FOREVER CONSULTING

PROJECT: WHAT DEAF PEOPLE WANT

PREPARED FOR: BOLTON DEAF SOCIETY, MANCHESTER DEAF CENTRE & WALTHEW HOUSE

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CONTENTS

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SECTION ONE: INTRODUCTION

A call for a needs assessment

Bolton Deaf Society, Manchester Deaf Centre and Walthew House in Stockport have commissioned Forever Consulting to understand the needs of D/deaf communities accessing their services. The research predominantly targeted members of the d/deaf community living in these three areas, and has also engaged others across the city-region and the Northwest who also access their services.

There are several factors driving the need for this research:

∞ Limited or no contemporary D/deaf needs assessment.

∞ The recent closure of other local Deaf support organisations and the unknown status of other support services is likely to be leaving gaps in provision.

∞ Covid-19 has likely changed the needs of D/deaf people and the support they need.

∞ The impact of technology on the need for a physical space.

Research purpose

The primary research purpose is to gather evidence of need among the D/deaf community to inform case-making for future funding for the organisations involved.

In addition, the research findings will also help to inform the design of future services, support wider fundraising activities, and facilitate discussions with key stakeholders and partners. It will also give

voice and representation to D/deaf communities and begin a conversation that may be continued beyond the scope of this research.

Research questions

The key research questions for this assignment are:

∞ What are the needs of D/deaf communities? To explore evidence which identifies support or service needs, variations between D/deaf groups, changes since Covid-19, etc.

∞ How do the client organisations currently meet the needs of the D/deaf community? And what is the benefit of this support (and to who)?

∞ What are the costs of not supporting the D/deaf community?

Approach

Key tasks were:

∞ A literature review of existing data, research and evidence on the D/deaf population in each location, as well as their experiences and needs. (See Annex 1 for a list of documents reviewed.)

∞ An online survey of people who are Deaf, deafened or hard of hearing and living, or accessing services, in each location. Paper copies of the survey were also available at each centre, and staff were on hand to help respondents complete it using

British Sign Language. The survey explored their main day-to-day challenges and concerns for the future, how often they wanted different types of support, how they prefer to receive support, and who from. (See Annex 2 for topline results.)

∞ Social Return on Investment (SROI) analysis based on evidence provided by the three client organisations.

The client organisations also carried out focus groups with their service users, and findings have been included in this report. (See Annex 3 for their topic guide and Annex 4 for an overview of participants' characteristics.)

SECTION TWO: PREVALENCE OF THE D/DEAF COMMUNITY

Defining D/deaf…

The research explores the needs of Deaf and deafened people, and those who are hard of hearing. The British Deaf Association[1] definitions are:

Deaf	The term 'Deaf' (with a capital D) is used to identify people with a strong cultural affinity with other Deaf people. These tend to be people without hearing from birth or early childhood (before learning to speak). Many use British Sign Language (BSL) as their first or preferred language.
Deafened	People who lose their hearing in adulthood. This could happen because of illness or an accident. They face different challenges to those who are deaf from birth. They are less likely to use BSL.
Hard of hearing	People who can hear, but may need more volume or clarity. They may miss the occasional word or vowel which may lead to mistakes. Hearing aids are often helpful in quiet situations. Medical professionals also use the term 'hearing impaired' for this group.

The term 'deaf' (with a small d) is often used for the broader deaf population, including those who became deaf in later life and tend to have English as their first language. In this report, the term 'deaf' (with a small d) is used to cover the broader deaf population, including those who are deafened and hard of hearing, but not those who are Culturally Deaf.

The following groups were deemed relevant but not the primary focus for this research assignment:

∞ D/deafblind;

∞ Parents/guardians, carers, and family of D/deaf people;

∞ Children of D/deaf adults (CoDA); and

∞ Other front line delivery staff and service providers, e.g. schools, national charities, interpreters, health and social care services.

The D/deaf community is significant and growing…

The Royal National Institute for Deaf People (RNID)[2] estimates in the UK there are:

∞ c. 1.2 million adults with hearing loss greater than 65 dBHL (from moderately severe to profound hearing loss, see Figure 1 below) – this equates to about one in 45 adults.

∞ c. 12 million adults with hearing loss greater than 25 dBHL (from mild to moderately severe, see Figure 1 below) – around one in five adults.

∞ c. 151,000 BSL users, including 87,000 who are Deaf.

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[1] British Deaf Association: Factsheet definitions

[2] Royal National Society for Deaf People: Facts and figures

∞ c. 7.1 million adults with tinnitus (ringing or buzzing that comes from inside the ears).

People of all ages are affected by hearing loss, but this increases significantly with age. RNID estimates that more than 40% of people over 50 years old and 70% of people over 70 years old have some degree of hearing loss. RNID estimates that Deaf, deafened or hard of hearing adults will increase to 14.2 million by 2035.

Figure 1: Degrees of hearing loss
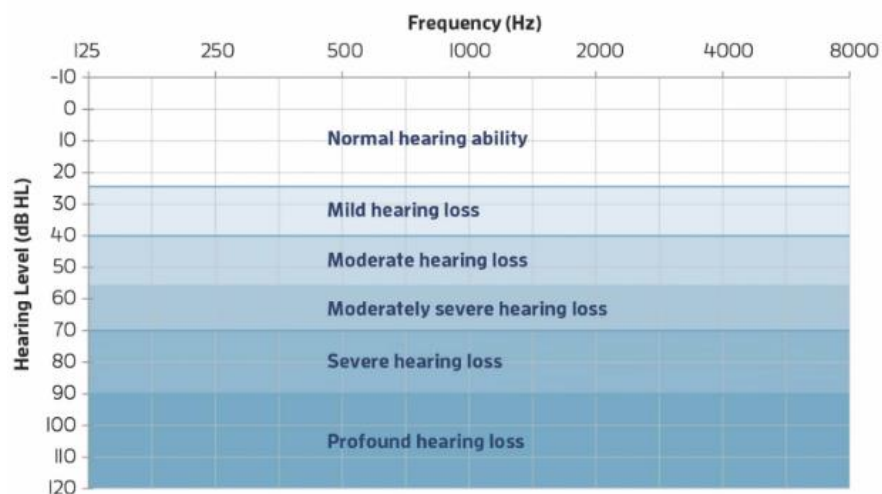
Source: www.healthyhearing.com

Estimating the local D/deaf population...

There is a lack of consistent local data on the size of the D/deaf population. We therefore applied UK D/deaf prevalence data (set out above) to local population data to crudely estimate population sizes in each location. See Table 1 below.

These estimates show that there over 195,000 people who have some level of mild or moderate hearing loss, over 20,000 with moderate severe through to profound hearing loss and c.1,450 Deaf people in Bolton, Manchester and Stockport alone.

Table 1: Prevalence of D/deaf populations (estimate)

Hearing status	Bolton	Manchester	Stockport	Greater Manchester
Hearing loss greater than 25 dBHL	49,947	97,850	52,282	499,827
Hearing loss greater than 65 dBHL	4,995	9,785	5,228	49,983
BSL users	628	1231	658	6,289
BSL users who are Deaf	362	709	379	3,624

Source: ONS population data and RNID population estimates

These are crude estimates based on limited local data and do not include wider contextual factors which may skew data. For example, prevalence of an ageing population in Stockport could suggest higher numbers of people who are hard of hearing than might occur in the average population.

Despite the caveats and data limitations, we conclude that there are sizeable D/deaf populations in Bolton, Manchester and Stockport who are likely to have additional support needs.

D/deaf people often face more challenges than their hearing counterparts…

A review of literature and research showed that D/deaf people tend to face more challenges than their hearing counterparts across most socio-economic measures. However, the consensus across studies is that these differences are largely due to poor access to services, poor communication and poor access to information, rather than D/deaf people being inherently different from the hearing population. The literature we reviewed used varying definitions of 'Deaf' and 'deaf' to those set out in our scope above, and some used other terms, such as 'hearing impaired'. We have reported the terms as they have been used in the publications referenced. Some common themes were:

Crime and personal safety	Evidence provided by SignHealth[3] to the Women and Equalities Committee's call for evidence into domestic abuse and coronavirus reported that: ✕ Deaf women are twice as likely to go through domestic abuse than hearing women.

