



Understanding Auslan signers through the 2022 Deaf Census

2022 Deaf Census Report

Gabrielle Hodge, Lee Murray, Darlene Thornton & Jen Blyth

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About Deaf Australia

Deaf Australia acknowledges the Traditional Owners and Custodians of the lands on which we work and pay our respects to Indigenous Elders past and present. Sovereignty has never been ceded. It always was and always will be, Aboriginal land.

We recognise the past atrocities against Aboriginal and Torres Strait Islander peoples of this land and that Australia was founded on the genocide and dispossession of First Nations people. We acknowledge that colonial structures and policies remain in place today and recognise the ongoing struggles of First Nations people in dismantling those structures, especially Deaf, Deafblind and hard of hearing First Nations peoples.

We also acknowledge and respect the members of the Deaf Community in Australia, who preserve our rich heritage, culture, and language Auslan. We acknowledge our Auslan teachers and educators, who work to promote awareness and equality for deaf signing peoples, and access through our sign language.

Deaf Australia was founded in 1986 as a not-for-profit organisation that represents all Deaf, Deafblind, and hard of hearing people, and others who are fluent and knowledgeable about Auslan. We aspire to achieve equity for Deaf people across all areas of life. The focus has and continues to be on developing access to information and accessible communication. We work with Australian governments and collaborate with key stakeholders to make sure that Australia complies with the United Nations Convention on the Rights of Persons with Disabilities. The UN Convention and the National Disability Strategy guides our work.

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Statistics about signing Deaf people and Deaf communities are extremely limited (Christian Blind Mission Australia, 2021; European Union of the Deaf, 2022). The efficient and thorough collection of quantitative data is an urgent priority for Deaf, Deafblind and hard of hearing communities worldwide. Such data is essential for advocacy planning and effective service provision. In Australia, after a decades-long grassroots campaign led by Deaf Australia, the national peak advocacy organisation for Deaf, Deafblind, and hard of hearing Auslan signers, the Australian Bureau of Statistics finally included Auslan as a LOTE (Languages Other Than English) option on the National 2021 Census (Deaf Australia, 2020). This was a major win for the recognition of Auslan on a national level, with an estimated 16,245 people responding they use Auslan at home (ABS, 2021a; Deaf Connect, 2021).

Yet much more detailed information is still required. In 2022, Deaf Australia developed and analysed the first national Deaf Census (Deaf Australia, 2022). The aim was to better understand the access and inclusion experiences of diverse Deaf, Deafblind, Deaf disabled, and hard of hearing people who use Auslan and other signed languages in Australia, as well as any other people who sign. The 2022 Deaf Census was a 30-minute online survey with 85 questions in Auslan and English open to anyone aged 13 years or older. It included basic demographic questions about culture, disability, sexuality, and ethnicity. It also included more complex questions about people's educational, employment, medical and social experiences, and their language use. The 2022 Deaf Census generated 1,215 responses from across the country, including 846 responses from d/Deaf, d/Deafblind, d/Deaf disabled, and hard of hearing people who use Auslan.¹ Here we summarise these responses and outline how this data can strengthen advocacy and self-determination efforts going forward.

¹ The uppercase convention 'Deaf' is often used by people who are culturally Deaf signers, but it is not used by everyone. There are diverging opinions and experiences within and across Australian Deaf communities. We do not assume here that every deaf person who uses Auslan and responded to the Deaf census refers to themselves using this uppercase convention, and so have refrained from doing so here unless it is explicitly known, e.g., Deaf Australia explicitly refers to Deaf, Deafblind and hard of hearing people. In doing so, we strive to acknowledge these different experiences and re-orient our focus instead to language use: we are primarily interested in people in Australia who use Auslan and other signed languages. This includes any and all d/Deaf, d/Deafblind, d/Deaf disabled and h/Hard of hearing people who use Auslan.

1. Background

Investigations of demographic data relating to Auslan signers in Australia have largely focused on the number of profoundly deaf people who use Auslan, with the reasoning that profoundly deaf people are the core demographic most likely to use Auslan everyday and throughout their lifetime. Johnston (1989) initially estimated there were 10,000 deaf Auslan signers in Australia, based on the global 0.1% statistical prevalence of profound childhood deafness in developed countries. A few years later, Hyde & Power (1992) used a paper survey and snowball network method to estimate 15,000 deaf signers in Australia, also identifying high levels of unemployment and underemployment among deaf respondents to the study. On the basis of various estimates and data from the ABS National 1996 Census, Ozolins & Bridge (1999) claimed the total number of deaf Auslan signers probably exceeded 15,000.

Johnston (2004) then used more rigorous and varied statistical data on the incidence of childhood deafness from a range of medical sources, including rubella vaccination rates and the neonatal screening programme, to estimate a much more conservative figure of 6,500 deaf signers. This figure is more in line with his earlier estimate (Johnston, 1989). Both these estimates led Johnston to warn that Auslan is endangered due to declining numbers of the core cohort of profoundly deaf people who sign, and who are most likely to ensure Auslan is passed on to younger generations (Johnston, 2004).

In the ABS National Census, Auslan was first recorded only in 2001, with 5,306 people volunteering they use Auslan at home without being asked specifically about Auslan. In 2021, the ABS Census finally included a more rigorous and precise question about Auslan. The exact question was *“Does (person) use a language other than English at home?”* with the prompt question in the ‘other language’ category stating *“If other, for example, Auslan, please write here.”* Using this method, the 2021 Census identified 16,242 people who use Auslan at home. While inclusion of Auslan as a language in the 2021 Census was a victory for the Deaf community, it was extremely hard-won and achieved only after extensive advocacy by Deaf Australia ongoing since 2007. Previous attempts to amend the 2011 and 2016 National Censuses were not successful.

This history indicates it takes at least 15 years for the ABS to accept and include minority languages and other demographic recognition in the ABS National Census. Yet we cannot wait that long for more data, especially when it takes successive iterations of the Census to develop and refine how questions are asked in terms of the quality of data retrieved (see also Bartsch, 2023). It was therefore essential for Deaf Australia to develop their own Deaf Census as soon as circumstances allowed. In doing so, we took the opportunity to broaden the scope to include anyone who uses Auslan and other signed languages in Australia, while keeping the focus on the core demographics of Deaf, Deafblind and hard of hearing signers

who use Auslan. Thus, the 2022 Deaf Census collected a much wider range of demographic and other information about Auslan signers in Australia compared to earlier studies. This information is described in the sections below, ready to be used by Deaf Australia and other organisations for long-term advocacy and strategic planning.²

2. Methodology

2.1 Census design and development

The design and development of the 2022 Deaf Census stemmed from a series of questions identified in 2021 by Deaf Australia CEO Jen Blyth as relevant to Deaf Australia's core advocacy needs (see Appendix 1). These questions led to the design of a larger research project to collect both quantitative and qualitative data about Deaf, Deafblind and hard of hearing people's access and inclusion experiences. Although imperfect, an online survey was determined to be the most effective method for reaching a broad national audience in a short timeframe. As the concept of the ABS National Census is now well-known by Deaf people and communities in Australia, we adopted a census concept for this study, albeit with some major modifications. We did this to build on people's knowledge and awareness of how Census data is collected (e.g., online or paper form), what it can be used for (e.g., counting the number of Auslan signers in Australia), and why it is important (e.g., hard numbers about the number of Auslan signers in Australia long side other important demographic information).

