017). Hearing children, who are born into family where the parents are Deaf may learn American Sign Language as their first language and through the course of their childhood also learn how to process audio input and the spoken language of the region, in the case of this study, English.

Using the framework of existing CLB research on immigrant families whose children were language brokers, Napier (2017) conducted a study focusing on language brokering performed by deaf parented children, out of 210 respondents, 99% reported brokering for their

parents, either in the past or currently. As a course of daily life, language brokering can happen in a variety of day-to-day settings including such things as interactions at stores, phone calls, school interactions, banks, and other places of business. This is often a reoccurring part of daily life for hearing children of Deaf parents. Napier (2017) states that while these bilinguals can make a decision to not to take on this role, they also means that they know it means their family members will be deprived of access to information. Inevitably, because they identify so closely with their parents, they feel it is almost impossible for them to stand by and do nothing.

Due to the interdependency of the child language brokers and the parents, the parent-child roles and dynamics are also dramatically different from those of the monolingual families. Parent-child roles can be skewed due to a shift in power dynamics and because of the responsibility involved with language brokering (Angelelli, 2017). This interpreting task may lead to a different balance of communicative power and responsibility between a parent and child than in monolingual communities (Pizer, Walters, & Meier, 2012). Young language brokers assume complex and demanding responsibilities that affect the whole family (Angelelli, 2017). There is often little support or guidance for these children as they navigate their way through the entangled, challenging and often times confusing arena of negotiating two separate languages and cultures. While Coda have been born and acculturated into Deaf culture, they are may not be exposed to or learn about Hearing culture until they are school aged and enter the school systems. Upon entry into Hearing society, they often discover for the first time that their status and the status of their parents is different (Mather & Andrews, 2008)

These dynamics often have life long effects on not only the family dynamics and roles within the families, but the identity of the Coda. Napier (2017) states that child language

brokering is a shaping aspect of the Coda experience that can affect them for the rest of their lives.

Third Culture

The Deaf community has its own cultural values and norms, as does the Hearing community. Codas who are straddling both the Deaf world and the Hearing world are often caught in an in between place, a third culture. It is not deaf, not hearing, but a place where they overlap. Third culture members in the Deaf Communities, function as the mediators between Hearing and Deaf (Bienvenu, 1987). Codas are often left struggling to find a way to assimilate and often find that very task is challenging. Preston (1994) found in his research of Codas that

Despite appearing to matriculate into the Hearing world, a number of informants admitted they were not always comfortable with hearing people, nor did they necessarily identify themselves as a hearing person. A number of informants described how the Hearing and Deaf parts were all “mixed up” and many felt it was important to separate out what was Hearing and what was Deaf. (p.197)

Learning how to negotiate that Third Space or that Third Culture is a process that most Codas spend a lifetime navigating. Hearing children who are being raised by Deaf parents have the unique experience of being insiders, yet outsiders (Singleton & Tittle, 2000).

Values and Belief Systems

Codas come up in the world differently than hearing children with hearing parents. Due to the language and cultural differences, as well as the differences and complexities in family dynamics, certain values and belief systems are intrinsically generated that many Codas seem to share.

Cokely (2005) refers to Coda interpreters as “evolved” interpreters rather than “schooled” interpreters. In the same vein, Napier (2017) states that these evolved interpreters can bring something unique to the work of professional interpreting based on their life experiences and understanding of Deaf intercultural frameworks. The values and belief systems that are created for the Coda who chooses to become an interpreter has a direct impact on not only their professional work, but also on their interpersonal responses as well as their professional decision making processes. Many Codas possess an unequivocal understanding of privilege and power that is not easily recognized by non-Coda interpreters (Williamson, 2012). This research will investigate some of the belief systems of the Coda interpreter through the interviews with the participants and how some of those internal belief systems manifest themselves while on the job as a professional interpreter.

Chapter Three

Methodology

The method that was used for this study was a phenomenological approach. Phenomenology seeks to understand the lived experience of individuals or groups based on their perceptions and observations (Hale & Napier, 2013). The phenomenological approach is to illuminate the specific, to identify phenomena through how they are perceived by the actors in a situation. In the human sphere this normally translates into gathering deep information and perceptions through inductive, qualitative methods such as interviews, discussions and participant observation, and representing it from the perspective of the research participants.

I contacted the chair of the Deaf Parented Interpreter (DPI) member section of the Registry of the Interpreters of the Deaf (RID) via email requesting permission to post a call for participants on the DPI closed Facebook page via an email outlining the proposal and request for participants. The DPI has been particularly interested in research about Coda interpreters and agreed to post the request for participants. The chair also sent an email with a request-for-participants flier attached to the email (See Appendix A). Those interested in participating were asked to respond via email.

Since the goal of this research project was to investigate the generational differences among the experiences of Coda interpreters and to discover how their experiences shaped their values and belief systems, it was desirable to recruit from the following age groups: 20-34, 35-49, and 50 and above. While the Facebook group did include several members between the ages of 35 and 49, there was no response from this age group; the reason for their lack of interest remains unknown.

The 11 respondents were scheduled for interview times and sent consent forms (See Appendix C), based on a first come, first serve basis until a minimum of 6 and a maximum of 10 participants, with 2-5 men and 2-5 women in each category. The maximum number of 10 was set due to one researcher and time constraints for the final data to be processed. Nine total participants, 6 women and 3 men, responded to the request and interview times were confirmed.

Hale and Napier (2013) describe different knowledge types that can be used for developing interview questions. Factual questions, belief based questions, feeling based motives, perceptions of actions/behaviors and conscious reasons and recounting of present and past behaviors (Hale & Napier, 2013) were included in the interview process. The list of questions for the interview included both closed and open-ended questions.. Having the ability to engage

in the relatively informal discussions that arise out of a general interest in the topic allows the participants to share more broad experiences during the process and can result in the emergence of important information (Hale & Napier, 2013).

The interviewees were directed to a video conferencing website, and the interview was filmed and saved to a SD video card. Each participant self selected a pseudonym for reference purposes and to protect their anonymity. Demographic information was obtained from each participant, that included age, sex, and where they grew up. I gathered information from each participant about whether one or both parents were deaf, whether the participant grew up in a signing environment, whether the participant attended an interpreting program, how many years the participant had been professionally interpreting, and whether or not they were certified by the Registry of Interpreters for the Deaf. If they were certified, I asked how long they had been certified by RID and in what type of settings they typically interpreted. Additionally, I asked whether or not technological advancements used by the Deaf community, such as captioning equipment, videophones, and pagers, were present in the participant's childhood home and whether or not these innovations changed the experience of interpreting within their family. Each interview took one hour to one and half hours.

Two follow-up questions that emerged during later interviews were: "When did you first hear the term Coda?" and "What do you perceive the differences between the older generation and younger generation of Codas?" In order to have consistent data, the two questions were retroactively posed to the earlier responders and their responses were either filmed or emailed.

Upon completion of the interviews, I transcribed the videos. Themes, shared responses, and quotes were then manually coded via pen and paper. Experiences and themes, as well as whether or not they changed over time as the Deaf community evolved were examined for

shared or divergent patterns within a set of participants who share a similar generation, and how those experiences may or may not have changed as the deaf community has evolved.

In any interview process, an inherent challenge is to reduce interviewer bias during the data collection. Since this researcher is a Coda who likely had similar experiences as the participants, careful attention was given to avoiding bias, beginning with the development of the IRB approved questions and extending through the analysis process. During interviews in particular, and in accordance with suggestions from Hale & Napier (2013), my own experiences, opinions and beliefs were not shared with the participants.

The rationale for a qualitative analysis of the data rather than a quantitative or experimental method is self-evident. Statistically analyzed questionnaires do not allow for the flow of life experience and reduce complex ideas, thoughts and feelings to data points that leave out the nuanced complexities of life experience. This can only be gained through dialogue. An experimental study design was not appropriate.

Methodological Strength

There is an inherent trust factor among members of the Coda community. Preston (1994) states that insiders are often able to get more information from respondents than outside interviewers can. Many Codas have had similar experiences, which create an environment of understanding and a feeling of a brotherhood/sisterhood. As a Coda conducting the interviews, I was able to create an environment of comfort in answering deeply personal and intimate questions, generating answers that were likely to be honest and insightful.

Methodological limitations

The major limitation to this study is sample size. Ten participants were initially interviewed, but only nine were included. While this seems like an excellent response rate, the

DPI member closed Facebook page has 916 members; hence the response rate was only .01% of the group. The result is a small group of self-selected participants with no room for the randomization of participants. Had the study design allowed for more participants, and the responses been greater, richer results may have been yielded.

It may be that responses were limited because the request for participants was made through a Facebook post and an email. The nature of Facebook posts causes older news to drop to the bottom of, or off of, individual news feed. It is telling that all respondents replied within two weeks, despite the advertisement remaining active for months. Only members actively checking their Facebook would have encountered the advertisement. Likewise, an email was sent out to the members from the DPI chair. If one did not check and or open their email, the request could have been easily overlooked.

Another limitation is the age bracket of the respondents. Only 24-35 year old Codas and over 50-year old Codas responded. There were no responses from 36-49 year olds Codas, despite this being an active demographic in the DPI group.

Chapter Four

Results and Discussion Findings

Participants

A total of 10 responses were received from people wanting to participate in this research project. The table below shows 9 of the respondents. One additional respondent was 50 years old. This respondent was not included in this research due to the close age groupings of the 24-32 year old group and the 60-72 year old group. The younger group spans an 8-year timeline and the older group spans a 12-year difference. Including one person who was 50 would create a

22-year age difference for the older group. It was decided to group the participants in the Millennial generation and the Baby Boomer generation.

Age	Pseudonym	One or Both Parents Deaf	Gender
32	Serendipity	Both	Female
60	Peony	Both	Female
70	Francine	Both	Female
32	Hank	Both	Male
72	Veronica	Both	Female
68	Penelope	Both	Female
30	Lindsay	Both	Female
24	Tyrone	Both	Male
26	John	Both	Male

Participants

Table 1

Serendipity is a 32-year-old female whose parents are both deaf. She was raised in a rural area where interpreters were not readily available, in a fully signing home. She attended a two-year interpreter-training program and has been working as a professional interpreter for 15 years. She became certified by the Registry for Interpreters for the Deaf (RID) in 2009.