	Australian research[4] found that: ✕ Deaf people are less likely to report hate crime because they consider themselves to be culturally and linguistically diverse – not disabled – and therefore do not think of themselves as at risk.
Education	Royal Association for Deaf People[5] summarised research studies which found that: ✕ The reading age of deaf students leaving school is below the national average. ✕ On average, deaf children achieve an entire grade less than their hearing peers at GCSE level. ✕ Deaf people whose main language is BSL are more likely to have no qualifications.
Employment	National Deaf Children's Society[6] summarised research studies which found that: ✕ 11% of people with a hearing disability are unemployed compared to 5% of those without.

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[3] SignHealth (2020) Domestic abuse and coronavirus: Written evidence
[4] Navarro C (date unknown) Hate crime reporting barriers: Why are victims reluctant to report

[5] Royal Association for Deaf People (2021) Deaf advance: Deaf people, employment and career progression
[6] National Deaf Children's Society (2020) Deaf works everywhere: Deaf young people's experiences of careers advice and support

	∞ 18-year-old deaf college students in England are 30% less likely to move into employment than the average.
Income	Analysis of the Life Opportunities Survey (2009/2010)[7] found that: ∞ People with hearing impairments experienced greater economic hardship than those without. ∞ People with hearing impairments were significantly more likely to experience 'great or some difficulties' in making ends meet than those without. ∞ 52% of people with a hearing impairment were able to afford to pay for unexpected but necessary expenses of £500 or more, compared to 67% of those without. ∞ People with hearing impairments reported an average weekly pre-tax total household income of £606; this is £208 less than those without (they reported an average of £814).
Health (physical)	Ipsos Mori[8] research for SignHealth[9] found that:

∞ 56% of Deaf participants describe their health as 'very good' or 'good' compared to 69% of the general population (using English Household Survey 2009-2010 as a comparator).

∞ 32% of Deaf participants reported they had a long-standing condition, compared to 28% of the general population.

∞ 71% of Deaf participants were overweight and 30% clinically obese, compared to 61% and 25% of the general population respectively.

∞ 37% of Deaf participants had hypertension (high blood pressure) compared to 21% of the general population. However, just 36% were on treatment compared to 57% of the rest of the population.

A study into pregnancy and birth outcomes[10] found that:

∞ Deliveries to deaf or hard of hearing women were significantly associated with adverse birth outcomes, including preterm birth, low or very low birth weight, and low 1- or 5-minute Apgar score (which assess a new-born's skin

[7] Jung Kim E, Byrne B and Parish S (2018) Deaf people and economic well-being: Findings from the Life Opportunities Survey
[8] Ipsos Mori (2013) Research into the health of deaf people
[9] SignHealth (2014) A report into the health of Deaf people in the UK
[10] Mitra M et al (2020) Pregnancy, birth and infant outcomes among women who are deaf or hard of hearing

	colour, pulse rate, reflex irritability, muscle tone, and breathing). It concluded they are therefore at a heightened risk for chronic conditions, pregnancy-related conditions and adverse birth outcomes.
Health (mental)	∞ 24% of Deaf participants reported depression compared to 12% of the general population – and only 15% of those were on medication.[11] ∞ 40% of deaf children experience mental health problems compared to over 25% of hearing children.[12]

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[11] SignHealth (2014) A report into the health of Deaf people in the UK

[12] NHS (2005) Mental health and deafness: Towards Equity and Deafness – cited in National Deaf Children's Society (2017) Emotional well-being and mental health of deaf children and young people position statement

SECTION THREE: A LEGAL DUTY AND STRATEGIC CASE TO SUPPORT D/DEAF PEOPLE

A review of the legislative and strategic context demonstrates that there is both a legal duty and local strategic commitment to supporting D/deaf people, most recently the British Sign Language Act, which creates additional responsibilities for public service providers. These are summarised below.

Equality Act 2010 and the Public Sector Equality Duty

Under the Equality Act 2010, 'reasonable adjustments' must be made by anyone providing services to the public, ensuring that a D/deaf person, as far as reasonably possible, can use services to the same standard as a hearing person. The Public Sector Equality Duty (PSED) was also introduced under the Equality Act. This duty is placed on public bodies and those carrying out public functions, and ensures they consider the needs of all individuals in their day-to-day work, including those who are D/deaf. Such bodies have responsibility to:

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act.
- Advance equality of opportunity between people who share a protected characteristic and those who do not.
- Foster good relations between people who share a protected characteristic and those who do not.

Information, advice and guidance provided by public bodies such as local authorities, and non-public bodies (e.g. private or voluntary sector organisations), where providing services on behalf of a local authority and where the public are beneficiaries, must be made accessible to D/deaf people under the PSED. This may include, for example, providing information or services in BSL.

Accessible Information Standard

The Accessible Information Standard (AIS) was introduced in 2016 and all organisations providing NHS care, and/or publicly funded adult social care, are required to follow it. The AIS sets out a specific consistent approach to identifying, recording, sharing and meeting the information and communication support needs of patients, service users, carers and parents with a disability, impairment or sensory loss.

British Sign Language Act 2022

In May 2022, the British Sign Language Act achieved Royal Assent and has passed into law. The Act:

- Recognises BSL as a language of England, Wales and Scotland in its own right.
- Requires the Secretary of State to report on how BSL will be promoted and facilitated by ministerial government departments.
- Requires guidance to be issued into how government departments and public bodies must meet the needs of people for whom BSL is their first language.

Relevant local strategies

The next level: Good lives for all in Greater Manchester – A report of the Greater Manchester Independent Inequalities Commission

The Commission[13] was established in the wake of the Covid-19 pandemic and the resurgence of the Black Lives Matter movement. It proposes a vision for public services to be accessible, to be community-based, and to work together to respond to, and support, local needs and individual people. It concluded that,

"Greater Manchester needs to pivot all of its strategy and all that it does towards reducing inequalities and growing wellbeing. In practical terms, this means ensuring that everyone in Greater Manchester has access to the basics for a good life – no matter who they are or where they live."

The Commission recognises that communities (geographical and of interest) know what they need – and they have the skills and ability to make it happen if they are resourced and empowered to do so.

It endorses the principle of 'universal basic services' as a key plank of an equal society. This means that providing cost-free or low-cost basic services to everyone can enable them to live a good life and contribute to the economy and society. It advocates that the city-region should focus on the things that matter for a good life, rather than economic growth that does not address inequalities. Within this they argue that promoting wellbeing is central, and means,

"…a good standard of living, living in a vibrant community where cultural diversity is respected and cultural expression encouraged."

Greater Manchester Strategy 2021-2031

The Greater Manchester Strategy[14], launched after the GM Independent Inequalities Commission published its report, comprises a series of equality goals that includes:

- People are welcomed, feel safe, not subjected to discrimination, prejudice, micro-aggressions or hate crime, in the workplace, in schools or in public places.

- Communities are understood, with data and intelligence on access, experience and outcomes efficiently collected, collated, analysed and presented, enabling inequality to be effectively identified and tackled.

- Wellbeing is valued, enabled by equitable public services and inclusive economic opportunities.

- People are engaged in the policies and services developed to support them, with their insight heard and valued alongside data and intelligence.

Local equality frameworks

As mentioned above, all public bodies are required to meet the duties set out in the Equality Act 2010. Additionally, the strategies

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[13] [Greater Manchester Independent Inequalities Commission (2021)](#)

[14] [Greater Manchester Strategy (2021)](#)

of those within this research's target areas highlight their commitment to inclusive communities.

∞ Bolton's Vision 2030[15] aims to respect and promote the diverse nature of the borough and ensure that their services are appropriate and accessible for everyone. Their Equalities Strategy 2021-2025[16] includes objectives to ensure their collection of equalities data is robust and sufficient to provide the required information for their decision-making processes, and they have pledged to review and improve their processes around equalities and diversity to demonstrate due regard to the Public Sector Equalities Duty and transparency in their decision making.

∞ Our Manchester Strategy 2015-2025[17] sets out the city's commitment *"to build a more equal, inclusive and sustainable place"*, and aims to ensure communities are included in the life of the city, regardless of their age, ethnicity, gender, disability, sexuality, faith or socio-economic background. Their Equality Objectives 2020-24[18] include improving the quality of information they hold about Manchester's diverse communities and using this growing knowledge to inform their priorities and services. They will particularly assess differing health trends across Manchester's communities of identity and tailor services to meet those needs.