The original questions we wanted to include are provided in Appendix 2. This is the set of questions that was approved by the ANU Ethics Committee (Protocol 2022/272). The final set of questions included in the 2022 Deaf Census are provided in Appendix 3. These questions were developed in collaboration with Lee Murray, a hearing linguist leading on development of the online Deaf Census using Qualtrics software, and the Deaf members of the research team, Jen Blyth, Darlene Thornton, and Gabrielle Hodge. To improve the cultural sensitivity of this method, we also worked with consultant representatives of more marginalised deaf communities, including d/Deaf and hard of hearing Muslim women and d/Deaf First Nations people who use Auslan (see Acknowledgements). The Deaf Census questions were first developed in written English and input into Qualtrics for design and

² This project was funded by an Information Linkages and Capacity Building (ILC) grant to Deaf Australia from the Australian Government Department of Social Services (Grant No. 4-G16F392). The ethical aspects of this research were approved by the ANU Human Research Ethics Committee (Protocol 2022/272). If you have any concerns or complaints about how this research has been conducted, please contact: Ethics Manager, ANU Human Research Ethics Committee: Telephone +61 2 6125 3427 or Email Human.Ethics.Officer@anu.edu.au

structure, with Auslan translations added once the Qualtrics design was formalised. A pilot survey was conducted with Deaf Australia staff to gauge their responses and improve or correct multiple pain points. The Auslan translations were then finalised. The 2022 Deaf Census was launched during the National Week of Deaf People (19-25 September 2022), with the ambitious aim of seeking responses from 2,000 people around Australia.

2.2 Census data collection

Participants could be anyone in Australia aged 13 and above who use Auslan or other signed languages. This group primarily includes people who are Deaf, Deafblind or hard of hearing. It also includes people who are hearing and use Auslan, such as hearing Children of Deaf Adults (CODA), hearing Auslan interpreters, or hearing parents of a deaf child. Participants aged 13-17 were included in the survey to provide information about the younger generation of signers who are currently approaching adulthood. The Deaf Census was not suitable for children under 13. All participants were invited to complete a 30-minute survey via an embedded link on the Deaf Australia website, with paper or screen-readable versions available on request.

Participants were recruited in collaboration with each of the state Deaf Societies and other peak organisations who work with Auslan signers in Australia. This included DeafBlind Victoria, who represent Deafblind Auslan signers in Victoria, and the national Australian Sign Language Interpreters Association (ASLIA), who represent hearing Auslan/English interpreters and Deaf Interpreters and Translators in Australia. Social media platforms such as Facebook and Twitter were also used to recruit participants. As the Deaf Census was anonymous, responses remain unidentifiable. No-one was pressured to participate, and each question had the option 'prefer not to say.'

Participation was indirectly incentivised by appealing to community organisation support: for each person who clicked 'submit' at the end of the Deaf Census, Deaf Australia donated AUD 1 on behalf of each participant to Deaf Youth Australia.³ Deaf Youth Australia is a subsidiary of Deaf Australia focused on creating leadership and cultural opportunities for young Deaf, Deafblind and hard of hearing people in Australia. It is well-regarded across Australia Deaf communities. This incentive was chosen to ensure that respondents knew that by completing the 2022 Deaf Census, they were helping their communities both directly (via financial donation) and indirectly (via data collection). Deaf Australia donated AUD 1,216 to Deaf Youth Australia. One person's responses were then removed from further analysis because they declared they were Polish and based in Poland.

³ Deaf Youth Australia: <https://deafyouthaustralia.com/>

2.3 Census data analysis

We received 1,215 valid responses by the Census cut-off date in mid-October 2022. This included 29 paper responses from the South Australia Seniors Club who generously printed out copies of the paper version of the Deaf Census and mailed them back to Deaf Australia. CEO Jen Blyth then diligently entered these responses into the online version. No responses or feedback were received in Auslan, even though respondents were given this option. The Qualtrics results were then consolidated by Lee Murray through testing with Qualtrics-generated reports, wrangling codes to clean up data for processing and analysis, and relabelling items where necessary. Responses to the 'something else' or 'other' categories for individual questions were simplified by recoding items wherever possible. This was done by Darlene Thornton and Gabrielle Hodge. For example, [Q23.3](#) asked respondents what access their workplace provides. This question elicited 85 free-text responses. We took as many responses as possible out of the 'other' category by coding them into relevant categories, e.g., 'funded by respondent.'

Murray then processed the Qualtrics data into Excel workbook crosstab data tables, focussing on the effect that the different categories of deaf people had on the answers that respondents gave to the rest of the questions. They also developed a CSurvey figure colour palette based on Deaf Australia's branding of primary blue, including hex numbers. Thus, this analysis methodically reports on the numerical totals and percentages of the data gathered. We determined this was the right approach for a project that intends to lay the foundations for other reports, projects, and planning based on it.

While the percentages themselves tell important stories, Deaf Census respondents also offered very interesting qualitative 'free text' responses to multiple questions. These were analysed and summarised by Hodge in conjunction with the quantitative data. There are two types of qualitative findings identified from the data: one type is where the weight of data indicates a 'substantial' percentage of the cohort thinks or experiences a particular thing; and the second type is where at least one person had some particular thought or experience. Both of these types of qualitative findings are important in the context of the 2022 Deaf Census. They serve to both quantify the relative importance of various aspects of experience, while also highlighting different individuals' experiences. Many of these qualitative responses aligned with insights provided during the in-depth interviews with Deaf, Deafblind and hard of hearing Auslan signers conducted by Hodge as part of the same research project.

After the Deaf Census data analysis was complete, the team discussed and identified methodological recommendations for the next iteration of the Deaf Census, which will ideally happen within five years. Future analysis of postcode and other data, alongside adopting the recommendations for improvements, will ensure we retrieve more

sophisticated data in future, which will improve the analyses that are possible while increasing the potential for us to compare the data with current or future ABS data.

In reading this report, it is important to understand that the 2022 Deaf Census respondents do not represent a random sample from the Australian population. This means that statistical inference to the general population is not immediately warranted. However, it is reasonable to assume that the quantitative findings may be broadly representative of the broader deaf population in Australia. If anything, these results likely underestimate the centrality of Auslan to Deaf, Deafblind and hard of hearing people in Australia, since the 2022 Deaf Census itself was online and responses were provided in written English. This means it was more likely to be completed by people more comfortable with this language and modality (a weakness that we comment further on in the next section about the limitations of the Deaf Census).

2.4 Census limitations

A major limitation was the Qualtrics software. Some of the questions were structured in a way that if someone said no to the first question, they would not be able to answer the follow up question. This led to missed opportunities to understand why a respondent might answer 'no'. For example, if someone responded 'no' to the question *"do you have a mental health diagnosis?"* (Q34.1) they were automatically moved on to the next topic. In the written survey responses, respondents gave answers such as *"because the doctor doesn't believe me"* or *"the doctor doesn't understand me."* So even though there was a separate, later question about any undiagnosed mental health conditions (Q35.1), it is possible that some respondents did not see a way to offer this information in the 2022 Deaf Census.

Another major limitation was that all Auslan videos were translated from written English scripts, which made Auslan question design unnecessarily difficult. Next time the Deaf Census questions should be created in Auslan first, and only then translated into English. This would ensure more time for discussing and evaluating different survey questions in terms of how they might be understood by respondents in Auslan, and what concepts might require better elaboration within the Auslan videos. An 'Auslan first' approach would also fit better with the concept of a Deaf-led project, resulting in a Deaf Census that is more culturally sensitive and appropriate. Qualtrics has since added a feature where survey participants can also add videos as responses to individual questions, which would have been a preferred option for many Deaf respondents to the 2022 Deaf Census, and should certainly be an option in future iterations.