Serendipity was her parent's interpreter for complicated medical interpreting as young as 4 years old, as well as for legal interactions and encounters with law enforcement officials. While there was closed captioning in their home in later years, she spent much time interpreting television programs. The family did not have a videophone and as a child, Serendipity was responsible for interpreting phone calls for her parents. Despite the passing of the Americans for Disabilities Act in 1990, interpreters were not readily available in the area she lived in was an inherent part of her childhood.

Peony is a 60-year-old female whose parents are both are deaf. She was raised in a rural area where professional interpreters were scarce. She was raised in a fully signing home and did not attend an interpreter-training program. Peony has been working as a professional interpreter for 43 years and has been RID certified for 38 years. She did not have any technological advances for the deaf in her home growing up, (i.e.: closed captioning devices, videophones, and telecommunication devices for the deaf (TTY) or pagers). As a young child, she was interpreting both in medical and legal environments for her parents. Peony spent many years attending the local Deaf Club with her parents.

Francine is a 70-year-old female whose parents are both deaf. She was raised in a rural area where professional interpreters were scarce. She was raised in a fully signing home and attended a 10-week interpreter-training program in 1972. Francine has been working as a professional interpreter for 46 years and has been RID certified for 45 years. She did not have

any technological advances for the deaf in her home growing up. As a child, she spent much time in the local Deaf Club with her parents and the other members of the Deaf Community. Francine interpreted a variety of day-to-day interactions for her parents as well as church services.

Hank is a 32-year-old male who was raised in an urban area. Both his parents are deaf and he grew up in a fully signing home. His parents were well educated, having college degrees and jobs within the government. Hank has been working as a professional interpreter for 15 years and has been RID certified for 4 years. He did not attend an interpreter-training program. Hank grew up with technology such as closed captioning, videophones, and pagers. He did not interpret for his parents much as he was growing up, with the exception of random encounters to ask a price of something at a store, acting as a broker between his parents and service personnel. His parents intentionally made a decision not to use their children for interpreting purposes.

Veronica is a 72-year-old female who was raised in a rural area. Both of her parents are deaf and she was raised in a fully signing house. She did not attend an interpreter-training program, but has been professionally interpreting for 56 years and has been RID certified for 38 years. She did not have any technological advances for the deaf in her home growing up. Much of Veronica's childhood was spent in a local Deaf Club with her parents. She interpreted for her parents in a variety of settings including legal, medical, law enforcement, courtrooms (at the age of 8), landlord/tenant and church.

Penelope is a 68-year-old woman who was raised in rural area. Both her parents were deaf. She was raised in a fully signing environment and was one of 5 children. All the children took turns interpreting for her parents. She did not attend an interpreter-training program, but has been working professionally for 42 years and has been RID certified for 41 years. Penelope

did not grow up with any of the technology for the Deaf. Penelope interpreted for her parents when it was her turn, interpreting phone calls, church and other personal interactions and medical appointments. She also spent much time in the local Deaf Club.

Lindsay is a 30-year-old woman who grew up in a rural area and was her parent's primary interpreter. Both her parents were deaf and she was raised in a fully signing environment. Lindsay did not attend an interpreter-training program, but did graduate from Gallaudet University with a BA degree in Linguistics and American Sign Language (ASL). She has been working professionally for 12 years and was RID certified in 2011. As a child, she interpreted a variety of settings for her parents, including legal and medical, and for interactions with law enforcement. She was involved with the local Deaf Club during her childhood years.

Tyrone is a 24-year-old male who grew up in a rural area. Both of his parents are deaf. Additionally, one of his parents is an immigrant, and does not use ASL as a primary language. After attending an interpreter-training program, he worked as a professional interpreter for 4 years and is waiting on RID certification exam results. Tyrone grew up with technology that was available to the deaf community, such as closed captioning, videophones and pagers. As a child, he interpreted a variety of settings for his parents, including legal, medical and interactions with law enforcement. He spent time involved with the local Deaf Club during his childhood years.

John is a 26-year-old male who grew up in a town near a deaf school. He is the only hearing child in an entirely otherwise deaf family. He has been working as a professional interpreter for 7 years and had been RID certified for 4 years. John interpreted a variety of settings for his family such as medical appointments and other situations as they would arise.

Due to the proximity of his family home to the School for the Deaf the interactions at the Deaf Club and other Deaf environments were an intrinsic part of his childhood.

Child Language Brokering

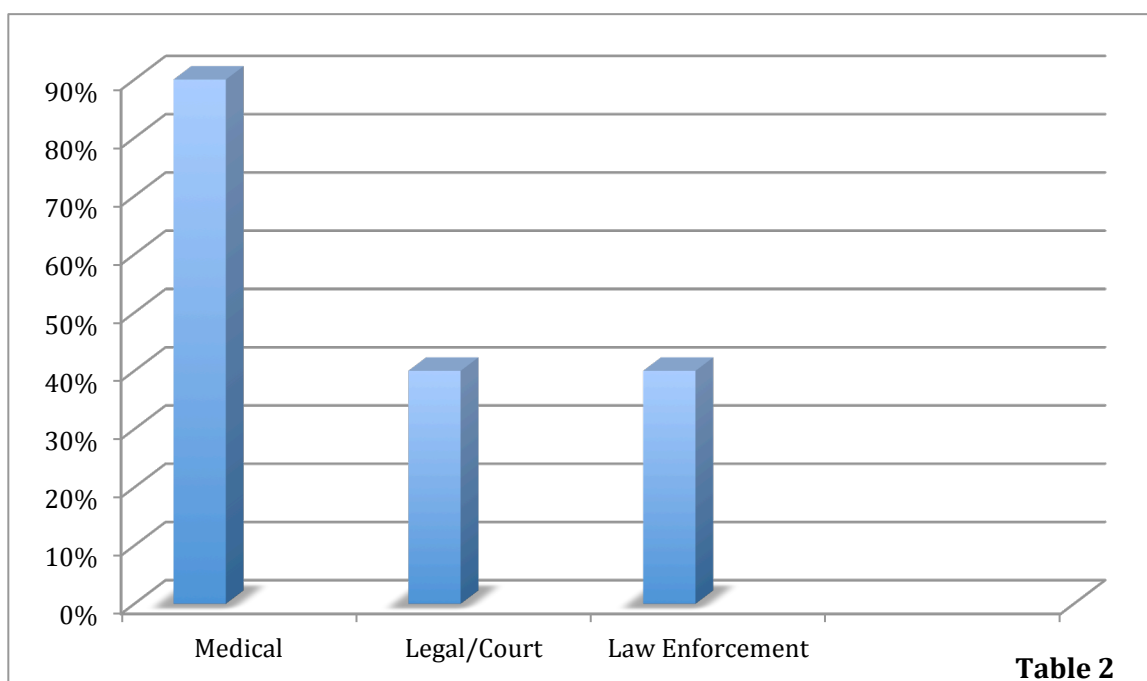
All of the respondents had various experiences brokering language between the Hearing world and their Deaf parents. Some respondents functioned as language brokers due to the isolated nature of the area in which they lived in. Serendipity describes her experience as a child of four interpreting her father's organ transplant surgery,

I was pulled out of school to interpret the appointments with medical professionals and the visits to the hospital. I did not understand what I was interpreting. What are anti-rejection medications? I ended up interpreting 'you must take this medicine. You have no choice.' I couldn't explain why he needed to take it or the consequences of not taking it. I wasn't able to play with friends or go to birthday parties. The interpreting was like a full time job.

She was her father's sole interpreter from ages 4-9 during the time of his organ transplant. For her, she became numb to the medical appointments and it became the "norm" for her existence. Additionally, there were family issues such as angry parents and issues of domestic violence. The angry and often violent interactions between hearing family members and the Deaf family members often put a young Serendipity in the middle of some very adult interactions.

Peony had a Deaf parent with medical issues and also interpreted medical appointments. "I never understood any of it". Medical interpreting at a young age proved to be stressful for a young Peony. "It was horrible. I was always thinking 'Is my mom going to die?'" Interpreting in the legal settings was also a part of Peony's experience. As a young child going to the attorney's office with her father, she did not understand the concepts, and did her best

fingerspelling as much as she could. There were concepts she did not understand and was not able to interpret. Church interpreting resulted in much praise from her parents and other churchgoers. This was seemingly a positive experience that Peony had growing up, although when asked about it, she stated, “Positive is really pushing it. I wouldn’t put the label of delight on anything”. It was simply what was expected of her as a child, to provide access to communication for her parents and to act as a conduit to the Hearing world. As shown below on Table 2, almost all of the respondents report interpreting in medical settings under the age of 10, while 40-50% of respondents report interpreting in legal and law enforcement settings under the age of 10.



Child Language Brokering Environments Done by Codas under 10 years of Age

In contrast to Serendipity’s and Peony’s experiences, Francine loved her ability to interpret for her parents. Francine did not report any medical or legal interpreting for either of

her parents. There were other older Codas or persons able to interpret these types of appointments. She did interpret phone calls for her parents, as well as church services.

Interpreting for church services was a way for her and her parents to connect with one another.

Francine recalls:

“I remember I was older maybe 16 and we were in church and I’m interpreting for my parents and other deaf people. I’m mesmerized by this pastor-his message was about love. I was familiar with the scripture and I felt I was clear in conveying the message. At one point my parents are looking at me and I see they are connected to the message in a poignant way. The look in my mother’s eyes..... In that moment we transcended our parent/child relationship. I felt like I saw them at their core. I felt like we saw each other for who we are. Nothing was said after- except they looked at me and hugged each other.

Francine loved the opportunities for interpreting that were presented to her as she was growing up. For the most part, she is the exception to the other participants in the research who felt as though they did not have any choice and were put in positions they did not want, nor felt equipped to be in.

Hank’s experience also differs from most of the other respondents as his parents were “independent” and had professional interpreters for most of their communication needs. The family is from a metropolitan area and his parents were well educated and worked for the federal government. His parents were familiar with the availability of local professional interpreters. With the exception of when Hank was out with his parents, he was rarely called upon for interpreting.