∞ The One Stockport Plan[19] aims for a *"fair and inclusive Stockport, where diversity and inclusion is celebrated and everyone has equity of opportunity."* The Council's equality objectives[20] include ensuring *"positive life choices are accessible to all minority groups to enable them to live longer, healthier lives. [They] will ensure that vulnerable people can access specialist support and be protected from harm."*

Conclusion

At this stage we conclude:

∞ There are significant local D/deaf populations in Bolton, Manchester and Stockport who are likely to have additional and possibly unmet support needs;

∞ There are legal duties to support this group in terms of their access to core and other services; and

∞ There is a strategic commitment in local government to create inclusive communities. And in doing so, to better understand the needs of their communities, particularly those with sensitive characteristics, and involve them in ensuring services meet their needs.

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[15] Bolton Vision 2030
[16] Bolton Council Equality Strategy 2021-25
[17] Our Manchester Strategy – Forward to 2025

[18] Manchester City Council Equality Objectives 2020-24
[19] One Stockport Plan – Altogether as one
[20] Stockport Council Statement on Equality and Diversity 2018-22

SECTION FOUR: D/DEAF PEOPLE'S CHALLENGES AND SUPPORT NEEDS

Analysis of the challenges faced by D/deaf people and what they want support with is based on feedback from our online survey and three focus groups undertaken by Bolton Deaf Society, Manchester Deaf Centre and Walthew House. These findings have been triangulated with information from other research identified in the literature review.

The online survey was open from 30 March to 4 May 2022. We received 185 responses, but respondents did not answer every question. Due to limited robust data on local D/deaf populations, it is difficult to determine the validity of the data. However, the survey was widely promoted, and extensive efforts were made to ensure the survey was inclusive and as reflective of the local populations as possible.

Twenty-five people took part in the focus groups – full details of participants characteristics are shown in Annex 4 and Table 2 shows an overview of their hearing status and where they live.

Table 2: Survey and focus group participants by hearing status and location

		Survey	Focus groups
Hearing status	**Deaf**	54%	92%
	Deafened	8%	0%
	Hard of hearing	21%	4%
Location	**Bolton**	21%	52%
	Manchester	28%	20%
	Stockport	45%	28%

Nb. Table does not include 'other' responses.

Challenges faced by D/deaf people…

Divergence in challenges faced within D/deaf communities

Our analysis showed that there was some divergence between the prevalence and types of challenges faced by Deaf people compared with those who are deafened and hard of hearing. Most cited barriers are shown in Table 3 below.

Table 3: Most commonly faced challenges

Rank	Deaf	Deafened/ hard of hearing
1	Physical health (65%)	Other (43%)
2	Benefits (57%)	Social relationships (37%)
3	Money (53%)	Personal safety (33%)
4	Personal safety (50%)	Physical health (30%)
5	Council issues (43%)	Being active (20%)
6	Being active (41%)	Mental health (20%)
7	Mental health (40%)	Benefits (15%)
8	Social relationships (37%)	None (15%)

Source: Survey of D/deaf people (Forever Consulting, 2022)

Accessing health care and interacting with institutions was the biggest challenge for Deaf people

Deaf people in this survey experienced more barriers than those who are deafened and hard of hearing. Their main issues commonly centred around their interaction with public services and institutions.

Focus group respondents referenced accessing healthcare as a major challenge, particularly getting BSL interpreters for GP, hospital and optician appointments, and at the chemist. This has led to cancelled appointments, delays in medical support and incorrect prescriptions.

Other research also points to issues in healthcare, particularly around Deaf people being able to communicate well with health professionals. A Royal National Institute for Deaf People[21] study found that just 7% of hospital emergency departments had interpreters, and 77% of BSL users report difficulty communicating with hospital staff. Their study also found that the types of challenges they face in GP surgeries include:

- Being unclear about a diagnosis (28%)
- Being unclear about health advice they were provided with (26%)
- Being unclear about their medication (19%)
- Not having a BSL interpreter present (just 17% of consultations had an interpreter present)
- Missing appointments because they had missed being called into the waiting room (14%)

Furthermore, a review of the NHS Accessible Information Standard[22] found that 67% of Deaf people reported that no accessible method of contacting their GP had been made available to them, and the burden had been placed on them to request an interpreter or information in a different format at every appointment. According to the AIS, this information should be shared and actioned by all parts of the NHS after it has first been requested.

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[21] Royal National Institute for Deaf People (2012) Access all areas? A report into the experiences of people with hearing loss when accessing health care

[22] Various charities (2021) Review of the NHS Accessible Information Standard

Mental health was ranked by twice as many Deaf people than those who are deafened/hard of hearing. This theme also emerged from the focus groups with a handful of participants saying this is an issue for them, and counselling services in BSL are sorely needed.

> *"I feel D/deaf people are more likely to have mental health issues…This is because they are not understood and are not given the right support throughout their lives. When you look at things from a social perspective there are so many gaps for us to access services, whether this is attending a hospital appointment, GP, Social Services etc. It is frustrating."* (Focus group participant)

Interactions with other institutions is also a challenge for Deaf people

The British Deaf Association (BDA)[23] research in Birmingham also found that Deaf people face issues accessing the council, including:

- Difficulty accessing and understanding council information as English is usually their second language.

- Few, if any, specialist advocacy services they can use to understand their rights.

- Reduction in numbers of specialist social workers for Deaf people.

Not feeling like they are treated as equal or full citizens, or that their views are important. This is in part due to consultations and complaints procedures not being available in BSL.

- Lack of BSL interpreters. Many Deaf citizens were requested to ask their family/friends to provide interpretation. Many are not trained, which leads to inaccurate information and poor data collection.

> *"We experience many barriers within our everyday lives due to lack of; services, support, interpreters and funding for what we need. Many places do not have D/deaf awareness and do not understand barriers from our point of view."* (Focus group participant)

Deafened and hard of hearing were more likely to experience challenges around social interactions…

Deafened and hard of hearing survey respondents were more likely to experience barriers related to their social interactions, than their interaction with systems or institutions. For example, 'Other' was the most cited challenge for this group. This was an open-ended response, and the main themes were:

- Taking part in conversations

- Navigating phone calls, including automated phone services

- Feeling guilty or a nuisance to others

- Not being able to concentrate / work / relax

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[23] British Deaf Association (2014) Access to council services for Deaf people in Birmingham

Employment themes

Challenges around employment were not cited as one of the main barriers in the survey overall. However, when we looked at challenges for those in, or close to, the labour market[24] (57% of the sample), 43% of Deaf people faced challenges around employment, for example, job hunting, being treated fairly by your employer. This was lower at 18% for deafened and hard of hearing people in, or close to, the labour market. Anecdotal evidence from the three client organisations also suggests that their Deaf service users value employment support to help them move into work, including help with writing applications in English, and preparing for interviews.

Employment issues were also a common theme emerging from the focus groups. Participants gave examples of facing discrimination and being bullied in the workplace, and missing out on employment opportunities because employers were worried about insurance. Many also felt they were not treated well by the Jobcentre and referenced them as one of the organisations who would benefit from Deaf Awareness Training.

A Royal National Institute of Deaf People[25] study of Deaf, deafened and hard of hearing people in employment found that nearly four in five identified the attitude of employers as the main barrier to employment (79%), and 64% said they didn't know where or how to access support or advice. They also reported particular challenges at work, such as feeling:

- Employment opportunities were more limited because of their hearing loss (74%)

- Hearing loss sometimes prevented them from fulfilling their potential at work (70%)

- Isolated at work because of their hearing loss (68%)

> *"As long as I wear my hearing aid I can hear well. The challenges are not wanting to have my hearing aid on show, particularly at work. I therefore always wear my hair down so it covers my ears. I do fear being treated differently if people saw my hearing aid. It is not something I openly discuss."* (Survey respondent, hearing impaired)

What D/deaf people want…

D/deaf people want support socialising and keeping fit, as well as practical support to accessing services

Overall, Deaf survey respondents were more likely to say they wanted support 'most days' or 'most weeks' compared to deafened

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[24] Survey respondents defined as in, or close to the labour market, reported being in full-time education, full-, part-time or self-employment, or unemployed.

[25] [Royal National Institute of Deaf People (2013) Hidden Disadvantage: Why people with hearing loss are still losing out at work](#)

or hard of hearing people. However, there are similarities in the types of support they want.