There are also at least one hundred more possible categorisations that could be applied to the data collected. These include age, gender, location, sexuality, whether they went to university, whether they have a deaf child, what people in different states experience, and

so on. There was also no scope for the new 2022 Deaf Census data to be compared with existing National Census data in this current project. We also received feedback from some respondents who were concerned that the Census did not really target or include refugees, migrants, Deaf seniors, people in rural and remote regions, and/or children under 13 years. Future iterations certainly need to include these groups with more care. There was also an obvious issue with the question about being forced to speak or write English ([Q41.2](#)): ironically, we primarily asked respondents to write English in the 2022 Deaf Census for the free text responses, even though they had the option to provide responses in Auslan by filming and uploading a separate video.

Another oversight was made with the NDIS-related questions ([Q26.1-Q27.4](#)): we should have also asked if respondents wanted to provide more information about their interactions with the NDIS or NDIA, in the same way that we asked respondents if they wanted to provide more information about their interactions with Centrelink ([Q24.1-Q25.2](#)) and other topics. One effect was that the section on the NDIS does not have the same level of qualitative detail and commentary as the previous section on Centrelink. We accept this was a missed opportunity. However, as the 2022 Deaf Census was released around the same time as the National NDIS Review, we wanted to avoid too much overlap, in case people were fatigued with being asked the same questions twice in different contexts. We later realised that the qualitative data collected from the open-ended questions in the 2022 Deaf Census offered some of the most valuable information overall, so it would be useful to ensure these open questions are included for all key topics in future iterations.

In general, a longer timeframe than 12 months is required for this project, at least two years. More funding, staffing and resources are also needed to interpret the data more deeply and accurately. There is an enormous amount of work involved in design, implementation, analysis and reporting of Deaf Census data, and this will only increase with incorporating the recommendations for future improvements outlined here. The Deaf Census should be improved and repeated every five years, ideally alongside the ABS National Census.

In the following sections, each question from the 2022 Deaf Census is listed along with the tables detailing the relevant percentage results, and analysed in combination with the free text responses provided. Unless stated otherwise, the data presented below also does not include hearing respondents. There are also small variations in numbers because none of the questions were compulsory. In future, all questions can be broken down further by re-analysing the raw data with respect to other categories, e.g., age, gender, location, sexuality, ethnicity, etc. Due to privacy considerations, and to prevent the possibility of specific individuals being identified from their responses, exact respondent counts are not provided in public-facing materials beyond [Q2.1a](#) and [Q2.1b](#). Instead, percentages are reported. While this is an imperfect method, we would like to acknowledge that small

percentages are still meaningful and valuable in the context of marginalised communities facing extreme systemic pressures and language endangerment.

3. Findings

3.1 Self-identification of people who responded to the Deaf Census

Q2.1a and Q2.1b: The Deaf Census received 1,215 responses from deaf, deafblind, deaf disabled, hard of hearing and non-deaf people across Australia. Over half of respondents (52%) identified themselves as Deaf, while one third (30%) identified themselves as hearing. The remaining one fifth of respondents (17.6%) identified themselves as hard of hearing,

Response	Total (n)	Total (%)
Yes, I am Deaf	632	52.0%
No, I am hearing	369	30.4%
Yes, I am hard of hearing	136	11.2%
No, I describe it differently	33	2.7%
Yes, I am Deaf and disabled	27	2.2%
Yes, I am Deafblind	18	1.5%
Total	1215	100.0%

Table 1 People who responded to Deaf Census 2022 (n=1215)

Responses from the 2.7% of people who described themselves differently included: deaf people who use lowercase 'd'; Deaf and dumb; profoundly deaf (one person explained they do not agree with the term 'hard of hearing'); full deaf in one ear, and a little hearing loss in the other ear; Deafblind and disabled; Deaf and Low Vision; Hard of Hearing & Low Vision; Hearing Impaired; Deaf, Vision Impaired and have a disability; deaf and has disabilities (this person explained they do not like the word 'Disabled'); Hard of hearing and disabled (this person explained they cannot speak, as they have a loss of function of both speech and voice); Meniere's disease (explained as periods of significant deafness with periods post-surgery where the person is able to hear); and hearing loss in one ear

Responses from the 2.7% of people who described themselves differently also included non-deaf people such as CODA; Auslan users or family using signed language; hearing parents of a deaf or hard of hearing child; or hearing Auslan students. Some non-deaf people also reported they use Auslan as they are a non-speaking Autistic person; or because they have neurological differences and audio processing delays; or a voice disability. As this group 'No, I describe it differently' ($n=33$) contained a wide range of responses, and included many people who are deaf, this category is included in the category of 'Deaf respondents' ($n=846$) analysed in the following sections (Table 2).

Response	Total (n)	Total (%)
Yes, I am Deaf	632	74.7%
Yes, I am hard of hearing	136	16.1%
No, I describe it differently	33	3.9%
Yes, I am Deaf and disabled	27	3.2%
Yes, I am Deafblind	18	2.1%
Total	846	100.0%

Table 2 Deaf people who responded to Deaf Census 2022 ($n=846$)

Q3.1: Deaf respondents ($n=846$) were asked if they are the only Deaf, Deafblind, or hard of hearing person in their immediate family. Immediate family members were defined as including parents, guardians, siblings, spouse/partner, and children. Just over half of deaf respondents said they are the only Deaf, Deafblind, or hard of hearing person in their immediate family. Almost 45% of deaf respondents have at least one other deaf person in their immediate family, especially their spouse or partner (Table 3). It is most likely that respondents interpreted this question as applying to their current immediate family, such as their married/de facto family, rather than the family they were born into.

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846	632	18	27	136	33
Yes	55.1%	53.6%	38.9%	70.4%	64%	42.4%
No	44.8%	46.2%	61.1%	29.6%	36%	57.6%

Table 3 Immediate family (n=846)

Q4.1: Deaf respondents who are not the only deaf person in their family (n=609/846) were asked who else in their immediate family is Deaf, Deafblind, or hard of hearing (Figure 1).⁴ Note that this question allowed for respondents to give more than one answer. Nearly half (43%) have a spouse or partner who is also deaf. Nearly one third have a deaf sibling (32%), with half of that number having more than one deaf sibling (15%). Most responded they have two or three siblings, but a few responded up to four or five siblings. One-tenth have at least one deaf child (9.6%). Most responded they have only one deaf child, while slightly fewer responded they have two or more deaf children (see also Table 4).

⁴ The exact number of responses is provided for each question. For example, “**Q4.1** Deaf respondents who are not the only deaf person in their family (n=609/846)” means that we received 609 responses to this question from a pool of 846 people. However, there were some questions where respondents could select more than one response. In these cases, we record the total number of responses out of the total number of respondents immediately after the question number. For example, “**Q5.2** (n=885/846) Deaf respondents were asked if they identify as a disabled person or a person with disability” means that we received 885 responses to this question from a pool of 846 people, and that some people selected more than one response.