Veronica reports not having a childhood. Most of her time was interacting with Deaf adults and interpreting for them. “If there was a bar to be met, I somehow did it.” When she was eight, she interpreted in a courtroom for one of her parents. The judge thought it was cute. “My father won all the time. My being cute would get my father out of whatever consequence he was facing. It was normal for me.” This was something that was not only expected of her, but was considered normal. “If you have the mindset of you not having any other options, then you don't have any other options. Its what my life looked like.” In her situation, there were no other options on the table; it was what was expected of her from the early years of her childhood.

Penelope reports not knowing how to negotiate the Hearing world around her. She needed time to process the information she was interpreting for her parents and was always feeling rushed by the hearing participants in interactions with her parents. She didn't think she would end up interpreting outside of her family unit, as she described herself as shy and does not enjoying being in front of people. She was cognizant of her parents not having access to things around them. She reports that her parents preferred their children as interpreters to other people and used them versus using professional interpreters. “We weren’t allowed to say no to our parents. I didn’t have a choice.”

Lindsay lived in a rural town without professional interpreters. She spent her childhood interpreting medical appointments for her family members, including life threatening emergency room visits for her brother. Her family interactions also included many run-ins with the police and other law enforcement officials. Not knowing how to interpret the interactions and between her parents and the police was frightening for her. She reported not wanting her parents to go to jail, but not understanding what was happening or what it meant. Having to interpret the “bad stuff,” such as calls from bill collectors, interactions with police and issues that would come up

as a result of her parents relationship that were “not great and complicated” was challenging. “It makes you grow up fast. I didn't want to know any of that stuff. I had to worry about them and their issues all the time. I didn't get to be a kid and be carefree.”

Tyrone, also from a rural area, did not have the benefit of having professional interpreters around. To further complicate issues, one of his parents is an immigrant from another country and ASL is not the first or second language of this parent. Tyrone's father had frequent police encounters and Tyrone was interpreting those interactions as early as age seven. It was frightening for a young child to be interpreting these interactions, “What if he went to jail if I didn't interpret it correctly? I was young and didn't know the system well and didn't have enough life experience at age seven to know what I was doing.” He also interpreted all of his parent's medical appointments while he was growing up. There was the language barrier to consider with one of his parents and the inherent trust from both parents that did not warrant bringing in an outside interpreter, even if one was available. “I even interpreted my own emergency room appointment when I broke my elbow when I was eight.”

John also had a special circumstance in his experience. He is the only hearing child in an entirely Deaf family. Both parents and all of his siblings are Deaf. Having to interpret emergency medical situations for his family members at seven years old, not knowing what the concepts, vocabulary or body parts meant was particularly challenging. “During that emergency room appointment I had to ask my sister if she had her period. I didn't understand what that meant, but my sister and my father got really embarrassed. I didn't understand why.” Even though there were plenty of professional interpreters around, due to the proximity of the local School for the Deaf, it could take upwards of an hour to two hours for an interpreter to arrive, especially if it was an emergency. John was used to fill in the gaps. His parents were “passive

and wouldn't fight for interpreters" and he was a stopgap to fill the voids where there was a time urgency or for an interpreter who didn't show up for an appointment.

The resounding message again and again from these respondents is that they did not get to have the childhood that their hearing peers did. A childhood consumed with either providing interpreting services or worrying about their parent's situations is something that all of them shared. This interpreting burden may lead to a different balance of communicative power and responsibility between a parent and child than in monolingual communities (Pizer, Walters, Meier, 2012). This can lead to a role reversal between the parent and the child that can continue throughout the child's entire life.

Coda children often assume responsibilities that are above and beyond not only their comprehension, but also beyond their world knowledge. Young language brokers assume complex and demanding responsibilities that affect the whole family (Angelelli, 2017). Interpreting interactions or interrogations with the police at a young age is a confusing and worrisome event for children who don't understand the system or potential consequences. The burden of whether or not their parent will end up in jail due to the interpretation they produced as children forces them into a role that they are not equipped to be in. Being an interpreter at the age of eight, in a courtroom, for a parent who has been arrested and charged with something not only is a conflict of interest, but detrimental to the courtroom process. Children do not have the life experience or legal vernacular to fill this professional role, and yet, the balance of their parent's life rests in their hands. The responsibility given to children in situations like these far exceeds their years.

Identity and the Coda

Almost ninety percent of children born to Deaf parents are hearing (Preston, 1994). Deaf culture is distinct and separate from Hearing cultures, and Codas land somewhere in between both places, which Hoffmeister (2008) refers to as a borderland.

According to Merriam Webster dictionary a borderland is defined as “a vague intermediate state or region” (Merriam Webster Dictionary, n.d). The situation of being neither Deaf nor Hearing often creates a space of complexity within the interpreting community, for the Coda interpreter, for the Deaf consumers, and for hearing colleague interpreters. Hearing children who are born to deaf parents are born into a world in which they are bimodal bilinguals. These children also become bicultural. The distinct differences between spoken and signed languages and hearing and deaf culture are worlds these children are moving within. Sometimes they are able to navigate easily and other times the navigation is more challenging. They may find they do not fit into the Deaf world, or the Hearing world. This is what Hoffmeister (2008) describes as a borderland and Davies (2005) calls having a passport for a country that one does not actually belong to.

The older Codas that were a part of this research study grew up identifying not as “Coda,” but as *Mother-Father Deaf*, ASL signs meaning their mother and father were Deaf and they were immersed in the Deaf World and came in contact with the Hearing world. John, who was one of the younger participants, grew up near a School for the Deaf did hear the term Coda as a child:

“It was normal to me growing up. The first day of school and my three siblings got dropped off at the KS school for the deaf and cried when I got dropped off at the hearing school. Started to put the dots together-not everyone had a

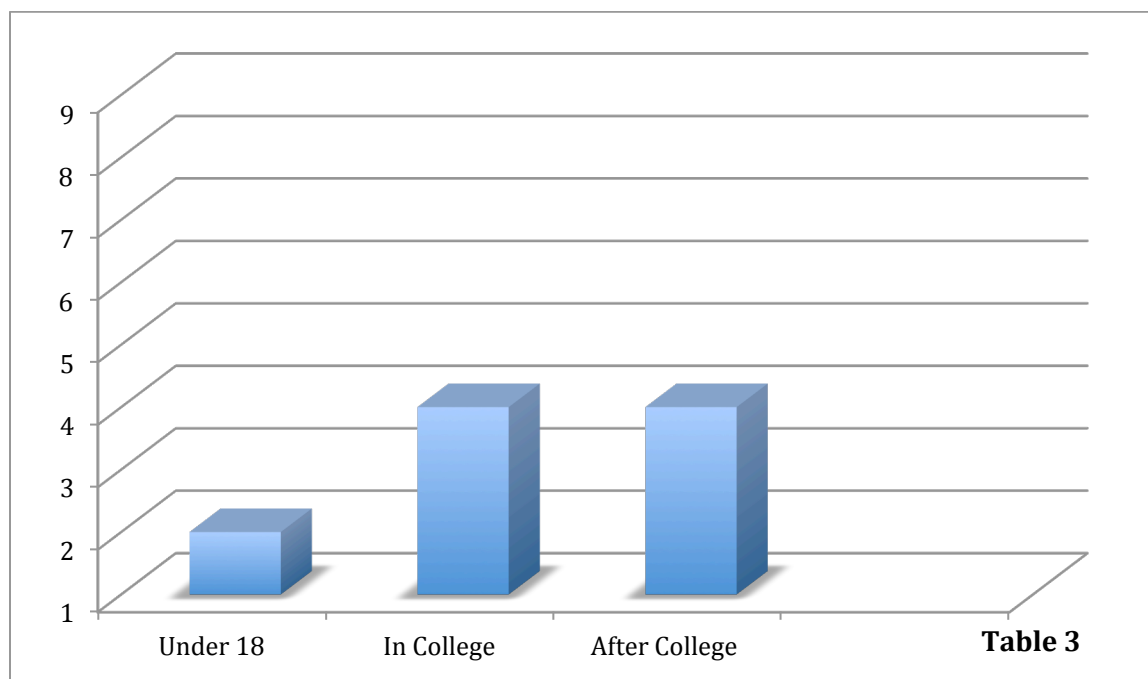
Deaf family. Heard the term at the Deaf Club. Deaf adults would call me a Coda and let me know there were other Codas to play with.”

Hank, who also grew up spending time in his local Deaf Club, also heard the term during his childhood. “The word Coda was less of who I was....I didn't know what it was. It was more of an explanation of who I am and how I have Deaf parents.”

The other respondents from the Millennial generations grew up in rural communities and did not hear the term until they were in college. Serendipity reports hearing the term once. “A Deaf person said it and I didn't understand what it meant, I also didn't ask what it meant. The word Coda became more of my experience during my first Deaf Culture class in college.” The older generation respondents who also spent much time in the Deaf Clubs knew other Codas but the term used was *Mother-Father Deaf*. Peony, another respondent from the Baby Boomer generation of Codas reports not hearing the term until she went to a local meeting of CODA. “I didn't like the child part, as I was an adult. I didn't really ‘take to’ the label until a few years ago.”

Coming to terms with the identity of the Coda was struggle for most of the respondents. As non-Coda interpreters do not have the same frame of reference as well as being outsiders of the Deaf Community, They don't want to share the information about being a Coda with hearing interpreters that they work with, and yet are not able to avoid the recognition by their Deaf clients. Hearing interpreters as well as some Deaf clients have made assumptions about the Coda interpreters in this study, including assuming the Coda interpreters didn't do any work to become professional interpreters, or assuming they should take responsibility for all the ASL to English interpreting because they understand the Deaf person better, or assuming the

Coda interpreters are unprofessional and uneducated. These stereotypes are detrimental to Coda in ways both personal and professional.



At What Age the Term Coda was Heard by Respondents

Codas are a contradiction in the Deaf community as they are a complication to the notion that Deaf is equivalent to audiological status. Coda's are part of the Deaf community they're just not audiotogically deaf. They have the knowledge and the social ways of their parents and they are native sign language users but they also have audiotogical function (Davie, 2005). The Coda is in fact culturally Deaf and has the audiotogical functioning of the hearing community.