Table 4: Most common support needs

Rank	Deaf	Deafened and hard of hearing
1	Socialising	Keeping fit and healthy
2	Making telephone calls on your behalf	Socialising
3	Keeping fit and healthy	Making telephone calls on your behalf
4	Meeting other people with similar hearing issues as you for peer support	Advocacy
5	Translating information into British Sign Language	Booking appointments

Source: Survey of D/deaf people (Forever Consulting, 2022)

Survey respondents explain the issues they have with phone calls:

> *"Using the phone, people just speak too fast, often they have foreign accents or local ones that makes it hard to follow instructions, I keep having to remind them to speak slower and clearer." (Survey respondent, hard of hearing)*
>
> *"People expect me to call them over the phone when I have told them I am Deaf." (Survey respondent, Deaf BSL user)*

Many Deaf survey respondents and focus group participants reported that it can be difficult to book an interpreter, and even once booked, they may not turn up, or they may not be up to the required standard.

> *"There are more provisions for other languages than for British Sign Language i.e. at job centre." (Focus group participant)*
>
> *"Organisations often do not book interpreters, or say they have when they have not. It is our right, yet this is something which is often missed." (Focus group participant)*

Focus group participants said they would like support to be able to take part in mainstream sports, gyms, theatres and the cinema. One explained the difficulties they had accessing mainstream fitness classes:

> *"I used to go [to Zumba] but stopped as I can't follow the instructor. It is difficult to see her face… but I don't want to be at the front in case I do it wrong and feel embarrassed." (Focus group participant)*

Anecdotal evidence from the client organisations also suggests that younger service users expect support agencies to take a lead with advocacy and campaigning. This would be particularly aimed at making institutions more accessible, so D/deaf people can easily access mainstream services, with the hope that the knock-on effect would be that wider society becomes more inclusive and accessible.

D/deaf people prefer to receive support face-to-face from someone they know…

Two-thirds of Deaf people prefer to receive support from a specialist Deaf support organisation (66%). This is likely to be due to people being able to develop a rapport with others who may share their experiences. This is followed by a family member or friend (49%) and the relevant service provider (47%).

> *"One example of a positive experience is with advocate Philip from Bolton Deaf Society, as he can understand and empathise due to shared lived experience." (Focus group participant)*

Conversely, most deafened and hard of hearing people prefer to receive support from a family member or friend (61%), with just over a quarter preferring to access support from a specialist D/deaf organisation (27%), or the relevant service provider (23%).

Both Deaf and deafened/hard of hearing people prefer to receive support face-to-face in person (87% and 65% respectively). For Deaf people this is followed by messaging such as text or WhatsApp (46%) and then email (35%). For deafened or hard of hearing the reverse is true – after face to face, 48% prefer email and 39% prefer text or WhatsApp messages. Both groups placed video calls such as Zoom or MS Teams last (31% of Deaf people and 19% of deafened/hard of hearing said this was their preferred way of receiving help). Indeed, it appears that while online communications were useful during the Covid-19 lockdowns, most are looking forward to returning to in person support at the centres.

> *"Positive experiences occur when we are able to have meetings together to resolve issues." (Focus group participant)*

76% of Deaf and 64% of deafened/HOH respondents like accessing services in person for the social contact as much as personal support

60% of Deaf and 51% of deafened/HOH respondents said there were times they didn't seek help during the pandemic because it's difficult to access services online

60% of Deaf respodents disagree that they enjoyed accessing services online and will continue to do so where available (deafened/HOH were split: 46% agreed, 40% disagreed)

Whilst D/deaf people value the social elements of receiving support face-to-face, many prefer to be on their own with the support provider (37% of Deaf and 45% of deafened/hard of hearing survey respondents). Just one in eight Deaf respondents said they prefer a group setting (13%), but no deafened/hard of hearing gave this as their preferred option.

Survey respondents were asked in general whether they could access support services in a location and at time that suits them, and in a culturally appropriate way. There was little difference

between Deaf and deafened/hard of hearing respondents, although they were split in their views:

47% agree they can access support services at a time that suits them, 39% disagree

45% agree they can access support services in a location that suits them, 41% disagree

36% agree they can access culturally appropriate support services, 28% disagree

The current service offer...

Most survey respondents attend at least one of the support organisations in the target areas: Bolton Deaf Society, Manchester Deaf Centre and Walthew House (62%); and of these, 63% attend most days or weeks. Deaf people are most likely to: 81% attend one, and of these 74% attend most days or weeks.

The services offered by Bolton Deaf Society, Manchester Deaf Centre and Walthew House in Stockport vary between organisation but fall within four broad themes:

Theme	Description
Social and wellbeing activities	Diverse activities to improve wellbeing and reduce social isolation. Activities range from arts and crafts, exercise classes, day trips, walking groups and guest speakers, to general social drop-in groups.
Practical support accessing services	This includes translating information into BSL, providing BSL interpreters, lip speakers and electronic note takers, making phone calls, and booking appointments.
Information and advocacy	Common advocacy service themes include housing, benefits, employment, council services, finance (HMRC, pensions, banking, debt), medical appointments, legal aid, and discrimination. Manchester Deaf Centre also offers support for ex-offenders, LGBTQ+ and women-specific issues.
Training	Training includes BSL training, Deaf awareness and interpreter awareness training, as well as inclusive employment for local employers.

Other services available to D/deaf people

Other specialist support services are limited across Bolton, Manchester and Stockport. Some survey respondents mentioned they used to receive support from Salford Deaf Advocacy and Support Service, and some Stockport residents mentioned going to their local library for hearing aid batteries, but this service is no longer provided.

A small number of survey respondents (10) also use **The Prevention Alliance Stockport**. This centre caters for Stockport residents and offers a weekly drop-in supported by BSL interpreters, access to Key Workers who are trained to Level 2 BSL, a dedicated text phone service and a bank of accessible resources for the D/deaf community to use covering health, police, domestic abuse, banks, energy, HMRC, benefits and other local organisations.

Other local support includes the **Catholic Deaf Association Manchester**: a faith-based organisation which offers church services in BSL, as well as training courses in Catholic education, Deaf awareness, and communication strategies to improve access to the church community.

At a national level, organisations supporting the D/deaf community include the Royal National Institute for Deaf People (RNID), Hearing Link, British Deaf Association, SignHealth, the Royal Association for Deaf People. The service offer across these national level organisations generally includes provision of accessible information, campaigning for changes in policy and deaf awareness, community outreach, communication services and training and helpdesks or advice services. Some unique offerings include:

- Free hearing checks (RNID)
- Wellbeing live chat services in BSL (Royal Association for Deaf People)
- Video in a range of health-related topics (SignHealth)
- Hearing dogs (Hearing Link)

∞ Research funding (RNID and Royal Association for Deaf People)

Conclusion

It is clear that Deaf, deafened and hard of hearing people face additional day-to-day challenges and concerns about the future due to their hearing status.

There are differences between the challenges Deaf and deafened/hard of hearing people face in their day-to-day lives: Deaf people are more likely to feel challenged by physical health issues and accessing big institutions, such as for benefits, the bank, HMRC and the council, whilst deafened/hard of hearing are more likely to feel challenged by social relationships, taking part in conversations, and were also more likely to feel guilty or a nuisance to others.

There are common themes about what D/deaf people want support with, particularly socialising, keeping fit and healthy, and practical support, such as making telephone calls on their behalf, translating into BSL, booking interpreters and booking appointments. Needs did not vary significantly between Deaf, deaf, deafened and hard of hearing.

It appears that the services provided by Bolton Deaf Society, Manchester Deaf Centre and Walthew House closely align with the support D/deaf people say they need. They are also delivering that support in most D/deaf people's preferred method – face-to-face in person. However, many Deaf people would like support most days

or weeks and may have unmet needs if the centres are unable to keep up with demand.

SECTION FIVE: THE ECONOMIC CASE FOR SUPPORTING D/DEAF PEOPLE

This section assesses the social value associated with providing support to D/deaf communities using both Cost Effectiveness Analysis and Social Return on Investment (SROI) methodology.

As noted throughout this report, the context for this SROI assessment is:

∞ There are significant D/deaf populations in Bolton, Manchester and Stockport who have additional support needs.

∞ The community faces barriers around themes such as access to services, skills and employment, social isolation, health and mental health issues, which tend to be more prevalent in D/deaf communities than the general population.

∞ Bolton Deaf Society, Manchester Deaf Centre and Walthew House are providing key support services to D/deaf communities, which align with their stated challenges and needs.

∞ A brief review of wider local provision shows there are challenges with accessing statutory services and little by way of alternative dedicated provision in the third sector. This means there is likely to be high additionality.

Cost of delivery…

The estimated average annual operating costs are shown in Table 5 below.