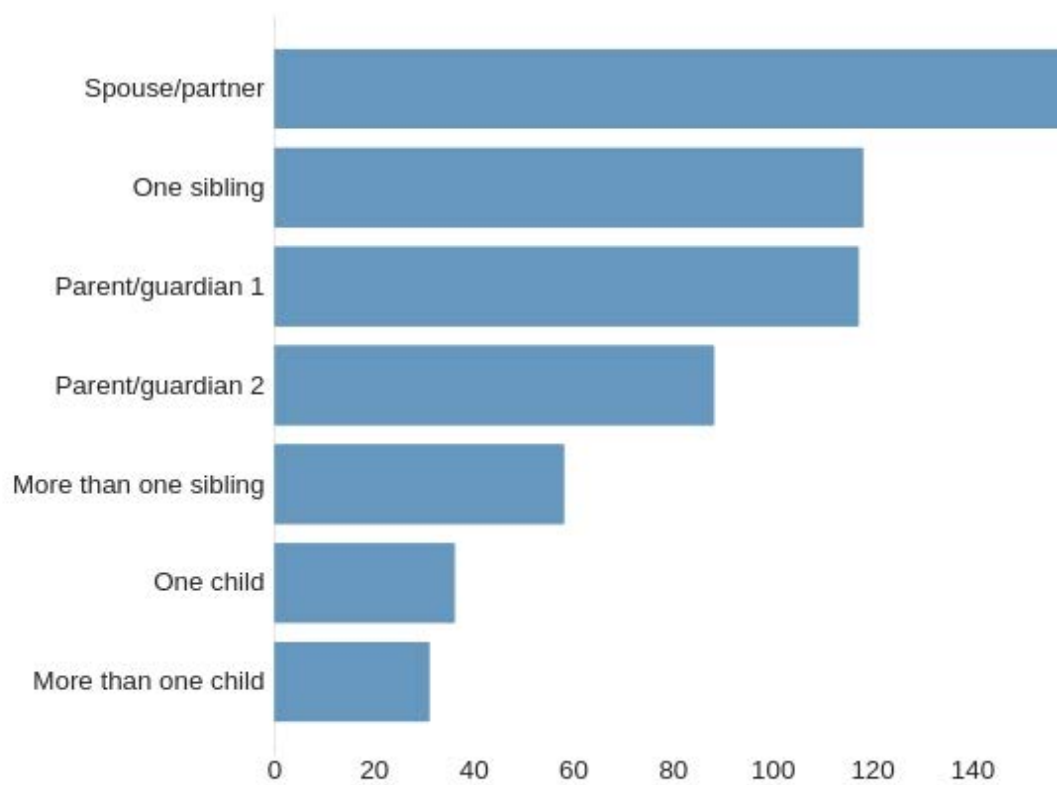


Figure 1 People in immediate family who are also deaf (n=609/846)

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Parent/guardian 1	13.8%	13.1%	11.1%	11.1%	12.5%	36.4%
Parent/guardian 2	10.4%	11.6%	0.0%	0.0%	5.9%	21.2%
One sibling	13.9%	15.3%	16.7%	11.1%	8.8%	9.1%
More than one sibling (type below)	6.9%	7.3%	11.1%	0.0%	4.4%	12.1%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Spouse/partner	18.8%	22.5%	27.8%	7.4%	7.4%	0.0%
One child	4.3%	3.6%	0.0%	0.0%	8.8%	3.0%
More than one child (type below)	3.7%	4.1%	5.6%	0.0%	0.7%	9.1%
None	2.0%	1.9%	5.6%	0.0%	0.7%	9.1%
Don't know	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Prefer not to answer	0.2%	0.3%	0.0%	0.0%	0.0%	0.0%

Table 4 People in immediate family who are also deaf (n=609/846)

Q4.2: Deaf respondents (n=846) were asked if anyone else is or was Deaf, Deafblind, or hard of hearing in their extended family, which includes cousins, uncles, aunts, grandparents, and other family members. We received 225 free text responses describing these relations. These included first and second cousins, aunts and uncles, great-aunts and great-uncles, grandparents and great-grandparents, and sons-in-law and daughters-in-law. Some respondents described having multigenerational deaf families, such as three, five or even eight generations that they have been able to trace. Some respondents specified family members who are Deaf, Deafblind or hard of hearing, and the main reasons for their deafness, such as Usher Syndrome, Waardenburg Syndrome, genetic deafness, congenital deafness, industrial deafness, and age-related deafness.

Others simply described having an all deaf family, or an all hearing family, or as being the only deaf person in their immediate and extended family. A few respondents described having hearing disabled children with Down Syndrome or Cerebral Palsy who use Auslan and/or Key Word Sign. Others described family members who are completely deaf in one ear, or even profoundly deaf, but still identifying as hearing. A few respondents also specified their biological family as hearing, or explained they were adopted or had adopted family members, which makes it hard to know their family history. One respondent explained they have Deaf people in their family three or four generations ago, who used

fingerspelling with their hearing children, who then later became grandparents of deaf children. One respondent requested that we not discount hearing CODA experiences, as they are native language users with a birthright to this culture and language.

Q5.1: Deaf respondents ($n=846$) were asked if they identify as a culturally Deaf or Deafblind person. Almost 80% responded they identify as culturally Deaf or Deafblind, while 12% responded they do not identify as culturally Deaf or Deafblind, or that they did not know, or preferred not to answer (Table 5).

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Yes - culturally Deaf	76.5%	90.2%	11.1%	77.8%	30.9%	36.4%
Yes - culturally Deafblind	1.7%	0.0%	77.8%	0.0%	0.0%	0.0%
No	11.9%	4.4%	5.6%	7.4%	41.9%	39.4%
Don't know	8.3%	4.3%	5.6%	14.8%	22.8%	21.2%
Prefer not to answer	1.7%	1.1%	0.0%	0.0%	4.4%	3.0%

Table 5 People identifying as culturally Deaf or Deafblind ($n=846$)

Q5.2: ($n=885/846$) Deaf respondents were asked if they identify as a disabled person or a person with disability. Respondents could select more than one response to this question. Approximately 60% reported they consider their deafness to be a disability, while an additional 13.8% reported that they identify this way also because they have other disabilities. Almost one quarter (24.6%) reported they do not consider their deafness to be a disability. Less than 6% reported that they did not know or preferred not to answer (Table 6).

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Yes - my deafness is a disability	60.3%	64.7%	50.0%	18.5%	55.1%	36.4%
Yes - I have other disabilities	13.8%	7.0%	50.0%	85.2%	19.9%	42.4%
No	24.6%	26.4%	11.1%	7.4%	20.6%	27.3%
Don't know	2.5%	1.7%	0.0%	3.7%	5.9%	3.0%
Prefer not to answer	3.4%	4.3%	0.0%	0.0%	1.5%	0.0%

Table 6 People identifying as a disabled person or person with disability (n=885/846)

Q5.3: All respondents (n=1,215) were asked if they wanted to provide more information about identifying as a culturally Deaf or Deafblind person and/or as a disabled person or a person with disability. We received 258 free text responses describing further detail about a range of experiences and identities. These responses can be loosely organised into the following categories: culturally Deaf people, culturally Deafblind people, bicultural Deaf people, neurodivergent culturally Deaf people, culturally Deaf disabled people, CODAs who identify as culturally Deaf, culturally Deaf people who feel that deafness is a disability, culturally Deaf people who do not identify as having a disability, deaf people who do not identify with Deaf culture, oral deaf people, hard of hearing people, people who feel they are half and half, people who feel their response depends on the context, and people who feel they do not fit in anywhere. Some respondents also offered questions and further thoughts. This information is summarised below.