Veronica states:

I have had one particular deaf person full on attack me in social media. They refuse to use the Coda label. At first they called me a hearing person, and I said 'I'm sorry I'm not a hearing person'. They look at this (box around ear). So I responded by saying I'm not

a hearing person. I was born this way- I didn't chose it. I was born into a Deaf family and have functioned as a Deaf person all my life. I'm a heritage signer, or Coda or whatever you want to call it.

There is often a misunderstanding between the confidence of using your first language and the perceived arrogance from non-Coda interpreter colleagues. Hearing interpreters who have learned ASL as a second language and are often not fluent, can misconstrue a native language user's confidence as something else entirely. Tyrone shares a story about working with other professional interpreters who are not Codas:

“There is a misunderstanding between confidence and arrogance. Confidence is misunderstood as arrogance. This causes me to be more reserved and stressed out. I want to work with the other interpreters but this misunderstanding/assumption impacts my work as far as their attitude toward me.”

Due to the small numbers of Coda interpreters, it is more likely than not that a Coda interpreter will be working with a non-Coda interpreter in teamed situations. The misunderstandings about Coda interpreters and their internal workings often create issues within the work environment. Penelope shared a similar story with regards to working with professional interpreters who are not Codas:

Other interpreters are intimidated by me. Hearing interpreters misunderstand my confidence and my skills as intimidating. I want the deaf person to get the message in its entirety and am willing to go to any lengths to make that happen and you view it as intimidating. The Deaf Community notices our skills right away. Deaf people feel comfortable. I feel more comfortable with Deaf people than I do Hearing people. Our

father told us not to marry a Hearing person. They are too different. The Deaf Community is where I feel most comfortable.

The internal angst of being a part of both worlds, but not of either, created separateness in the professional sphere of Cudas, sometimes from their own internal processes, which has been derived from a lifetime of experience witnessing how their parents are treated by others and sometimes from their colleagues, who may have their own perceptions of Cudas. This experience makes their place in their community challenging. Not truly belonging to one community or the other, but living in the borderlands, is typically not understood in either the hearing or deaf communities. Serendipity shared “trying to figure out what my philosophy of a professional interpreters is and what my role and space is, has shifted over the years. I now fly my ‘Coda Freak Flag’ and I’m proud of it now, whereas before I wasn’t”. Lindsay recalls her experience in her dealings with hearing interpreters who find out she is a Coda:

I have had hearing interpreters say ‘Oh you’re not that kind of Coda’ which means arrogant and not professional. I’ve worked with other interpreters who say they hate Cudas. It is what it is. I get micro aggressions a lot. If I’m doing a high-level voicing job for a conference, it’s assumed that it’s easy for me because you’re a Coda. It’s like I didn’t work hard for this or I’m not deserving of this level of expertise because I’m a Coda. Which we know isn’t true. I think it makes some people nervous. They feel like I will hold it over them- I’ll always be better than you.

The reluctance to share the Coda status with hearing interpreters is a common theme. John states:

Saying I'm a Coda is not something I say right out the gate when working with a hearing interpreter, due to judgment and assumptions about who I am. But Deaf people I work with know that I didn't learn the language in an interpreter-training program."

The struggle to negotiate identity, when internally there are two communities involved—one Deaf and one Hearing, is a constant challenge of the Coda. It's like having a passport saying that you belong to that country, but that passport is not recognized (Davie, 2005). Negotiating cultural norms of the hearing community, while not having much internally in common with the community is often a challenge for Codas. Not only are the experiences and acculturation different, but also the point of references and understandings about oppression, audism and discrimination that most Codas have witness creates an even larger chasm of understanding between the Coda and non-Coda interpreters. They have the audiological function of their hearing counterparts so they are not entitled to full membership of the Deaf community. The struggle for the Coda identity comes from all sides.

Stigma Management

Goffman (1963) describes stigma as an "attribute that is deeply discrediting and can sometimes be called a failing" (p.3). Deaf individuals have long been stigmatized and the ideas and thoughts about those who are deaf as being less than those of their hearing counterparts. Lane (1992) describes the stigma of deafness as the lack of something, not the presence of anything. Coda children grow up in a world where their parents are viewed as broken, defective or otherwise stigmatized. Deaf people do not see themselves as the hearing world does and Coda children can grow up being affected by this stigmatization while seeing a different side of their parents. The barrage of discrimination and oppression takes its toll throughout their childhoods. Lindsay recalls "I didn't know that my parents were deaf until I was six years old. It hit me all of

the sudden that my parents are not like other people.” These experiences are part and parcel to the Coda experience and it affects their interpreting experiences and other interactions with Deaf people. Veronica states “I’m sad if I am interpreting for a deaf person who has no idea that they have rights and power and that’s difficult.” Tyrone explains,

I have a sense of understanding. There are so many things. We are on the same page. I understand what they are talking about. I am a person of color so I understand the oppression part. I don’t know if that is from being a Coda or being a person of color. I understand what it feels like to be less than. I see my parents being viewed as less than the less than people. If anyone gets it, I get it. I may not have had the same experiences as them, but I get it.

While Codas have not necessarily experienced the same kind of oppression and discrimination as their parents have, they have often been in the middle of interpreting situations where their parents experienced it. Those feelings and seeing the impacts of those events is often internalized into their internal schema. This can come forward in their dealings with Deaf clients. Serendipity recalls:

I incorporated some of hearing societies views-not so much pathological, but maybe Deaf were lower on the totem pole. Hearing people were better, smarter and more superior. I did treat my parents less than. I know looking back now, I was very paternalistic. Sometimes I would tell my parents what to do. As I went to college, and started learning about Deaf Culture, I started to realize I had incorporated audism perspectives. That was really powerful for me. I had seen myself superior, not only to my parents, but also to all Deaf people. How dare I! It was a humbling experience.

The concept of seeing Deaf people as less than those who are hearing is not just relegated to the mainstream without hearing majority lacking meaningful experience with Deaf people. Hoffmeister (2008) asserts, “many Coda continue to believe their parents are less capable than other people” (p.199). Lindsay shares how her experience growing up a Coda impacts her work with the Deaf community,

I’ve seen my parents fight for things and been told over and over again “No”. I try hard to not to do for people, but I see someone who is vulnerable and I will try to help by providing resources. That is hard or me to turn off.

Time and experience navigating the field of interpreting often finds the Coda interpreter coming into their own place of comfortably with how they negotiate their interactions with the Deaf community and their Deaf clients. Hank states:

There is so much we don't know about ourselves. When you get into interpreting, you are learning about a whole bunch of boundaries. Some interpreters who have never crossed the threshold of that boundary, it may be uncomfortable and they have to try different things and find their way. The power you can wield for someone else can be huge. Allow that person to have that right, it’s liberating for all those involved.

Deaf people are often taught to give deference to hearing people and that behavior can be repeated with their Coda children as well (Hoffmeister, 2008). For the respondents in this body of research, the internalization of the oppression, discrimination and stigmatization their parents experienced has had a direct impact on how they worked with Deaf clients in their capacities as a professional interpreter.

The feeling of connectedness with the Deaf Community that has been created and wanting to create a level playing field for the Deaf clients is a common theme that is shared with all of the respondents. Francine recalled,

One of the ways I related to my parents is that I felt we were in solidarity. We were walking the same path. Even though I wasn't deaf, I was impacted. I had teachers and guidance counselors who told me I was socially maladjusted because I had deaf parents.

Most respondents report similar experiences of that feeling of solidarity and refer to the Deaf Community as “my people.” John mentions, “I am a member of the community. I was raised bilingual. It's a community that I'm proud to be a member of.”

While Codas are members of the Deaf Community, their membership has its limitations. Hoffmeister (2008) notes that

There are no stories told by Deaf that include Codas. Does that mean we are members of the community and just ignored? Codas are not mentioned in any of the texts that talk about Deaf, deafness, Deaf Community, Deaf Culture, etc. In other words, we are invisible to those who study culture, yet we are a significant part of the population. There has never been any place for a Coda to go in order to understand these situations. We have done all of this growing up, essentially on our own (p.212).

The fabric of the Coda life is the language and the culture of the Deaf community, but conflict with others in the interpreting profession creates tension and angst for the Coda interpreter. Validation of the Coda experience is the first step in creating a space of value and understanding.

Chapter Five

Summary

“The National Consortium of Interpreter Education Centers (NCIEC) conducted a needs assessment survey of practitioners of interpreting during the fall of 2014 that asked respondents to identify if they were deaf-parented. Of the 1,878 total respondents, 208 (11%) identified as having at least one deaf parent” (Williamson, 2014 p.6). Coda interpreters are a minority within a minority. From a hearing perspective, Deaf Cultural values and norms are not usually understood (Preston, 1994).

According to Bishop and Hicks (2008), “Codas are often more culturally Deaf than deaf children born to hearing parents” (p.xx). Hearing children who are born to Deaf parents do not choose to become bilingual and are more often than not, placed in positions of brokering language between their parents and the hearing world around them. Most of the respondents did not have a choice in the matter and were unable to deny their parents access to the world around them.

There are cultural norms that are intrinsically a part of the Coda experience that vary from that those of the hearing community. The length and importance of eye contact is tantamount to a visual language. Due to the fact that the Hearing Community uses auditory functioning to communicate, eye contact is not as important in their discourse and eye contact can even be viewed as a challenge or a show of intensity. Facial grammar is present in ASL that is not present in the English language, which often means that unless a Coda is looking at someone while talking, much of what is needed for complete understanding of the interaction is missing. Differences in discourse styles between the Deaf Community, which typically is detail

laden and the Hearing Community, which is drastically less detail laden, can make clear understanding of communication a challenge.

An additional challenge can occur if Cudas not only assumes the brokering of language between the parents and the hearing community, but also feels responsible for situations, such as medical or legal situations that their parents become involved in. As a result of the challenge, adult Coda interpreters may have a heightened sense of responsibility to the Deaf clients they serve. Participants in this study reported that as children, they were often not prepared to do the kinds of interpreting they were required to do. In part, their current sense of heightened responsibility developed as a result of their childhood experience. Many of the respondents echoed the sentiment, “What would I do if this were my parent?” during the course of their daily work with Deaf clients. These patterns of behavior and being have followed them into adulthood and into their careers as interpreters.