Table 5: Average annual operating costs (estimated)

	Bolton Deaf Society	Manchester Deaf Centre	Walthew House
Operating costs (pa)	£77,983	£ 596,980	£268,263
Number of people supported	~	265	~
Cost to support a D/deaf person	~	£2,253	~

Sources: Organisations' own data

A simple Cost Effectiveness Analysis using data from Manchester Deaf Centre shows the cost to support a D/deaf person is £2,253 which covers a mix of services provided. We would argue that this is relatively cost effective when considering the dispersed nature of D/deaf people and the additional support of BSL interpretation. By way of comparison, a national study[26] on the costs of employment support for people with disabilities was £2,238 (in 2021 prices).

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[26] National Development Team for Inclusion (2014) The cost effectiveness of employment support for people with disabilities

A positive SRoI at £2.46 per £1 spent...

The 265 D/deaf service users have accessed different types of support and this in turn is likely to have generated a variety of different outcomes. We have taken reported outcomes data from Manchester Deaf Centre and applied a series of value proxies to different outcomes, to monetise the benefits and derive the SRoI. See Annex 5 for a list of benefits and value proxies applied.

Costs and benefits were adjusted to reflect:

∞ Deadweight, displacement, attribution and drop off to derive net impacts;

∞ Discounted at a rate of 3.5%; and

∞ All prices adjusted to reflect the assessment year of 2021.

The overall return on investment was positive at £2.46 per £1 spent.

The cost of no support...

The SROI shows that the costs of third sector support to D/deaf people brings a positive social return including benefits to individuals and likely cost savings to the public purse. In 2017, the World Health Organisation quantified the economic costs of unaddressed hearing loss[27]. It highlighted the costs to education and health providers, but it also highlighted wider socio-economic costs. Key findings were:

∞ Societal costs – the result of social isolation, communication difficulties and stigma – add a further $573 billion each year.

∞ Loss of productivity, due to unemployment and premature retirement among people with hearing loss, is conservatively estimated to cost $105 billion annually.

∞ The report also concluded that early and prevention interventions were cost effective policy solutions.

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[27] World Health Organisation (2017) Global costs of unaddressed hearing loss and cost-effectiveness of interventions

SECTION SIX: CONCLUSIONS AND RECOMMENDATIONS

Conclusions

∞ There is a significant and growing D/deaf population who have additional needs. There over 195,000 people who have some level of mild or moderate hearing loss, over 20,000 with moderate severe through to profound hearing loss and c.1,450 Deaf people in Bolton, Manchester and Stockport alone.

∞ There is a strategic case and legal duty to support D/deaf people, particularly in terms of access to services and social inclusion.

∞ There are clear distinctions between people with different hearing status – however, this is not reflected in policies, service provision or other research evidence.

∞ D/deaf communities locally experience challenges. For Deaf communities this commonly centres around access to services and institutions. For deafened and hard of hearing people, challenges were more commonly around social interactions. Support with employment issues was also cited as a common challenge for Deaf people in or near to the labour market, more so than deafened or hard of hearing people.

∞ Despite varying challenges and experiences between D/deaf communities, their stated support needs were similar. These included socialising, keeping fit and practical support with communication and accessing services.

∞ D/deaf people prefer accessing support face-to-face in person. While online communications were useful during the Covid-19 lockdowns, there is a clear preference for support in a physical space.

∞ Deaf people tended to need more frequent support than deafened and hard or hearing people, and have a preference for support delivered on an individual basis.

∞ D/deaf people's needs appear to align with the services currently offered by Bolton Deaf Society, Manchester Deaf Centre and Walthew House.

∞ However, demand for existing services appears to exceed supply. There is also a large deaf community (in the region of 200,000) who do have support needs, based on our survey, but are less likely to be engaged with specialist support services.

Recommendations

∞ Bolton Deaf Society, Manchester Deaf Centre and Walthew House to make calls for a stronger evidence base on D/deaf populations at the local level.

∞ Partners to consider whether strengthened data on their service users, activity and outcomes achieved could help them better understand their impacts and better position them for future funding or commissioning.

∞ Partners to explore opportunities for:

- Further and ongoing deaf awareness training among different organisations, but prioritising key public services, especially in the light of legislative duties. (Which could also provide a revenue stream.)

- Explore potentially unmet and growing demand for practical support to Deaf people for accessing core services, who need help on a frequent basis.

- Provide further outreach and engagement of the large population of deaf people whose support needs are potentially unmet. This could include exploring whether they hold perceptions that support organisations and services are predominantly for the Deaf community, and not for 'people like them'.

- There is a case for supporting those D/deaf people who are in, or close to the labour market, to access and sustain employment. This aligns well with local agendas on inclusive economic growth.

ANNEX 1: DOCUMENTS REVIEWED

Bolton Metropolitan Borough Council (2017) Bolton Vision 2030

Bolton Metropolitan Borough Council (2021) Equalities Strategy 2021-25

British Deaf Association (date unknown) Factsheet – Definitions

British Deaf Association (2012) Transforming Deaf people's lives

British Deaf Association (2014) Access to council services for Deaf people in Birmingham

Crowe T (2020) Psychiatric functioning, resilience, and recovery among Deaf consumers of public behavioral health services

Emond A et al (2015) The current health of the signing Deaf community in the UK compared with the general population: A cross-sectional study

Equality and Human Right Commission (2017) Being disabled in Britain: A journey less equal

European Federation of Hard of Hearing People (2017) Experiences of late deafened people in Europe

Fellinger J et al (2012) Mental health of deaf people

Greater Manchester Combined Authority (2021) Greater Manchester Strategy 2021-2031: Good lives for all

Greater Manchester Independent Inequalities Commission (2021) The next level: Good lives for all in Greater Manchester

Ipsos Mori (2013) Research into the health of deaf people

Jung Kim E et al (2018) Deaf people and economic well-being: Findings from the Life Opportunities Survey

Kelly L (2018) Sounding out d/Deafness: The experiences of d/Deaf prisoners

Kuenburg A et al (2016) Health care access among Deaf people

Levine J (2014) Primary care for deaf people with mental health problems

Lumsden K and Black A (2019) 'Sorry, I'm dead, it's too late now': Barriers faced by D/deaf citizens when accessing police services

Luna S et al (2020) The impact of aging on spatial abilities in Deaf users of a sign language

Luton M et al (2017) Deaf women's experiences of maternity and primary care: An integrative review

Manchester City Council (2020) Equality Objectives 2020-24

Manchester City Council (2021) Our Manchester Strategy – Forward to 2025

Mitra M et al (2020) Pregnancy, birth and infant outcomes among women who are deaf or hard of hearing

Moffatt-Feldman, M (date unknown) The positive psychology of the Deaf individual

National Deaf Children's Society (2017) Emotional well-being and mental health of deaf children and young people position statement

National Deaf Children's Society (2020) Deaf works everywhere: Deaf young people's experiences of careers advice and support

National Development Team for Inclusion (2014) The cost effectiveness of employment support for people with disabilities

Navarro C (date unknown) Hate crime reporting barriers: Why are victims reluctant to report?

One Stockport (2021) All together as one – Our vision for 2030

Reeves D et al (2002) Access to Primary Care and Accident & Emergency Services for Deaf People in the North West. A report for the NHS Executive North West Research and Development Directorate 2002

Rogers K (2013) Deaf people and mental well-being: Exploring and measuring mental well-being in British Sign Language

Rogers K et al (2018) The challenge of realising patient-centres outcomes for Deaf patients

Royal National Institute for Deaf People (2012) Access all areas? A report into the experiences of people with hearing loss when accessing health care

Royal National Institute of Deaf People (2013) Hidden disadvantage: Why people with hearing loss are still losing out at work

Royal National Institute of Deaf People (2019) Working for change: Support and advice needed for people with hearing loss or deafness in work

Royal Association for Deaf People (2021) Access denied: Deaf people and advice services in England

Royal Association for Deaf People (2021) Deaf advance: Deaf people, employment and career progression

Salford Deaf Advocacy Services (2021) Evaluation report

SignHealth (2014) A report into the health of Deaf people in the UK: Sick of it

Sign Health (2020) Domestic abuse and coronavirus: Written Evidence Submitted by SignHealth (MRS0215) to the Women and Equalities Committee

SignHealth (2020) How has coronavirus impacted deaf people?