Many respondents reported they identify as culturally Deaf on cultural and linguistic grounds, particularly in their preference and love for Auslan. Much of this revolves around a sense of belonging with other Deaf people and the Deaf community: how it feels natural to be with other Deaf people, to feel relaxed in the Deaf community, and/or to have Deaf parents; to use Auslan as a first or second language, and also to use other communication

resources such as text, email and the National Relay Service (NRS) instead of depending more on other people. However, these strong cultural identifications also relate to shared experiences of discrimination from living in a predominantly hearing world. These include experiences of not being allowed to sign as children, to not being given opportunities to learn to sign as children, and always having to advocate for basic needs into adulthood.

Some people reported they have felt culturally Deaf since birth or early childhood. Others reported they have had to learn about their cultural identity and find their way in the Deaf community as teenagers, young adults, or even older adults. One person reported they were welcomed into the Deaf community after they left high school, and that it felt like home straight away even though they had to learn Auslan as a second language. For them, the Deaf community is the right place: somewhere they can feel “whole, valued, respected.” It was also common for young people to report they grew up “oral” with a “hearing impaired” identity, then slowly transitioned to feel their belonging as a culturally Deaf person. This was especially the case if their hearing deteriorated over time. Some culturally Deaf people enjoy large social and employment networks with Deaf people, while others have only a few acquaintances and not many opportunities to sign, due to geographical location and/or other reasons such as those mentioned above.

Not everyone uses the uppercase Deaf convention. Some people use the lowercase ‘deaf’ terminology as they live and work primarily in the mainstream community, with English as their main language and only ad hoc participation in Deaf community events. One person said they do not like the label ‘hard of hearing’, which they associate with older people who have lost their hearing with age. Another person said that ‘deaf’ is less of a mouthful than ‘hard of hearing’. They also said using ‘deaf’ means their needs are more likely to be taken seriously, as hearing people tend to “dismiss hard of hearing as a minor inconvenience.” Older people who recently lost their hearing reported having a much harder time developing connections and affinities with other culturally Deaf people, especially since there are fewer opportunities for them to learn Auslan.

Several Deaf people with cochlear implants (CI) reported feeling unsure about identifying as culturally Deaf, especially if their CI enables them to hear and speak relatively well. Deaf people who did not grow up in the Deaf community also reported feeling unsure about their cultural identity. Others reported that Auslan is not their main language, but they still identify as culturally Deaf, while others rejected the notion that one must have grown up in the Deaf community in order to share a Deaf identity. As one person explained, “Just because I don’t have Deaf parents or am not part of any Deaf family generations, should not exclude me as being qualified as culturally Deaf.” They also felt that it is necessary for culturally Deaf people to embrace and support oral deaf or hard of hearing people, because it is not their fault that they were not exposed to the Deaf community and Deaf culture, and that positive moves to be included in the Deaf community should be embraced. In offering

this response, this person was careful to reiterate their acknowledgement of “Native Deaf signers” and also expressed concern that native signers are overwhelmed in numbers when it comes to preserving cultural identity and language.

As one Deaf person with CI explained, “I don’t sign all the time and live predominantly in the hearing world, but I identify more as Deaf than hard of hearing. Auslan is a part of me and I feel at home and more comfortable when I’m in the Deaf community.” Another Deaf person recalled the years they spent processing a lot of internalised shame and anger about being deaf, while meeting other strong Deaf adults. In time, they developed their Deaf identity, in that they have “learned to be more upfront about my needs, and to be proud of who I am. I don’t hide or try to integrate into the hearing world anymore. I still participate, but as *me*, and I feel so much more comfortable with myself.” Indeed, many people reported that being Deaf means having “access to both the hearing and the Deaf world.” These insights suggest that cultural capital and degree of hearing loss are two main factors influencing whether people feel belonging as a culturally Deaf person, and that Deaf culture and identity are extremely important for deaf people’s sense of belonging in the world.

Several Deafblind people reported sharing this affinity for a strong cultural identity, in ways that overlap and sometimes contradict responses from culturally Deaf people. One Deafblind person explained that while they identify with the Deaf community because of their Auslan, the sighted Deaf community often ignores their needs. This leads them to be more involved in the Deafblind community, as “Deaf and Deafblind people often do not think in similar ways.” The Deafblind community was described as distinct and different to Deaf culture, due to many factors, not least of which is the sensory experience of deaf blindness, either from birth or later in life. At least one Deafblind person reported they also have mobility issues and spend most of their time in a wheelchair.

Others reported bicultural identities. One Deaf Aboriginal person reported they want to see more support for bicultural Deaf people, especially teenagers, emphasising that their bicultural identity is very important to them. One Deaf person reported they are neurodivergent (autistic, ADHD, dyslexia) as well as Deaf. One CODA reported that even though they are not a Deaf person, they still identify with Deaf culture and feel they have “the disability ingrained from childhood.” Many Deaf respondents also identified as both Deaf and disabled, either because they have physical and/or mobility conditions such as Cerebral Palsy, a mental illness, have experienced harms such as language deprivation, and/or because they feel that deafness is a disability. Some people reported that their identity depends on where they are and who they are interacting with. For example, one person reported they do not identify as fully culturally deaf, but would not reject it entirely. Another person reported they identify as hard of hearing with their family and friends, but as deaf in the wider community, mainly because “most people are not deaf aware and do not have an understanding of what it means to be hard of hearing.”

Different reasons were provided for viewing deafness as a disability. These include viewing deafness as a linguistic disability, as most people in society are not able to communicate with Deaf signing people and also have limited understanding of Deaf culture. Others find that the political identification of deafness as a disability affords them greater recognition and value, especially as the social stigma around disability is not as negative as it used to be. They explained that it is important to recognise the complexity and nuances of identifying deafness with disability, especially when advocating for anyone who is deaf or hard of hearing, regardless of their cultural identification. Others have found they have come to accept that deafness is a disability through learning Auslan and interacting with other Deaf people. One person reported that it should not be an either/or decision, as we need more recognition of the dual nature of Deafness as Culturally and Linguistically Diverse (CALD) and disability, even though we have no legal recognition or support of our CALD status.

Alternatively, many culturally Deaf people reported that deafness is not a disability, rather it is mainstream society and social barriers that disable deaf people and view deaf people as disabled. This disabling effect was attributed to other people's lack of awareness or ignorance, and also the fact that deafness is invisible, or not a physical disability. One person reported that the NDIS constantly reminds them they are disabled through its ableist attitudes, such as having to repeatedly justify why they need funding for Auslan interpreters. Someone else said they do not like having to identify with disability, but it is necessary for Centrelink and NDIS in order to get funding. As they are proud to be Deaf, it is hard for them to talk about the bad parts of being Deaf. This was a common refrain among respondents. Another person pointed to the Deaf community as akin to other minorities who have limited access to the white and hearing status quo, and wondered what it would be like if Deaf people built everything. One person reported they function quite well in daily life, and therefore do not feel comfortable claiming a disability.

Quite a few deaf respondents reported they are not culturally Deaf, even if they have culturally Deaf friends and use Auslan with them. They provided several reasons for this position, including: coming from a hearing family and living in the hearing world for most of the time; attending an oral school where they were made to speak and lipread, so that now they mix in both deaf and hearing worlds; being a late deafened person, a person with acquired deafness, or a person with moderate deafness; and other members of the Deaf community making them feel they are not deaf enough to identify as culturally Deaf. Some deaf people reported they do not yet identify as culturally Deaf, but they are exploring this through learning Auslan, and may change their views if and when they become more confident with signing.