Official recognition of sign language being rudimentary or for the feeble-minded can be dated back to the Milan Conference, in Milan, Italy in 1880 (Lane, 1992). The world viewed one who is deaf as less intelligent than those who are hearing. “Oral speech is the sole power that can rekindle the light of God breathed into man. Sign on the other hand are not sufficient to express the fullness of thought” (Lane, 1992 p.114). Deaf people were not encouraged to sign and they were viewed as inferior to those of the Hearing world. For many, being Deaf meant less intelligent than the mainstream majority of the Hearing world. The shame or internal devaluation of Deaf people was often seen as well as exhibited to their children.

Prior to establishment of both RID and the ADA, the only people interpreting for Deaf people were either teachers of the deaf or Cudas (Ball, 2013). The Baby Boomer generation grew up in a time prior to the establishment of RID and the Americans with Disabilities Act of

1990. Both these events were important in the lives of Deaf people as well as their children. RID establishing interpreters as professionals versus the homegrown, grass roots interpreters of the community, dramatically changed the interpreter realm. Interpreter training programs were being established and those who had no previous experience with Deaf people or the Deaf Community were now seeking to become trained as an interpreter. The ADA set forth federal guidelines for providing interpreters to those in the Deaf Community when they had appointments or work experiences that needed interpreting. The Baby Boomer generation was expected to interpret for their parents as a part of their childhood due to interpreting not being established as a profession, nor having training programs to teach up and coming interpreters the trade.

With the recognition of ASL being a formally recognized language through the research of William Stokoe and colleagues at Gallaudet University (Lane, 1992), the Millennial's parents had a different sense of outward pride with regards to their language than that of their Baby Boomer counterparts. The Millennial generation came into this world when the profession of interpreting has already been established by RID, interpreter-training programs have been set up around the country and the accessibility is easier with the ADA being established. The Millennials in this research body, with the exception of Hank, were all from rural areas and did not have access to professional interpreters due to the rural location of the area they were from. In Tyrone's case, the rural area in which he lived, coupled with one parent being an immigrant, created a situation where outside interpreters were not acceptable options for his parent.

Hank is the only participant in this research who had government employed parents with post secondary educations. They lived in a metropolitan area and were well educated about their rights regarding interpreters and chose to use professional interpreters for their interpreting

needs. Despite Hank having a different childhood experience than the other respondents, his experience of finding his own identity and way of being in the world was just as challenging as for most of the Coda's interviewed. Bishop & Hicks (2008) state:

From a Deaf perspective, these hearing children are essentially “Deaf” because they understand and assimilate Deaf Cultural norms. From a linguistic perspective, research on American Codas may suggest many Codas find it impossible to separate their Deaf identity from ASL and their Hearing identity from English (p.xxii).

The respondents of this research have had a varied journey to bring them to their current place in the world. The Baby Boomers displayed a more rooted Deaf identity than those of the Millennial generation. Of the Baby Boomers, Francine is the only respondent who had any formal interpreter training, a ten-week program. While formal interpreter training programs were starting to be established in the 1960's (Ball, 2013), all of the Baby Boomer generation, except Francine, who had taken a 10-week training program, had all been raised and taught to interpret by the community they served.

The Millennial generation had the benefit of the availability of interpreter training programs, however, only three of the Millennial generation were graduates of a formal interpreter-training program. The other participants from the Millennial generation were all taught to be interpreters by their own Deaf communities.

The Millennial generation reports less challenges with the ins and outs of negotiating two separate cultures, especially those who enrolled in an interpreter training programs and learned about Deaf Culture and Hearing Culture. Participants from the Baby Boomer generation report having more of a challenge. Veronica reports, “I’m not a hearing person. I was born into the

Deaf world-I didn't choose it. I was born into a deaf family and have had Deaf all my life.”

Lindsay states some of the differences between the two generations:

The Millennial’s had fewer burdens or responsibilities and they have fewer connections to the Deaf Community. Older Codas had to rely on each other because there wasn't any formal training programs-they are very close.

Veronica notes some further differences:

There was a phase of time that parents weren’t teaching their kids to sign. Depending on “hearing knows” That is less now. Codas of my era who were signing and didn't run away-the ones who stayed-the door in and out of the community were swinging like a saloon. There is a more defined line for the younger community. The younger aren’t as enmeshed and witnessing the things we witnessed. If two groups have a common enemy-then that binds them. That was us. I hated hearing people. There was thing that bound us, its not there anymore. WE were the seedlings in the greenhouse. WE were there from the beginning-we were RID before RID.

John shares some of his thoughts about the differences between the generations:

I guess we take it more for granted. We grew up near a Deaf School I wasn't isolated, I get why the Coda camps are a good idea for those who are more isolated. Some Codas are embarrassed to have deaf parents. There are differences in the generations. I know that older Codas are stronger allies-more vocal and support of the Deaf Community; the type of audism and oppression they experienced growing up was more severe. So if they have opportunity to shift that at work they will maybe get more defensive and become more of an ally role. Younger Codas parent’s maybe didn't experience as much audism but also because their parents were more independent with technology. Older Coda’s

parent's depended on their children more for access. They will be more likely to lend a helping hand. We came from a generation where we could tell our parents "Do self, you can."

The oppression and audism that was experienced by the Baby Boomer generation of Deaf people directly impacted the older generation of Codas in a different way than it did on the younger generation. The result of witnessing the oppression of their parents left indelible marks on the lives of participants from the Baby Boomer generation in a different way than it did on the younger Millennials. Francine, a participant from the Baby Boomer generation notices,

The community doesn't exist like it did when we (older generation) came in. The connection with the community would be hard for the younger interpreters to have. The Deaf clubs, centering around captioned films and the connections aren't present like they used to be. Deaf People have become more integrated into society, they have more options with interpreters, and technology has changed things. The identity of Deaf people today is different from the Deaf identity of older Deaf people. There used to be a time when we walked in solidarity fighting for linguistic access. When ADA got passed, that was a game changer-now its about quality versus availability. It's about the amount of access rather than having access at all. So the issues are different. People are approaching interpreting not from a "I'm with you, this isn't right, we have to forge on toward equality. How many of us fought long and hard to get access for Deaf people. We fought with Deaf people. Now its there and available and many people approach interpreting like it's a job, a career-I can earn money doing this. Instead of looking at the good of the whole. The deaf community doesn't function from that place any more (the good of the whole). Deaf people are not functioning as gatekeepers as they did at one

time. Deaf people aren't doing the recruiting for interpreting anymore. We don't have a common goal that we are fighting for because that has been achieved. People get together today because they have common interests, not because they have a common identity. It's the downside of progress. You lose some of the collectivism.

The preceding gives us a window into some of the beliefs and values that Coda interpreters develop throughout their childhoods and what is carried with them into their work as professional interpreters. Larger sampling groups, as well as more of variety of different socio-economic background could yield more promising results. Being able to have the two groups of Codas, one group being from the Millennial generation and one being from the Baby Boomer generation has given insight into how similar both groups are, despite the differences in their experiences and upbringing. Perhaps having more respondents, a sampling that could encompass the Baby Boomer generation, Generation X, Generation Y, and the Millennial's could provide more insight into different experiences based on general generational differences.

Hearing interpreters may learn about Deaf Culture in their interpreter training programs and have an understanding of the differences between Deaf Culture and Hearing Culture; however, this does not mean that a Coda's experience is understood by colleagues. While the participants of this research are more aligned with the Deaf Community than that of the Hearing Community, Deaf people also do not understand the experience of the Coda as well. Workshops in professional settings, such as Street Leverage, local chapters of RID or the RID conference sharing the experience of the Coda interpreter and some of the impacts experienced while working could have potential for breaking down the barriers between the two groups.

Conclusion

When Codas are growing up, their socialization is different than that of their hearing counterpart. The respondents in this body of research do report that they were shaped by their experiences and also report feeling different than that of the mainstream hearing world. Interpreting within the family unit was different prior to the advent of technological innovations, and as such children with Deaf parents were often depended upon for interpreting phone calls, television programs and their parents' medical and legal appointments. However, despite the advent of captioning, video relay calls and texting, and the availability of professional interpreters to interpret appointments, the majority of the respondents reported having similar experiences and feelings regardless of the generation from which they came.

The advent of technology that has benefited deaf people and the ADA may have changed the landscape of the interpreting needs of the Codas parents, but it did not change the fundamental internalization of the Coda identity and a feeling of allegiance to the Deaf Community. All of the respondents of this body of research share similar feelings and responsibilities to their Deaf communities, and it shows in their professional intentions and interactions.

More and more research is being done within the community. Research about Codas by Codas. Different aspects of the sphere of the Coda experience are gaining ground and voices. The Coda subset of the Deaf community has rather unique attributes due to being part of two different worlds and yet not of either. The experience of child language brokering, the struggle with identity discovery, and looking at belief systems and values based on generational demographics is going to add a new lens into the world of the ever-increasing body of information regarding the Coda.

Regardless of what generation the respondents came from, the same holds true for all of them. They all echo the same message, which is; we are a valuable part of the Deaf Community. It is our home and where we feel the most at home and accepted. Different generations notwithstanding, all of the respondents collectively value their identities as Coda's. It is a part of who they are. The experience and knowledge of ASL as a first language, as well as having internalized Deaf Culture through learned socialization creates some challenges in the work setting with interpreters who have learned ASL as a second language and don't have the internalized cultural piece due to learning the culture as a part of their education while studying to become interpreters.

Learning to negotiate the outside Hearing world has been easier for some than others. All of the respondents bring their internal knowledge of the culture and language with them into their work. For all of the respondents, doing something other than interpreting was never really an option. It is just who they are. The interpreting profession needs Codas. Lindsay states "Being in the Hearing Community is like being under water. Being in the Deaf Community is like breathing air".

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Appendix A

Request for Research Participants

Request Research Participants

My name is Athena Crosby-Martin and I am a graduate student in the Master of Arts in Interpreting Studies and Communication Equity program at St. Catherine University. I am conducting research for my thesis examining the evolving experiences of the Coda (Child of a Deaf Adults) who have become professional interpreters.