Stockport Metropolitan Borough Council (2018) Statement on Equality and Diversity 2018-22

Various charities (2021) Review of the NHS Accessible Information Standard

World Health Organisation (2017) Global costs of unaddressed hearing loss and cost-effectiveness of interventions

Zidenberg A (2020) Avoiding the deaf penalty: A review of the experiences of d/Deaf individuals in the criminal justice system

ANNEX 2: SURVEY TOPLINE RESULTS

The survey was targeted at people who are Deaf, deafened or hard of hearing, and living or accessing services in Bolton, Manchester and Stockport.

The survey took place online, and paper copies were available at Bolton Deaf Society, Manchester Deaf Centre and Walthew House in Stockport. Staff were available at all centres to help respondents complete the survey.

The survey was open between 30 March and 4 May 2022, and 185 responses were received.

Responses for each quantitative question are shown below. Data has been presented for all 185 respondents, those who describe themselves as being Deaf at question 1 (101 respondents), and those who describe themselves as deafened, hard of hearing or hearing impaired at question 1 (84 respondents).

Calculations for the percentage difference between Deaf and deafened/hard of hearing are also shown, and have been highlighted green where the difference is greater than 10 percentage points.

Questions 8 and 12 show the net positive percentage score. This is calculated by deducting those who disagree (strongly or tend to) from those who agree (strongly or tend to).

Percentages are calculated from those who answered the question, rather than the total number of respondents.

Section 1: What support do you want?

1.   First if all, we'd like to understand about your hearing. Which of the following statements apply to you? Please tick all that apply. [MULTIPLE CHOICE]

	% (N)
I am Deaf	55% (101)
I wear hearing aid(s)	46% (86)
I use British Sign Language (BSL)	42% (77)
I am hard of hearing	22% (40)
I have tinnitus	19% (36)
I am hearing impaired	17% (31)
I am deafened	8% (14)
I have cochlear implant(s)	5% (10)
Other	6% (11)

2. In your day-to-day life, what are the main challenges you face, or concerns you have, as a result of being Deaf, deafened or hard of hearing? Please tick all that apply. [MULTIPLE CHOICE]

	All % (N)	Deaf % (N)	Deafened/HOH % (N)	%age difference Deaf-deafened/HOH
		101	84	
Physical health, for example booking appointments	56% (91)	65% (66)	30% (25)	+35
Personal safety, for example walking around, hate crime	48% (79)	50% (51)	33% (28)	+17
Benefits, for example applications and reviews	44% (71)	57% (58)	15% (13)	+42
Creating and maintaining social relationships	41% (67)	37% (37)	36% (30)	+1
Money, for example bank processes and complaints, pension credits, tax and HMRC, debt advice	40% (66)	53% (54)	14% (12)	+39
Being active, for example exercising, walking	36% (58)	41% (41)	20% (17)	+21
Mental health, for example accessing counselling	35% (57)	40% (40)	20% (17)	+20
Council issues, for example council tax, reporting problems	31% (51)	43% (43)	10% (8)	+33
Employment, for example job hunting, being treated fairly by your employer	23% (38)	28% (28)	12% (10)	+16
Housing, for example dealing with landlords	20% (32)	28% (28)	5% (4)	+23
Other	36% (58)	22% (22)	43% (36)	-21
None – I do not face any challenges	14% (22)	9% (9)	15% (13)	-6

If there are any other challenges you face as a result of being Deaf, deafened or hard of hearing, please write them here: [TEXT BOX]

3. Thinking about the future, are you worried about of the following due to being Deaf, deafened or hard of hearing? Please tick all that apply. [MULTIPLE CHOICE]

	All % (N)	Deaf % (N)	Deafened/HOH % (N)	%age difference Deaf-deafened/HOH
Being able to communicate effectively	60% (108)	60% (61)	56% (47)	+4%
Taking part in social activities	58% (103)	63% (64)	46% (39)	+17%
Having to rely more on others	57% (102)	62% (63)	46% (39)	+16%
Your quality of life in general	53% (95)	57% (58)	44% (37)	+13%
Decreased confidence or increased levels of anxiety	53% (95)	52% (53)	50% (42)	+2%
Being able to enjoy the things you used to	46% (83)	50% (51)	38% (32)	+12%
Being safe walking around, crossing roads etc	44% (79)	52% (53)	31% (26)	+21%
Knowing your rights	39% (69)	52% (53)	19% (16)	+33%
Being able to afford medical treatment or devices	30% (54)	29% (29)	30% (25)	-1%
Limited employment options or progressing in your career	27% (49)	32% (32)	20% (17)	+12%
Your relationship with a romantic partner	27% (48)	33% (33)	18% (15)	+15%
Not being able to fulfil your current duties at work	25% (44)	29% (29)	18% (15)	+11%
Being treated fairly by your employer	20% (36)	25% (25)	13% (11)	+12%
Being able to continue driving	20% (36)	24% (24)	14% (12)	+10%
Having to retire early	17% (30)	21% (21)	11% (9)	+10%
Other	9% (17)	7% (7)	12% (10)	-5%
None - I am not worried about the future	7% (12)	6% (6)	7% (6)	-1%

If there is anything else you are worried about, please write them here: [TEXT BOX]

4. Generally speaking, how often, if at all, would you like the following types of support: [SINGLE CHOICE]

ALL RESPONDENTS	Most days % (N)	Most weeks % (N)	Most months % (N)	Less often than monthly % (N)	Never % (N)
Keeping fit and healthy	34% (55)	16% (26)	7% (11)	15% (25)	28% (45)
Socialising	31% (49)	17% (27)	13% (21)	13% (20)	26% (42)
Making telephone calls on your behalf	30% (52)	16% (27)	10% (17)	11% (19)	33% (57)
Meeting other people with similar hearing issues as you for peer support	26% (44)	17% (29)	13% (21)	14% (23)	30% (51)
Advocacy support and knowing your rights, for example for benefit applications, medical assessments, employment issues, tribunals	25% (43)	14% (24)	8% (14)	27% (47)	25% (43)
Booking appointments	23% (39)	14% (24)	16% (27)	17% (29)	30% (50)
Translating information into British Sign Language	30% (48)	7% (12)	10% (16)	8% (13)	45% (73)
Booking an interpreter	24% (39)	12% (20)	7% (12)	10% (16)	46% (74)
Signposting to other services	17% (27)	15% (24)	12% (19)	25% (40)	33% (53)
Filling out forms, for example applying for a bus or train pass	15% (26)	8% (14)	11% (19)	24% (41)	40% (68)

If there is anything else you frequently need help with, please write them here: [TEXT BOX]

DEAF RESPONDENTS	Most days % (N)	Most weeks % (N)	Most months % (N)	Less often than monthly % (N)	Never % (N)
Meeting other people with similar hearing issues as you for peer support	42% (40)	22% (21)	11% (11)	9% (9)	16% (15)
Making telephone calls on your behalf	46% (44)	18% (17)	9% (9)	13% (12)	15% (14)
Keeping fit and healthy	47% (43)	18% (16)	5% (5)	12% (11)	18% (16)
Translating information into British Sign Language	49% (45)	10% (9)	13% (12)	12% (11)	16% (15)
Advocacy	39% (38)	15% (15)	10% (10)	22% (21)	13% (13)
Socialising	46% (39)	22% (19)	8% (7)	8% (7)	15% (13)
Booking appointments	35% (34)	17% (16)	18% (17)	16% (15)	15% (14)
Booking an interpreter	39% (36)	18% (17)	11% (10)	16% (15)	15% (14)
Signposting to other services	25% (23)	21% (19)	12% (11)	21% (19)	21% (19)
Filling out forms, for example applying for a bus or train pass	24% (23)	9% (8)	13% (12)	35% (33)	19% (18)

If there is anything else you frequently need help with, please write them here: [TEXT BOX]

Deafened/HOH RESPONDENTS	Most days % (N)	Most weeks % (N)	Most months % (N)	Less often than monthly % (N)	Never % (N)
Keeping fit and healthy	17% (12)	14% (10)	8% (6)	20% (14)	41% (29)
Socialising	14% (10)	11% (8)	19% (14)	18% (13)	39% (29)
Making telephone calls on your behalf	11% (8)	13% (10)	11% (8)	9% (7)	57% (43)
Advocacy	7% (5)	12% (9)	5% (4)	35% (26)	41% (30)
Booking appointments	7% % (5)	11% (8)	14% (10)	19% (14)	49% (36)
Meeting other people with similar hearing issues as you for peer support	4% (3)	11% (8)	14% (10)	20% (14)	51% (36)
Signposting to other services	6% (4)	7% (5)	11% (8)	29% (21)	47% (34)
Filling out forms, for example applying for a bus or train pass	4% (3)	8% (6)	9% (7)	11% (8)	68% (50)
Translating information into British Sign Language	4% (3)	4% (3)	6% (4)	3% (2)	83% (58)
Booking an interpreter	4% (3)	4% (3)	3% (2)	1% (1)	87% (60)