Some respondents reported they identify as oral deaf, even if they are profoundly deaf and use Auslan with their spouse and/or friends. The main reason given was being from a hearing family and not growing up learning Auslan or being involved in the Deaf community.

Some of these people feel as if they live between two worlds, not culturally Deaf but not hard of hearing either. One oral deaf person reported that while they feel deafness is a disability, they do not view it in a negative way. Another oral deaf person reported they have not been accepted by the Deaf community enough, and do not feel fluent enough in Auslan to identify as culturally Deaf.

Many respondents reported they identify as hard of hearing, especially those who are only just starting to learn Auslan and find their way in the Deaf community as adults. Some hard of hearing people reported not having opportunities to become culturally Deaf because they live in a rural area, or are otherwise isolated with no one around with whom they can practice Auslan, even if they would really love to be a part of the Deaf community and fluent in Auslan. Uncertainty about cultural identification and the strength of their relation to the Deaf community, and/or whether deafness is a disability, coupled with a sense of isolation, was a common theme for hard of hearing people new to the Deaf community.

One hard of hearing person reported they never previously considered their deafness as a disability, but questioned if their position comes from an internalised bias against disability in general. Another hard of hearing person reported they have been learning about their emerging Deaf identity through reading different resources, which they wish had been available when they were at school, so they could have been proud of their Deaf identity back then, not 30 years later. As this person reported, “better late than never.” Others reported they do not like the term ‘hard of hearing’ as it is “Americanised” and “patronising.” One culturally Deaf person reported that their father still uses the term ‘hearing impaired’ even though he has been profoundly deaf for thirty years.

Some respondents reported their cultural identity as ‘half and half’, meaning “halfway between the hearing culture and the Deaf culture.” One person reported that even though they are strongly bilingual most of their life, they also have a good level of hearing through CI and good speech, while another reported that technology enables them to enjoy music and podcasts, and to interact with some ease with hearing people. This makes them struggle with deciding which terms to use, and they therefore change terms depending on the circumstances. However, as they become more active in the Deaf community, they are realising this “middle” position is mainly due to technology, and now they are leaning towards identifying as Deaf. Such people reported more of a tension between Deaf culture and the hearing world. One person reported this was because they only recognised their hearing loss in their late twenties, and that others find it difficult to relate to their specific experience of hearing.

Some respondents reported feeling they do not “fit” anywhere. These respondents were mostly born hearing and lost their hearing in adulthood. However, they reported sharing many of the experiences of others in the Deaf community, and would like to engage more

with the Deaf community, but they feel their skills are not advanced enough and/or there are no Deaf people in their area. One person reported they also have family members who lost their hearing later in life, but all rely on speech. Coupled with the experience of losing one's hearing -- and therefore often also one's job, income, and social network -- these respondents conveyed deafness as an extremely isolating, difficult, and exclusionary experience.

One person reported, "it is as though one is living in the half light." Another person explained, "audiologists do not tell you how bad your deafness is, so my life imploded with depression and anxiety attacks before I knew that it was really bad...audiogram shows moderate to severe hearing loss in both ears, but in real life I am deaf." They reported that they contacted [a Deaf community service provider] about social groups, only to be told that "we [Deaf people] get in touch by word of mouth." They felt this advice was not helpful for getting them in touch with other Deaf people. Someone else said they feel culturally Deaf around other deaf people, but this is very infrequent. Most of the time they are around hearing people, none of whom have learned signed language and who keep forgetting this person is deaf. This makes it hard to belong: "Stuck in no man's land, belonging to neither group, feeling very lost."

Some respondents also have other disabilities. One person explained they have Low Vision and other disabilities in addition to hearing loss, and that nothing seems to accommodate them. They have not been able to learn Auslan, cannot hear speech, and captions are rarely large enough for them to see let alone read. Another person reported they were shut out of the Deaf community as a child because they have an intellectual disability. This person explained that, "Children who were Deaf and had Deaf parents were told not to play with me. My hearing parents were shut out as well."

Respondents also posed some interesting questions, such as "What does it mean to be culturally Deaf, compared with culturally hard of hearing? What do all of these terms mean?" Another reflected that there is a "mixed" group of culturally Deaf people who are not defined yet, at least partly on the grounds of whether one is totally deaf or partially deaf. They explained that partially deaf people may be able to mix more easily among hearing people, while totally deaf people feel disadvantaged in comparison. This person also expressed a wish to stop hearing about CI or new improved hearing aids, as such comments can downgrade totally deaf people into unimportant people. Their idea was left open as to how it can be defined culturally. Another respondent offered the final word though: "Keep Auslan alive for the generations."

3.2 Language preferences

Q6.1: (n=1,204/1,215) All respondents were asked if they use Tactile Auslan and whether it is their main language or not. 63.5% of respondents reported they do not use Tactile Auslan (Table 7). 16.1% reported yes, it is their main language. 19.5% reported yes, but it is not their main language. More deaf people (39.9%) than hearing people (25.7%) reported using Tactile Auslan, as either their main language or an additional language (Table 8). Given that 18 Deafblind people responded to this survey, and yet 16% of respondents declared it is their main language, it is possible that some respondents may have interpreted this question as asking if they know how to use Tactile Auslan.

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)	No, I am hearing
Yes, it is my main language	16.1%	28.2%	27.8%	18.5%	2.9%	3.0%	0.8%
Yes, but it is not my main language	19.5%	16.5%	33.3%	22.2%	16.9%	18.2%	24.9%
No	63.5%	54.0%	38.9%	59.3%	79.4%	75.8%	74.3%

Table 7 People who use Tactile Auslan (n=1204/1215)

	Total	Deaf total	Hearing
Total Count (All)	1.215.0	846.0	369.0
Yes, it is my main language	16.1%	22.8%	0.8%
Yes, but it is not my main language	19.5%	17.1%	24.9%
No	63.5%	58.7%	74.3%

Table 8 People who use Tactile Auslan (n=1204/1215)

Q7.1: (n=51/18) Deafblind respondents were asked how they prefer to communicate (Figure 2). Respondents could select more than one response to this question. Most reported they prefer to use Visual Auslan (77.8%), followed by written English (38.9%) and Tactile Auslan (33.3%). Other preferred communication methods include Braille, spoken English, Deafblind fingerspelling, simple English, sign-supported English, and some other self-reported methods such as writing information down in large print and socio-haptics (Table 9).