The purpose of this research:

The goal of this research will be to look at the evolution of the Coda interpreter and how change over time has impacted values and belief systems of the interpreters. Specifically, this study will explore the ways in which the age and experience of the interpreter manifests in their decision-making during interpreting work.

Eligibility for this research project:

- Have one or both parents who are Deaf
- Be between the ages of 20-70
- Currently working as a Sign Language Interpreter

Our interview will take place via a single video session, lasting between 1-1.5 hours.

If you are interested in participating in this research study, please contact me at acrosbymartin@stkate.edu.

Appendix B

Recruitment Flyer

My name is Athena Crosby-Martin and I am a graduate student in the Master of Arts in Interpreting Studies and Communication Equity program at St. Catherine University. I am conducting research for my thesis examining the evolving experiences of the Coda (Child of a Deaf Adults) who have become professional interpreters. Specifically, I will explore how those experiences impact their decision-making at work. I am requesting your participation in the study.

If you agree, we will select a date and time for an interview. Our discussion will take approximately 1-1.5 hours. It is possible that I may contact you at a later date with follow up questions. All information shared during this discussion will remain strictly confidential per Institution Review Board approval (# 971).

I aim to interview Coda's who are professional interpreters. I will follow up with you via email to schedule a date and time for participation in this study.

This study has been approved by the St. Catherine Institutional Review Board (# 971). You may contact the IRB office with any questions irb@stkate.edu. Thank you for your consideration and I look forward to hearing from you.

Athena Crosby-Martin CI/CT
Graduate student in the Master's of Interpretation Department
St. Catherine University

Appendix C

Consent Form

Informed Consent for a Research Study

Study Title: The Evolving Experience of the Coda Interpreter

Researcher: Athena Crosby-Martin, CI/CT

Research Advisor: Erica Alley, Ph.D., Program Director, Master of Arts in Interpreting Studies and Communication Equity

You are invited to participate in a research study. This study is called *The Evolving Experience of the Coda Interpreter*. The study is being done by Athena Crosby-Martin, a Masters' candidate in the Interpreting Studies and Communication Equity program at St. Catherine University in St. Paul, MN.

The purpose of this study:

The goal of this research is to study the experiences, values, and belief systems of Coda (Child of Deaf Adult) interpreters and how they have changed over time. This research uses age differences to explore the values and belief systems of Coda interpreters and how they manifest during interpreting work.

This study is important because research regarding working professional Coda interpreters is scant. Understanding more about values and belief systems and how those manifest while working will support future work in interpreter training of Coda interpreters as well as contribute to the limited research available regarding Coda interpreters.

Approximately 6 people are expected to participate in this research. Below, you will find answers to the most commonly asked questions about participating in a research study. Please read this entire document and ask questions you have before you agree to be in the study.

Why have I been asked to be in this study?

The criteria for participating in this study are one or both of your parents is/are deaf and you currently work as a professional interpreter. Certification is not required, however, you need to be currently working as an interpreter.

If I decide to participate, what will I be asked to do?

If you meet the criteria and agree to be in this study, you will be asked to do the following:

- Participate in a single online interview that will require approximately 1-1.5 hours.
- Demographic questions will be asked in the beginning of the interview.
- Participants may be contacted with follow up questions if any clarification or further information is needed.

What if I decide I don't want to be in this study?

Participation in this study is completely voluntary. Participants may refuse to answer any of the questions. If you decide you do not want to participate in this study, please feel free to say so, and do not sign this form. If you decide to participate in this study, but later change your mind and want to withdraw, simply notify me. You may withdraw at anytime up until the end of the interview. Your decision of whether or not to participate will have no negative or positive impact on your relationship with St. Catherine University, nor with any of the students or faculty involved in the research.

What are the risks (dangers or harms) to me if I am in this study?

There are no anticipated risks to your health or welfare if you participate in this study, however you will be sharing personal information. This is considered minimal risk because the information that you provide can be associated with you.

What are the benefits (good things) that may happen if I am in this study?

Participants will benefit in an indirect way because results will benefit the interpreting profession at large as well as the Coda interpreting community. There will be no direct benefits to the participants of this study.

Will I receive any compensation for participating in this study?

There is no compensation for participation in this study.

What will you do with the information you get from me and how will you protect my privacy?

The information that you provide in this study will be video recorded for transcription purposes. Your name will not be used in any presentation or publication that comes from this research. Instead, your chosen pseudonym will be used. All videotapes will also be labeled with that pseudonym so that your name and any other identifiable information will remain confidential. The video information will not be shown, instead the information will be transcribed and analyzed for my thesis.

I will keep the research data in a locked cabinet in my personal office. Only my research advisor and I will have access to the records while I work on this project. I will finish analyzing the data by December 1, 2018. I will then destroy all original videos and identifying information that can be linked back to you. Authorized persons from St. Catherine University and members of the

Institutional Review Board have the legal right to review your research records and will protect the confidentiality of those records to the extent permitted by law.

Any information that you provide will be kept confidential, which means that you will not be identified or identifiable in the any written reports or publications.

Are there possible changes to the study once it gets started?

If during the course of this research study I learn about new findings that might influence your willingness to continue participating in the study, I will inform you of these findings

How can I get more information?

If you have any questions, you can ask them before you sign this form. You can also feel free to contact me at acrosbymartin@stkate.edu at 707-217-2611. If you have any additional questions later and would like to talk to the faculty advisor, please contact Erica Alley, Ph.D. at elalley@stkate.edu. If you have other questions or concerns regarding the study and would like to talk to someone other than the researcher(s), you may also contact Dr. John Schmitt, Chair of the St. Catherine University Institutional Review Board, at (651) 690-7739 or jsschmitt@stkate.edu.

You may keep a copy of this form for your records.

Appendix D

Participation Script

Hello, my name is Athena Crosby-Martin and I am a graduate student at St. Catherine University in the Interpreting Department. I am conducting research on the experiences of Coda interpreters. Thank you for participating in this study.

Participation in this research includes answering demographic questions as well as questions exploring your experience as a Coda interpreter. The total time commitment will be between 1-1.5 hours. Our interview will be screen recorded; however, everything you say during our discussion will be kept entirely confidential. I am the only person who will have access to the video and I plan to use it only for transcription purposes so that I can fully participate in our discussion without needing to take notes. Your participation is important to add to the research regarding Coda interpreters. Thank you again for your time. Do you have any questions before we begin?

Appendix E

Demographics and Interview Questions

Demographic Informational Questions:

To be asked in the beginning of the interview (not via an online survey).

What is your age?

What would you like your pseudonym to be?

Are one or both of your parent's deaf?

Did you grow up in a signing environment?

Did you attend an IEP/ITP?

How many years have you been working as an interpreter?

Are you certified?

How long have you been certified?

What kind of environments do you typically interpret in?

Did you grow up with captioning equipment?

Did your family have a videophone? When was that installed?

When was the first pager in your family obtained?

How did VP, pager, captioning change your interpreting within the family unit?

Interview questions:

Tell me about a (or some) experiences you had growing up where you were interpreting for you parents that you didn't feel you understood or felt equipped to interpret (possibly due to age or knowledge constraints).

Tell me about your experiences that you had interpreting for your parents when you were growing up that were a positive experience.

Tell me about how your childhood interpreting experiences affected your experience as a professional interpreter.

Are there situations that you interpreted for your parents that you wished you hadn't?

What CODA issues come up for you while you are working?

What type of situations do you notice "your CODA showing"?

How does being a CODA impact your work with the Deaf Community? Deaf consumers? Hearing interpreters? Hearing Consumers?

Tell me about a the last time that you identified yourself on the job as a Coda
(To both client and team)
Why? Do you do that often or what that unique?

When did you not and why?
Tell me more about that

What skills do you think you have as a Coda interpreter have that your non-Coda colleagues may or may not have?
Tell me more....why is that a strength?

Is this unique for you or do your Coda colleagues have that too?

Tell me about a time at work that you felt your Coda identity influenced a situation.

Tell me about a time when debriefing after an assignment has been influenced by your Coda identity.

Tell me about how you perceive your position in the community?
Tell me more about that

Follow up questions:
When did you first hear the term Coda?

What do you perceive the differences are between the younger generation of Coda's and the older generation of Coda's?

Appendix F

Email to Deaf Parented Interpreter Group

Dear Deaf Parented Interpreter Group Committee:

My name is Athena Crosby-Martin and I am a graduate student in the Master of Arts in Interpreting Studies and Communication Equity program at St. Catherine University, and a fellow Coda. I am conducting research for my thesis examining the evolving experiences of the Coda (Child of a Deaf Adults) who have become professional interpreters.

I am asking permission to post a recruitment notice for participants on the Deaf Parented Interpreter closed Facebook page. Information about my research project follows below:

The purpose of this research:

The goal of this research will be to look at the evolution of the Coda interpreter and how changes over time has impacted values and belief systems of the interpreters. Specifically, this study will explore the ways in which the age and experience of the interpreter manifests in their decision-making during interpreting work.

Eligibility for this research project:

- Have one or both parents who are Deaf
- Be between the ages of 20-70
- Currently working as a Sign Language Interpreter

The interview will take place via a single video session, lasting between 1-1.5 hours.

Thank you for your consideration. Please contact me at acrosbymartin@stkate.edu to let me know the status of my request.

Sincerely,

Athena Crosby-Martin
MAISCE Graduate Student
St. Catherine University

Appendix G

IRB Form



ST. CATHERINE
UNIVERSITY

ST. CATHERINE UNIVERSITY REQUEST FOR APPROVAL FOR THE USE OF HUMAN SUBJECTS IN RESEARCH APPLICATION

IRB APPLICATION DOCUMENT CHECKLIST

The items listed below are the application, forms and supporting documents to be uploaded to Mentor IRB for your protocol/application submission. Consent forms and additional supporting documents may be uploaded to separately; see Mentor IRB Directions. For questions, contact the IRB Assistant at 651-690-6204 or irb@stkate.edu.

- ☒ IRB Application
- ☒ PI Documentation/CITI Training for Investigator(s)*
- ☐ PI Documentation/CITI Training for Faculty Adviser (if applicable)*
- ☒ Informed consent form
- ☐ Child assent form (if applicable)
- ☐ Recruiting materials (phone script, fliers, ads, etc.)
- ☒ Survey/questionnaire(s), focus group or interview questions (if applicable)
- ☐ Conflict of interest/financial interest disclosure (if applicable)
- ☐ Letter(s) of support (if you are conducting research at another agency, school, etc.).