If there is anything else you frequently need help with, please write them here: [TEXT BOX]

5. Who do you prefer to help you with these issues? Please tick all that apply. [MULTIPLE CHOICE]

	All % (N)	Deaf % (N)	Deafened/HOH % (N)	%age difference Deaf-deafened/HOH
A family member or friend	61% (100)	49% (49)	61% (51)	-12
A specialist Deaf/deafened support organisation	55% (90)	66% (67)	27% (23)	+39
The relevant service provider, for example the bank, council, doctors, police	40% (66)	47% (47)	23% (19)	+24
Other	5% (9)	9% (9)	10% (8)	-1

6. In general, how do you prefer to receive help? Please tick all that apply. [MULTIPLE CHOICE]

	All % (N)	Deaf % (N)	Deafened/HOH % (N)	%age difference Deaf-deafened/HOH
Face to face in person	83% (143)	87% (88)	65% (55)	+22
Via messaging, such as text, WhatsApp	46% (79)	46% (46)	39% (33)	+6
Via email	44% (75)	35% (35)	48% (40)	-13
Face to face over video calls, such as Zoom, MS Teams, FaceTime	27% (47)	31% (31)	19% (16)	+12
Other	6% (10)	4% (4)	7% (6)	-3

7. In general, do you prefer to receive help on your own or in a group? [SINGLE CHOICE]

	All % (N)	Deaf % (N)	Deafened/HOH % (N)	%age difference Deaf-deafened/HOH
On my own (1 to 1)	41% (69)	37% (35)	45% (34)	-8
Both on my own and in a group depending on the situation	36% (60)	32% (30)	40% (30)	-8
In a group	7% (12)	13% (12)	0% (0)	+13
I don't mind	17% (28)	18% (17)	15% (11)	+3

8. The Covid-19 pandemic resulted in most organisations offering services online only. Do you agree or disagree with the following statements? [SINGLE CHOICE]

ALL RESPONDENTS	Strongly agree % (N)	Tend to agree % (N)	Tend to disagree % (N)	Strongly disagree % (N)	Don't know % (N)	Net agree %
I have enjoyed accessing services online and will continue to do so where available	14% (18)	13% (17)	18% 23	40% (51)	14% (18)	-31
There are times when I have not sought help during the pandemic because it is difficult to access services online	28% (33)	29% (34)	16% (19)	22% (26)	6% (7)	+19
I like accessing services in person for the social contact as much as the practical support	39% (49)	31% (39)	6% (7)	13% (17)	12% (15)	+51

DEAF RESPONDENTS	Strongly agree % (N)	Tend to agree % (N)	Tend to disagree % (N)	Strongly disagree % (N)	Don't know % (N)	Net agree %
I have enjoyed accessing services online and will continue to do so where available	12% (9)	7% (5)	21% (16)	47% (35)	13% (10)	-49
There are times when I have not sought help during the pandemic because it is difficult to access services online	34% (22)	26% (17)	15% (10)	20% (13)	5% (3)	+25
I like accessing services in person for the social contact as much as the practical support	43% (26)	33% (20)	0% (0)	16% (10)	8% (5)	+59

DEAFENED/HOH RESPONDENTS	Strongly agree % (N)	Tend to agree % (N)	Tend to disagree % (N)	Strongly disagree % (N)	Don't know % (N)	Net agree %
I have enjoyed accessing services online and will continue to do so where available	17% (9)	23% (12)	13% (7)	31% (16)	15% (8)	-4
There are times when I have not sought help during the pandemic because it is difficult to access services online	20% (11)	31% (17)	17% (9)	24% (13)	7% (4)	+11
I like accessing services in person for the social contact as much as the practical support	35% (23)	29% (19)	11% (7)	11% (7)	15% (10)	+42

9. How often do you access support from these organisations? [SINGLE CHOICE]

ALL RESPONDENTS	Most days % (N)	Most weeks % (N)	Most months % (N)	Less often than monthly % (N)	Never % (N)
Bolton Deaf Society	5% (7)	6% (9)	4% (6)	15% (22)	71% (106)
Manchester Deaf Centre	8% (13)	17% (28)	7% (12)	8% (14)	59% (98)
Walthew House	1% (1)	18% (28)	5% (7)	12% (18)	64% (98)

DEAF RESPONDENTS	Most days % (N)	Most weeks % (N)	Most months % (N)	Less often than monthly % (N)	Never % (N)
Bolton Deaf Society	8% (6)	9% (7)	5% (4)	21% (16)	57% (43)
Manchester Deaf Centre	13% (12)	26% (24)	9% (8)	14% (13)	37% (34)
Walthew House	1% (1)	30% (23)	0% (0)	11% (8)	58% (44)

DEAFENED/HOH RESPONDENTS	Most days % (N)	Most weeks % (N)	Most months % (N)	Less often than monthly % (N)	Never % (N)
Bolton Deaf Society	1% (1)	3% (2)	3% (2)	8% (6)	85% (63)
Manchester Deaf Centre	1% (1)	5% (4)	5% (4)	1% (1)	86% (64)
Walthew House	0% (0)	7% (5)	9% (7)	13% (10)	71% (54)

10. Are there other organisations you regularly access support from? Please write them here: [TEXT BOX]

11. Are there any organisations you accessed support from that have recently closed – either locally or nationally? Please write them here: [TEXT BOX]

12. Do you agree or disagree with the following statements? [SINGLE CHOICE]

ALL RESPONDENTS	Strongly agree % (N)	Tend to agree % (N)	Tend to disagree % (N)	Strongly disagree % (N)	Don't know % (N)	Net agree %
I can access support services in a location that suits me	24% (27)	21% (24)	16% (18)	25% (28)	14% (16)	+4
I can access support services at a time that suits me	19% (23)	28% (34)	25% (30)	14% (17)	13% (16)	+8
I can access culturally appropriate support services	16% (17)	20% (21)	17% (18)	11% (12)	35% (37)	+8

DEAF RESPONDENTS	Strongly agree % (N)	Tend to agree % (N)	Tend to disagree % (N)	Strongly disagree % (N)	Don't know % (N)	Net agree %
I can access support services in a location that suits me	28% (19)	18% (12)	13% (9)	27% (18)	13% (9)	+6
I can access support services at a time that suits me	21% (14)	24% (16)	19 (13)	21% (14)	15% (10)	+4
I can access culturally appropriate support services	21% (11)	21% (11)	19% (10)	15% (8)	25% (13)	+8

DEAFENED/HOH RESPONDENTS	Strongly agree % (N)	Tend to agree % (N)	Tend to disagree % (N)	Strongly disagree % (N)	Don't know % (N)	Net agree %
I can access support services in a location that suits me	17% (8)	26% (12)	20% (9)	22% (10)	15% (7)	+2
I can access support services at a time that suits me	17% (9)	34% (18)	32% (17)	6% (3)	11% (6)	+13
I can access culturally appropriate support services	12% (6)	19% (10)	15% (8)	8% (4)	46% (24)	+8

13.   Are there any circumstances where you aren't getting the help you need? Please explain what the issue is, why you haven't been able to access support for it, and what the consequences have been for you. Bullet points are fine! [TEXT BOX]

14.   Is there anything else you want to tell us about the support you need or how you would like it delivered? Bullet points are fine! [TEXT BOX]

Section 2: About you

15.   Where do you live? [SINGLE CHOICE]

	% (N)
Stockport	38% (70)
Manchester	24% (44)
Bolton	17% (32)
Other	15% (28)
Prefer not to say	5% (9)

16. How old are you? [SINGLE CHOICE]

	% (N)
Under 18	2% (3)
18-29	12% (22)
30-39	7% (12)
40-49	13% (23)
50-59	20% (36)
60-69	23% (42)
70+	22% (40)
Prefer not to say	2% (3)

17. How do you describe your gender? [SINGLE CHOICE]

	% (N)
A woman (including trans woman)	50% (88)
A man (including trans man)	46% (80)
Non-binary	1% (2)
Prefer not to say	3% (5)

18. What is your first language? [SINGLE CHOICE]

	% (N)
English	57% (98)
British Sign Language	41% (71)
Other	2% (3)
Prefer not to say	1% (1)