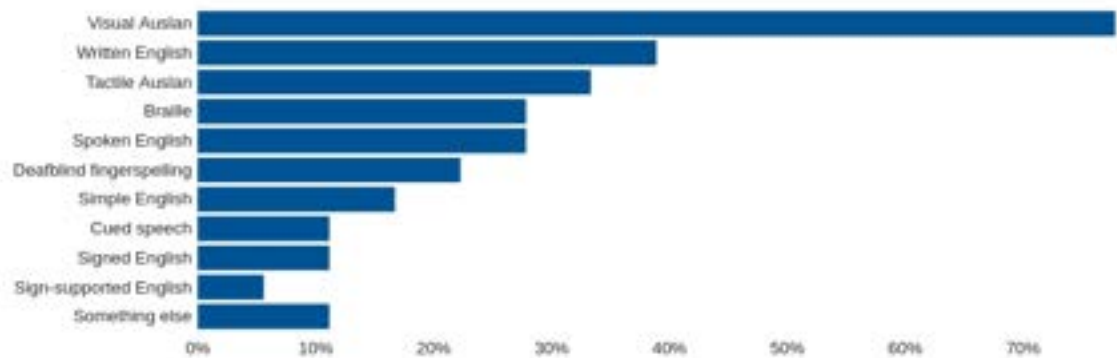


Figure 2 How Deafblind people prefer to communicate (n=18)

	Total	Yes, I am Deafblind
Total Count (All)	18.0	18.0
Visual Auslan	1.2%	77.8%
Tactile Auslan	0.5%	33.3%
Deafblind fingerspelling	0.3%	22.2%
Signed English	0.2%	11.1%
Sign-supported English	0.1%	5.6%
Cued speech	0.2%	11.1%
Written English	0.6%	38.9%

	Total	Yes, I am Deafblind
Simple English	0.2%	16.7%
Spoken English	0.4%	27.8%
Braille	0.4%	27.8%
I use communication methods not listed here (type below)	0.2%	11.1%

Table 9 How Deafblind respondents prefer to communicate (n=18)

3.3 Social demographics

Q8.1: (n=821/369) Hearing respondents were asked about their connection to the Deaf community (Figure 3). More than one response to this question was possible. The most common response was that they have a Deaf family member (42.3%), have two or more Deaf friends (40.9%), they work with one or more Deaf colleagues (30.3%), they are learning Auslan (31.2%), they are an Auslan interpreter (26.3%) or training to become an Auslan interpreter (13.0%), or they have one Deaf friend or colleague or are a carer for a Deaf person (4.4%) (Table 10).

We also received 48 free text responses about other services providing links to the Deaf community and 54 responses about other connections to the Deaf community. Hearing respondents primarily reported their connections as educators, community workers, and health practitioners. Educators include people working in early intervention, Teachers of the Deaf (ToD) and itinerant ToD, some of whom primarily use Signed English. Educators also include mainstream primary and high school teachers, scripture (Bible) teachers, and educators offering bilingual student support to deaf students. Some respondents teach English skills to deaf people, and dance skills to deaf students, or have Deaf business clients. Others reported working in the NDIS or community services Support Workers or Support Coordinators, and other disability services specific to the Deaf community, such as employment placement and support, and carers. Health practitioners include people working in paediatric speech pathology, occupational therapy, allied health, and mental health.

Other connections are primarily family and friends, including parents and close relatives of deaf or hard of hearing children and adults, grandchildren of Deaf grandparents, people with Deaf stepparents, partners of Deaf people, partners working with the Deaf community,

friends of Deaf people, hearing people with interpreter parents. Other links described include volunteers, retired interpreters, customer service workers, social media community groups, Auslan students, signed language linguists, employees of state Deaf societies and other Deaf organisations, language teachers teaching Auslan at primary schools, and hearing non-speaking people or people who lost their hearing at various points and learned Auslan, even if they later regained their hearing. One person described not really having a connection to the Deaf community.

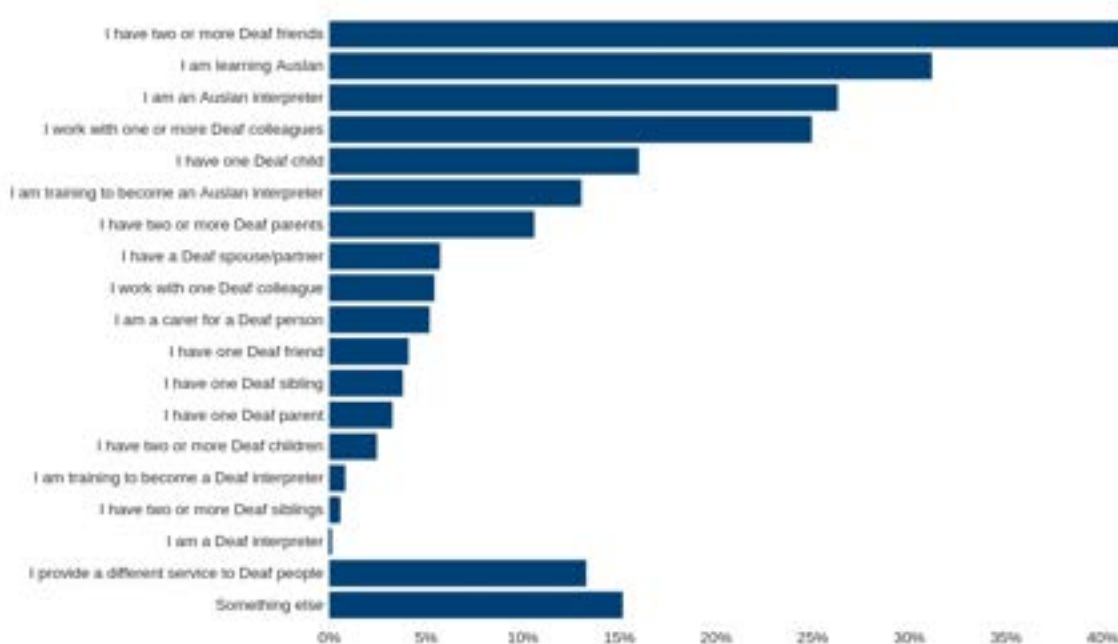


Figure 3 Hearing respondent's connection to Deaf community (n=821/369)

	Total	No, I am hearing
Total Count (All)	369.0	369.0
I have one Deaf parent	1.0%	3.3%
I have two or more Deaf parents	3.2%	10.6%
I have one Deaf sibling	1.2%	3.8%
I have two or more Deaf siblings	0.2%	0.5%

	Total	No, I am hearing
I have a Deaf spouse/partner	1.7%	5.7%
I have one Deaf child	4.9%	16.0%
I have two or more Deaf children	0.7%	2.4%
I have one Deaf friend	1.2%	4.1%
I have two or more Deaf friends	12.4%	40.9%
I work with one Deaf colleague	1.6%	5.4%
I work with one or more Deaf colleagues	7.6%	24.9%
I am a carer for a Deaf person	1.6%	5.1%
I am an Auslan interpreter	8.0%	26.3%
I am training to become an Auslan interpreter	4.0%	13.0%
I am a Deaf interpreter	0.0%	0.0%
I am training to become a Deaf interpreter	0.2%	0.8%
I am learning Auslan	9.5%	31.2%
I provide a different service to Deaf people (type below)	4.0%	13.3%
My connection to the Deaf community is not in this list (type below)	4.6%	15.2%

	Total	No, I am hearing
Other	369.0	369.0

Table 10 Hearing respondents' connection to Deaf community (n=821/369)

Q9.1: All respondents (n=1,215) were asked their age. Most respondents were aged 25 and 69 (Figure 4).