*PI Documentation/CITI Training is the completion report received for fulfilling the required Human Subjects Research education requirements in CITI Program. Each person will need to upload their PI Documentation to their individual Mentor IRB account. Directions are located in Mentor IRB.

IRB RELATED POLICIES:

Listed below as well as throughout the application are St. Catherine policies related to human Subjects research

- IRB Policy: www.stkate.edu/pdfs/irb-human-subject-research-policy.pdf
- Intellectual Property Policy: www.stkate.edu/pdfs/orsp-policy-intellectual-property.pdf
- Research Misconduct Policy: www.stkate.edu/pdfs/orsp-policy-research-misconduct.pdf



ST. CATHERINE
UNIVERSITY

**ST. CATHERINE UNIVERSITY REQUEST FOR APPROVAL
FOR THE USE OF HUMAN SUBJECTS IN RESEARCH APPLICATION**

Complete the following application in its entirety. You may excerpt material from your thesis or grant proposal, but your application should be relatively concise. Consent forms and additional supporting documents may be uploaded to separately; see [Mentor IRB Directions](#). For questions, contact the IRB Assistant at 651-690-6204 or irb@stkate.edu.

**Date of
application:**

November 9, 2017

Investigator name(s) and credentials (e.g., PhD, RN, etc.): *(List all co-investigators)*

Athena Crosby-Martin CI/CT

**Project
Title:**

The Evolving Experience of the CODA Interpreter.

Department:

Interpreting

Level of Review:

In the Mentor IRB system, you must select the Review Type; selecting Exempt and Expedited will prompt additional questions for you to fill out. The default level of review is Full if not selected. For more information on the levels of review, go to the Mentor IRB Info page: [Determine the Level of Review](#).

☐

Exempt

☒

Expedited

☐

Full

Has this research been reviewed by another IRB?

☐

Yes

☒

No

If YES, you may not need to complete a St Kates IRB application and may be able to use your external IRB application instead. Please include a copy of the letter of approval and approved IRB application from the external IRB with your Mentor IRB submission, or indicate the status of your application here. Contact the IRB coordinator at IRB@stkate.edu with any questions. Examples: "See attached" or "Pending approval"

Will this research be reviewed by another IRB?

☐

Yes

☒

No

If YES, please indicate your plans for review

Note: Cooperative Research is when a research protocol requires approval from outside institutions (e.g., a hospital IRB or other college/university) as well as St. Catherine University. Sometimes it is possible for an IRB to accept an external IRB's review to reduce duplication of review effort. Contact the IRB coordinator at IRB@stkate.edu if you have questions about cooperative research and how to determine when only one IRB will need to review your IRB application. You can also reference the Cooperative Research Policy Addendum:

1. RESEARCH SUMMARY: Complete each section in clear, easy to read language that can be understood by a person unfamiliar with your research and your field.

a. Purpose of the research: Provide a clear, concise statement of your purpose.

The goal of this research will be to look at the evolution of the Coda interpreter and how change over time has impacted values and belief systems of the interpreters. Specifically, this study will explore the ways in which the age and experience of the interpreter manifests in their decision-making during interpreting work.

b. Background: Provide a concise summary in 1 - 2 brief paragraphs to explain the importance of the research and how it fits with previous research.

Hearing children who are born to deaf parents, also known as Coda's (Children of Deaf Adults), are born into a world where they are bimodal as well as bilingual. These children also become bicultural. The distinct differences between spoken and signed languages and hearing and deaf culture are worlds that these children are moving within-sometimes being able to navigate easily, and other times the navigation is more challenging. The identity of these children as they grow up becomes more complex often not fitting into the Deaf world or the Hearing world. The dichotomy between the Hearing world, which uses spoken language, and the Deaf world, which uses visual language, means that being one means not being the other (Pizer, Walters, Meier, 2012). The impact of this reality for Coda interpreters working in the field is that they often feel caught between the two different worlds. Williamson (2012) says, Codas live in an in-between space within the sign language interpreting profession. Neither hearing, nor deaf, we are often not seen nor valued. We are, however, both vilified and worshiped in good measure. The Deaf heart that a Coda has creates a space of alliance to a group that we are members of, however, not one of them. We are also members of a community who has been historically the oppressors of the minority community. Coda's own experiences witnessing the oppression often lend a significant level of disdain or perhaps hatred toward the Hearing community, despite being audiologically, considered a part of this group. This internal angst can create separateness in our professional sphere, sometimes from our own internal

processes and sometimes from our colleagues, who may have their own perceptions of Coda's-all making our place in our community challenging, to say the least. The in-between space, truly not belonging to one or the other, but being both-is typically not understood in either the hearing or deaf communities.

This project will be examining the evolving experiences of the Codas, who become professional interpreters and how those experiences, values, identity and belief systems impact their decision making processes at work

Adams (2008) says finding materials on hearing children of deaf parents is challenging, which is why more studies about the Coda experience are necessary. Currently, the amount of information regarding the belief systems and value systems of professional interpreters based on their experience growing up within the Deaf community and how that differs based on the generation with which they grew up is sparse.

The scarcity of research regarding the Coda experience is further compounded by the focus on defining whether Coda identity is between or on the edge of one or both cultures-Deaf and/or Hearing-instead of adopting a more holistic approach. As such, it seems that what little research there is, tries to identify and often fails to explore other aspects of the Coda experience" (Adams, 2008 p. 266).

Codas have continued to inform the profession of interpreting and seeking to find out if in fact, the belief and value system of the Coda has changed and therefore the landscape of Coda interpreting and their relationship with the profession of interpreting has also changed. Anecdotally, from generation to generation it appears that the cultural values are undergoing an evolutionary change and this study seeks to understand the evolution of such changes.

References

- Adams, S. (2008). Characteristics of the Coda experience in 21st-century contemporary culture. In M. Bishop & S. Hicks (Eds.), *Hearing, mother father deaf: Hearing people in deaf families* (pp. 261–292). Washington, DC: Gallaudet University Press.
- Pizer, G., Walters, K., Meier, R. (2012). "We communicated that way for a reason": Language practices and language ideologies among hearing adults whose parents are deaf. *Journal of Deaf Studies*. Retrieved from <http://jdsde.oxfordjournals.org>.
- Williamson, A. (2015). "Heritage learner to professional interpreter: Who are deaf-parented interpreters and how do they achieve professional status?" Master's of Arts in Interpreting Studies (MAIS) Theses. 22. Retrieved from: <http://digitalcommons.wou.edu/theses/22>

- c. Research Methods and Questions:** *Give a general description of the study design and specific methods you will use in your investigation. Specify all of your research questions and/or hypotheses. Reviewers will consider whether the information you are gathering is necessary to answer your research question(s), so this should be clear in your application.*

The Deaf Parented Interpreter Facebook page that the interviewer is a member will post a research participant notice there in hopes of garnering responses. (See Appendix A). Permission from the committee who administers the group will be needed. An email requesting permission to post a recruitment notice will be sent via email to the committee. (see Appendix F). A minimum of 6 Coda interpreters will be interviewed for this project.

Demographic information will be asked as a part of the interview. All interviews will be conducted via video online and digitally filmed on SD cards. Once the interview is completed, the information will be transcribed and analyzed for patterns and themes. Similar language, experiences, and themes will be coded to understand if there are patterns shared within the set of participants who share a similar generation. For the purposes of this study, two interpreters between the ages of 20-29, two interpreters from ages 30-49 and two interpreters from ages 50-70 will be used for the generational segments of the population.

- d. Expectations of Participants:** *Give a step by step description of all procedures that you will have participants do. Attach any surveys, tests, instruments, interview questions, data collection forms, etc. that you will use with participants.*

The participants will be asked demographic questions and interview questions (see Appendix E)

- e. Estimated Time Commitment for Participants:**

1
1-1.5 hour
1-1.5hour

Number of sessions for each participant

Time commitment per session for each participant

Total time commitment for each participant

f. Access to Existing Data: *If you are analyzing existing data, records, or specimens, explain the source and type, means of access, and permission(s) to use them. If not accessing existing data, indicate "NA"*

n/a

2. SUBJECTS: *Provide your best estimates below.*

a. Age Range of Subjects Included:

20-70

Number:

(Indicate a range, or maximum, if exceeded, you will need to submit an amendment)

2-5 Male

2-5

Female

Minimum Total
of 6

b. Target Population: Describe your target population (the group you will be studying; e.g. seniors, children ages 9-12, healthy adults 18 or over, etc.)

Coda interpreters between the ages of 20-70 who are currently working as professional interpreters

c. Specific Exclusions: *If women and/or minorities are to be excluded from the study, a clear rationale should be provided in section "f" below.*

d. Special Populations Included: *Select any special population that will be the focus of your research.*

NOTE: *These groups require special consideration by federal regulatory agencies and by the IRB.*

☐ Minors (under age 18)

☐ HIV/AIDS patients

☐ St. Catherine Employees

☐ Economically disadvantaged

☐ Students

☐ Educationally disadvantaged

☐ Pregnant women

☐ Hospital patients or outpatients

☐ Elderly/aged persons

☐ Prisoners

☐ Cognitively impaired persons

☐ **Minority group(s) and/or non-English speakers**
(please specify) _____

☐ **Other Special Characteristics and Special Populations**
(please specify) _____

e. **Provide reasons for targeting or excluding any special populations listed above.**

f. **Do you have any conflict of interest (financial, personal, employment, dual-role) that could affect human subject participation or protection?** *Dual-role examples: faculty–student (does not apply to action research projects for education students), medical practitioner-patients, supervisor-direct reports, etc.*

☐ Yes ☒ No

If Yes, please indicate the steps you will take to minimize any undue influence in your research, recruitment and consent process. You can also reference the university Financial Conflict of Interest policy: <https://www.stkate.edu/pdfs/orsp-policy-fcoi.pdf>

3. RECRUITMENT: LOCATION OF SUBJECTS (Select all that apply) :

☐ St. Catherine University students

☐ School setting (PreK – 12)

☐ Hospital or clinic

☐ Other Institution
(Specify): _____

☒ **None of the above (Describe location of subjects):**

Interpreters participating in this study will be recruited from throughout the United States. Interpreters will be recruited via:

Posting on electronic message boards associated with the Registry of Interpreters for the Deaf (e.g., Facebook), Closed Facebook pages for Coda Interpreters and Deaf Parented Interpreters (see Appendix A)

NOTE: *If subjects are recruited or research is conducted through an agency or institution other than St. Catherine University, submit either written or electronic documentation of*

approval and/or cooperation. An electronic version should be sent from the email system of that particular institution. The document should include the name of the PI, Title of the approved study, as well as the name and title of the appropriate administrator sending the approval. You should include an abstract/synopsis of your study when asking for approval from an external institution.