19.   What is your ethnic group? [SINGLE CHOICE]

	% (N)
White	86% (150)
Asian or Asian British	7% (12)
Black or Black British	3% (5)
Mixed or multiple ethnic group	2% (3)
Prefer not to say	3% (6)

20.   Are you the parent or legal guardian for any children aged 17 or under living at home?

	% (N)
No	80% (140)
Yes – and none are also Deaf, deafened or hard of hearing	9% (15)
Yes – and at least one is also Deaf, deafened or hard of hearing	6% (10)
Prefer not to say	6% (11)

21.   Do you have another disability in addition to your hearing? Please tick all that apply. [MULTIPLE CHOICE]

	% (N)
No	47% (77)
Yes - learning disability	20% (33)
Yes - mental ill health	22% (37)
Yes - mobility disability	21% (35)
Yes – another sensory disability	12% (19)
Prefer not to say	7% (11)

22. What is your working status? [SINGLE CHOICE]

	% (N)
Retired	31% (55)
Full-time paid employment (30 hours or more each week)	29% (52)
Part-time paid employment (less than 30 hours each week)	13% (23)
Unemployed	8% (14)
Full-time education (school, college, university)	6% (10)
Not looking for work – sick or disabled	6% (10)
Self-employed	2% (3)
Not looking for work – home-maker	1% (1)
Doing something else	2% (4)
Prefer not to say	4% (7)

23.　Which of the following best describes your current financial status? [SINGLE CHOICE]

	% (N)
I have more than enough for basic necessities and a large amount of disposable income, that I can save or spend on extras or leisure	9% (15)
I have more than enough for basic necessities, and a small amount of disposable income, that I can save or spend on extras or leisure	31% (55)
I have just enough for basic necessities and little else	17% (29)
I don't have enough for basic necessities and sometimes run out of money	14% (25)
Prefer not to say	29% (51)

ANNEX 3: FOCUS GROUP TOPIC GUIDE

Introductory overview

- Facilitator to introduce themselves and any note-takers

- Explain purpose of research, timeframes, how information will be used

- Explain how the session will work, how long it will take and any house-keeping

- Explain their participation is voluntary and their contributions will be confidential

- Confirm they are happy to proceed

- Ask participants to introduce themselves with their name, and if they are happy to do so – whether they are Deaf, deafened or hard of hearing. If the session is taking place in real life, facilitators may also like to ask participants to wear a name badge or write their name on a card placed in front of them.

Support needs

- Let's start off by sharing what it's like to be Deaf, deafened or hard of hearing. [Facilitator mention the ones present.] How does it make you feel? Do you feel it's a positive or a negative thing?

- Now let's think about some of the challenges you may face. What are the main challenges you face now, or worry about in the future?

- Has Covid or any other recent events changes any of the challenges you face? If so, how?

- Let's turn to the support you receive. Can you tell us about a time that you received really good support for a challenge you were facing? What was the situation? Who provided the support? What did they do? What made it so good?

  - [If some people haven't received good support] Can you describe to us what good support would look like for you? Who would provide it? And how?

- Are there any circumstances where you're not getting the support you need? What's the issue? Why haven't you been able to get help? How has that impacted your life?

- We're coming to the end now. Is there anything else you'd like to tell us about the support you need or how you would like it delivered?

Thanks and close

- Thank participants for their time and remind them how they can find out what will happen next.

ANNEX 4: FOCUS GROUP PARTICIPANTS' CHARACTERISTICS

Bolton Deaf Society, Manchester Deaf Centre and Walthew House each conducted one focus group with their service users.

Focus group participants were encouraged to take part by centre staff, and also via the online survey.

They were held at the three organisations' premises between the 22 and 27 April 2022, while the survey was open.

The topic guide is provided in Annex 3.

There were 25 participants in total, 23 of which were Deaf. Overall, the groups had a fairly even gender split, although all were White. Ages ranged from teenage to retired. Table 6 shows a breakdown of the participants' characteristics by organisation.

Table 6: Characteristics of the focus group participants

	Bolton Deaf Society	**Manchester Deaf Centre**	**Walthew House**	**Totals**
No. of participants	13	5	7	25
No. of Deaf / deafened / hard of hearing	11 Deaf / 1 hard of hearing / 1 hearing	All Deaf	All Deaf	23 Deaf / 1 hard of hearing / 1 hearing
No. female / male	5 female / 8 male	2 female / 3 male	5 female / 2 male	12 female / 13 male
No. by age	All 40-70	All 30-60	5 adults, including 1 retired, and 2 teenagers	Ages range from teenage to retired
No. by ethnicity	All White	All White British	All White	All White

Source: Bolton Deaf Society, Manchester Deaf Centre, Walthew House

ANNEX 5: VALUE PROXIES

Gross outputs	Net Impact	Proxy used	Monetised benefit value	Monetised benefit source
Number of FTE employees	12	Gross Value Added (GVA)	£33,573	ONS: Regional gross value added (balanced) by local authority in the UK
Number of volunteers or volunteer hours	23	Average 2 values for volunteering (annual health and wellbeing + social value)	£3,087	HACT Social Value Calculator V4 (2018) Annual health and wellbeing value of regular volunteering outside of London
Number of deaf people supported into employment	13	Economic value/cost saving of a JSA claimant entering work	£18,084	New Economy Unit Cost Database - Employment & Economy tab, Cell M3
WEA (Preparation for Maths)	7	Annual wellbeing value of taking a part-time adult learning course that improves job prospects	£754	The Social Impact of Housing Providers, Fujiwara, D. (2013) (refers to a 2012 study) wellbeing value of taking a part-time adult learning course that improves job prospects (either by helping people to get a job, or by increasing skills for work)
City and Guilds Accredited Maths class	8	City & Guilds Level 2 Qualification - annual fiscal and economic benefits	£989	New Economy Unit Cost Database - Education tab, Cell J20 & M20
Pathways to work course	9	Annual wellbeing value of taking a part-time adult learning course that improves job prospects	£754	The Social Impact of Housing Providers, Fujiwara, D. (2013) (refers to a 2012 study) Wellbeing value of

Gross outputs	Net Impact	Proxy used	Monetised benefit value	Monetised benefit source
				taking a part-time adult learning course that improves job prospects (either by helping people to get a job, or by increasing skills for work)
BSL courses	68	Improved attitude & communication skills	£400	Willingness to Pay (WTP) BSL average across 3 levels (£250, £400, £550)
Deaf Awareness training	357	WTP: Inclusive Leadership: Working with Equality and Diversity WTP: Deaf awareness training course	£29	Willingness To Pay (WTP) BSL courses (£29)
Wellbeing support	64	(Prevention of) Mental Health Care Initial Assessments (NHS cost)	£325	NHS costs
Advocacy support	115	Access to services (no value for this)	£1,000	A framework for research on costs and benefits of independent advocacy, Office for Disability Issues (2009) Ranges from £0 to £2000 depending on outcomes - we assume mid-point of the range
Inclusive Employment workshops	184	WTP: Inclusive Leadership: Working with Equality and Diversity	£16	WTP Udemy course: Inclusive Leadership: Working with Equality and Diversity

Gross outputs	Net Impact	Proxy used	Monetised benefit value	Monetised benefit source
Covid support: Medical and food parcel collection/delivery	5	Assumes advocacy proxy as above	£1,000	[A framework for research on costs and benefits of independent advocacy, Office for Disability Issues (2009)](#) Ranges from £0 to £2000 depending on outcomes - we assume mid-point of the range
Translation of government guidance	113	Assumes advocacy proxy as above	£1,000	[A framework for research on costs and benefits of independent advocacy, Office for Disability Issues (2009)](#) Ranges from £0 to £2000 depending on outcomes - we assume mid-point of the range
Provision of info re Furlough scheme	8	Assumes advocacy proxy as above	£1,000	[A framework for research on costs and benefits of independent advocacy, Office for Disability Issues (2009)](#) Ranges from £0 to £2000 depending on outcomes - we assume mid-point of the range
IT training for service users	29	WTP: IT training for beginners	£20	[WTP Udemy course: IT for beginners](#)
Social groups	90	Annual wellbeing value per person of being able to socialise and meet others on most days	£3,000	[The Social Impact of Housing Providers, Fujiwara, D. (2013)](#) (refers to a 2012 study Applied the annual

Gross outputs	Net Impact	Proxy used	Monetised benefit value	Monetised benefit source
				wellbeing value per person of being able to socialise and meet others on most days