- a. Recruitment Method:** *Describe how you will recruit your subjects? Attach a copy of any advertisement, flyer, letter, or statement that you will use for recruitment purposes.*

Requests for participants will be requested via the closed Facebook page Deaf Parented Interpreter (See appendix A). Responses from the posting will be emailed with a recruitment email (see Appendix B). If participants choose to participate, a consent form will be emailed. to potential participant(Appendix C). If the participant chooses to participate, they will sign the consent form and scan signed copy and return via email to PI.

- b. Incentives:** *Will the subjects be offered inducements for participation? If yes, explain. Note: Please contact the ORSP office about the use of incentives within your research, as there are important university policies that fall outside of the protection of human subject, orsp@stkate.edu or x6156*
Incentive policy link: <https://www.stkate.edu/pdfs/participant-incentives-policy-and-procedures.pdf>

none

4. RISKS AND BENEFITS OF PARTICIPATION

- a. Select all that apply. Does the research involve:**

- ☐ Use of private records (medical or educational records)
- ☐ Possible invasion of privacy of the subjects and/or their family
- ☐ Manipulation of psychological or social variables
- ☒ Probing for personal or sensitive information in surveys or interviews
- ☐ Use of deception
- ☐ Presentation of materials which subjects might consider offensive, threatening or degrading
- ☐ Risk of physical injury to subjects
- ☐ Other risks:

- b. Risks:** *Briefly describe the risks of participation in your study, if any. Describe the precautions taken to minimize these risks. Please use “no foreseeable risk” rather than no risks.*

Interpreter participants will be video recorded using screen record technology (e.g., Quicktime) in a computer-mediated interaction in order to capture their complete interview for transcription and analysis. In order to minimize risk, the names of participants will not be used in the labeling of videos or the transcripts that are created from the video. Participants will have the opportunity to choose their own pseudonym that they prefer to be used in reference to them for the purpose of this study. Additionally, their images will not be shown to anyone other than the researcher. All documents associated with this study (e.g., informed consent) will be stored in a locked cabinet in the researcher’s office. All videos will be stored electronically on password protected computers. A back-up hard drive will be used to maintain the videos as well. This too will be kept in the locked cabinet in the researcher’s office. Additionally, all participants will be asked to sign an Informed Consent form indicating their willingness to participate and giving their permission to be video recorded.

- c. Benefits:** *List any anticipated direct benefits to your subjects. If none, state that here and in the consent form.*

- 1. Direct Benefits:** *List any anticipated direct benefits to your subjects. If none, state that here and in the consent form.*

There are no direct benefits to participants as a result of participation in this study.

- 2. Other Benefits:** *List any potential benefits of this research to society, including your field of Study.*

There is a lack of research available regarding Coda interpreters as well as a lack of materials available for training Coda interpreters. Available information typically pertains to language acquisition and linguistics. This research will be looking at values and belief systems that are developed in the early years of Coda’s and how that translates to work.

- d. Risk/Benefit Ratio:** *Justify the statement that the potential benefits (including direct and other benefits) of this research study outweigh any probable risks.*

While there is no direct benefit to the participants, the research on Coda interpreters available is scant. This will benefit the field of interpreting as well as the Coda interpreting community.

- e. **Deception:** *The use of deception in research poses particular risks and should only be used if necessary to accomplish the research, and when risks are minimized as much as possible. The researcher should not use deception when it would affect the subject's willingness to participate in the study (e.g, physical risks, unpleasant emotional or physical experiences, etc.).*

Will you be using deception in your research?

☐

Yes

☒

No

If yes, justify why the deceptive techniques are necessary in terms of study's scientific, educational or applied value. Explain what other alternatives were considered that do not use deception and why they would not meet the researcher's objective. Attach a copy of a debriefing statement explaining the deception to participants.

5. CONFIDENTIALITY OF DATA

- a. **Will your data be anonymous?**

☐

Yes

☒

No

- b. *How will you maintain anonymity/confidentiality of the information obtained from your subjects?*

In order to minimize risk, the names of participants will not be used in the labeling of videos or the transcripts that are created from the video. The participant will have the opportunity to choose his/her own pseudonym, which will be used in reference to them for all publications and presentations that are developed as a result of this research.

Additionally, interpreters' images will not be shown to anyone other than the researcher. All documents associated with this study (e.g., informed consent) will be stored in a locked cabinet in a researcher's office. All videos will be stored electronically on a password protected computer. A back-up hard drive will be used to maintain the videos. The hard drive, will be kept in the locked cabinet in a researcher's office and the laptop is password protected.

The PI of this study will personally conduct all transcription of the video data. The PI will conduct the initial analysis of the interpretations. Transcripts will be in written English and will not include any identifiable information associated with the participant other than the participant's self-chosen pseudonym for the study.

- c. Data Storage:** *Where will the data be kept, and who will have access to it during that time? Examples: I will store audio files and electronic files on a password protected computer or cloud (indicate which; please avoid using flash drives as they are the one of the hardest 'tools' to protect and one of the easiest to exploit or lose, it is suggested to encrypt data on the cloud such as use a file password). I will store all paper files in a secure location (a locked filing cabinet) that is accessible only to myself and my advisor.*

All documents associated with this study (e.g., informed consent) will be stored in a locked cabinet in a researcher's office. All videos will be stored electronically on a password protected computer. A back-up hard drive will be used to maintain the videos as well. This, too, will be kept in the locked cabinet in a researcher's office.

- d. Data Destruction:** *How long will it be kept? What is the date when original data will be destroyed? (All studies must specify a date when original data that could be linked back to a subject's identity will be destroyed. Data that is stripped of all identifiers may be kept indefinitely). Example: I will destroy all records from the study within six months of the conclusion of the study but no later than June 2017.*

The recordings from this study will be destroyed within six months of the conclusion of the study but not later than December 1, 2018

- e. Availability of Data:** *Will data identifying subjects be made available to anyone other than you or your advisor? If yes, please explain who will receive the data, and justify the need. Example: The data will only be available to me and my advisor.*

n/a

- f. Official Records:** *Will the data become a part of the medical or school record? If yes, explain.*

n/a

6. INFORMED CONSENT

- a. How will you gain consent?** *State what you will say to the subjects to explain your research.*

See Appendix D for the script that will be used with each participant along with the interview questions to be read to each interpreter participating in the study.

- b. Consent Document:** *Attach the consent or assent form or text of oral statement. A template is available in Mentor IRB. Example: "See attached"*

See Appendix C

- c. **Timing of Consent Process:** *Note: In studies with significant risk or volunteer burden, the IRB may require that subjects be given an interim period of 24 hours or more before agreeing to participate in a study*

n/a

- d. **Assurance of Participant Understanding:** *How you will assess that the subject understands what they have been asked to do (Note: It is not sufficient to simply ask a yes/no question, such as “do you understand what you are being asked to do?”)*

Interpreters participating in this study will be presented with an informed consent form in written English as well as will be read a script and asked questions in spoken English in order to ensure understanding (see Appendix C).

7. **CITI TRAINING** – *Work with your faculty advisor or contact IRB@stkates.edu if you have any questions about whether you should complete additional training modules within CITI. You can also reference the HSR Mandatory Education Policy: <https://www.stkate.edu/pdfs/irb-human-subject-research-education.pdf>*

- a. **Select all the CITI training courses/modules you completed:**

REQUIRED COURSE:

Human Subject Research Training Course – only one course is required

☒

X

Human Subject Research - Social & Behavioral Research Investigators

☐

Human Subject Research - Education Action Research Program

☐

Human Subject Research - Biomedical Research Investigators

OPTIONAL MODULES:

☐

Financial Conflict of Interest Course (suggested if you answered YES to Section 2 part g)

☐

Avoiding Group Harms - U.S. Research Perspectives (suggested if you checked any special populations in Section 2 part e)

☐

International Research (suggested for PIs doing research outside of the US that is NOT federally funded)

- ☐ **International Studies (suggested for PIs doing research outside of the US that IS federally funded)**
- ☐ **Cultural Competence in Research (suggested when conducting research across cultures, i.e. with a population that is culturally different from one's own)**
- ☐ **Internet Based Research (suggested for PIs using internet resources during their research (outside of recruitment) – Skype, survey tools, internet activity monitoring, etc.)**
- ☐ **Other (prisoners, pregnant women, children):**

8. ASSURANCES

By submitting this application, the researcher certifies that:

- **The information furnished concerning the procedures to be taken for the protection of human subjects is correct.**
- **The investigator has read the IRB policies and to the best of his/her knowledge, is complying with Federal regulations and St. Catherine University IRB Policy governing human subjects in research.**
- **The investigator will seek and obtain prior written approval from the IRB for any substantive modification in the proposal, including, but not limited to changes in cooperating investigators, procedures and subject population.**
- **The investigator will promptly report in writing to the IRB any unexpected or otherwise significant adverse events that occur in the course of the study.**
- **The investigator will promptly report in writing to the IRB and to the subjects any significant findings, which develop during the course of the study, which may affect the risks and benefits to the subjects who participate in the study.**
- **The research will not be initiated until the IRB provides written approval.**
- **The term of approval will be for one year. To extend the study beyond that term, a new application must be submitted.**
- **The research, once approved, is subject to continuing review and approval by the IRB.**
- **The researcher will comply with all requests from the IRB to report on the status of the study and will maintain records of the research according to IRB guidelines.**
- **If these conditions are not met, approval of this research may be suspended.**