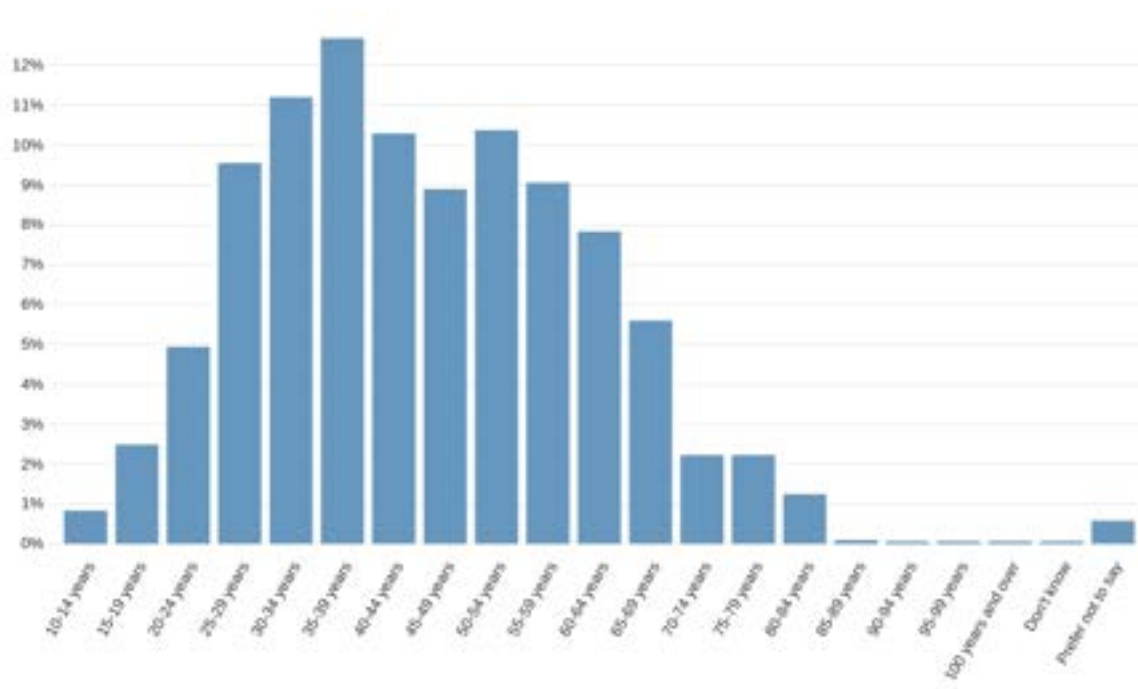


Figure 4 Age (n=1215)

Q9.2 (n=1,228/1,215) All respondents were asked how they describe their gender. More than one response to this question was possible. Most respondents reported they identify as woman or female (71.9%) and man or male (23.9%). A small minority of respondents reported they identify as non-binary (3.7%) or use a different term (0.9%). Other terms reported included transwoman, transgender, trans non-binary, queer, point, gender fluid, gender non-conforming, agender, and bloke (Table 11 and Table 12).

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)	No, I am hearing
Woman or female	71.9%	65.2%	66.7%	63.0%	74.3%	75.8%	82.9%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)	No, I am hearing
Man or male	23.9%	32.0%	33.3%	14.8%	18.4%	15.2%	13.0%
Non-binary	3.7%	1.9%	0.0%	14.8%	7.4%	3.0%	4.9%
I use a different term (type below)	0.9%	0.3%	0.0%	7.4%	1.5%	3.0%	1.1%
Don't know	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Prefer not to answer	0.7%	1.1%	0.0%	0.0%	0.0%	3.0%	0.3%

Table 11 Gender of respondents to Deaf Census (n=1215)

	Total	Deaf total	Hearing
Total Count (All)	1.215.0	846.0	369.0
Woman or female	71.9%	67.0%	82.9%
Man or male	23.9%	28.6%	13.0%
Non-binary	3.7%	3.2%	4.9%
I use a different term (type below)	0.9%	0.8%	1.1%
Don't know	0.0%	0.0%	0.0%
Prefer not to answer	0.7%	0.9%	0.3%

Table 12 Gender of respondents to Deaf Census (n=1215)

Q9.3 (n=1,246/1,215) All respondents were asked how they describe their sexual identity. More than one response to this question was possible. Majority of respondents (69.9%) reported they are straight/heterosexual, while almost 10% reported they are gay or lesbian. Other sexual identities reported include bisexual (6.6%), queer (6.3%), asexual (2.2%) or using a different term (2.1%) (Table 13 and Table 14). Other self-reported responses (n=23) include pansexual, sexually fluid, no term needed – all shapes and sizes, demisexual, bicurious, aromantic, straight not heterosexual, don't mind having women for fun that's it, married, and human.

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)	No, I am hearing
Straight (heterosexual)	69.9%	73.3%	44.4%	29.6%	72.1%	57.6%	68.6%
Gay or lesbian	9.1%	9.2%	11.1%	18.5%	5.9%	12.1%	9.2%
Bisexual	6.6%	4.0%	16.7%	3.7%	8.1%	3.0%	10.6%
Queer	6.3%	3.0%	0.0%	22.2%	8.1%	15.2%	9.5%
Asexual	2.2%	1.6%	0.0%	3.7%	3.7%	12.1%	1.9%
I use a different term (type below)	2.1%	2.2%	0.0%	11.1%	2.9%	3.0%	0.8%
Don't know	1.3%	1.3%	5.6%	3.7%	2.9%	0.0%	0.5%
Prefer not to answer	5.1%	5.9%	16.7%	14.8%	2.2%	6.1%	3.5%

Table 13 Sexual identity of respondents to Deaf Census (n=1246/1215)

	Total	Deaf total	Hearing
Total Count (All)	1.215.0	846.0	369.0

	Total	Deaf total	Hearing
Straight (heterosexual)	69.9%	70.4%	68.6%
Gay or lesbian	9.1%	9.1%	9.2%
Bisexual	6.6%	4.8%	10.6%
Queer	6.3%	4.8%	9.5%
Asexual	2.2%	2.4%	1.9%
I use a different term (type below)	2.1%	2.6%	0.8%
Don't know	1.3%	1.7%	0.5%
Prefer not to answer	5.1%	5.8%	3.5%

Table 14 Sexual identity of respondents to Deaf Census (n=1246/1215)

Q9.4 (n=1,213/1,215) All respondents were asked what sex they were recorded as at birth. Majority of respondents reported female (75%) or male (24.1%). A small minority responded another term (0.1%). Other terms reported include intersexed (Table 15 and Table 16).

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)	No, I am hearing
Female	75.0%	66.9%	61.1%	77.8%	80.9%	84.8%	86.2%
Male	24.1%	32.0%	38.9%	14.8%	19.1%	15.2%	13.3%
Another term (type below)	0.1%	0.0%	0.0%	3.7%	0.0%	0.0%	0.0%
Don't know	0.1%	0.0%	0.0%	3.7%	0.0%	0.0%	0.0%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)	No, I am hearing
Prefer not to answer	0.6%	0.9%	0.0%	0.0%	0.0%	0.0%	0.3%

Table 15 Sex recorded at birth (n=1213/1215)

	Total	Deaf total	Hearing
Total Count (All)	1.215.0	846.0	369.0
Female	75.0%	70.1%	86.2%
Male	24.1%	28.8%	13.3%
Another term (type below)	0.1%	0.1%	0.0%
Don't know	0.1%	0.1%	0.0%
Prefer not to answer	0.6%	0.7%	0.3%

Table 16 Sex recorded at birth (n=1213/1215)

Q9.5 (n=1,207/1,215) All respondents were asked if they were born with a variation of sex characteristics, sometimes called 'intersex'. Approximately 1% reported they were born intersex, of whom most are Deaf, Deaf and disabled, or people who describe themselves differently (Table 17 and Table 18).

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)	No, I am hearing
Yes	0.9%	1.1%	0.0%	7.4%	0.0%	3.0%	0.3%
No	91.9%	88.9%	83.3%	88.9%	96.3%	87.9%	96.5%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)	No, I am hearing
Don't know	3.0%	4.7%	5.6%	0.0%	0.0%	3.0%	1.1%
Prefer not to answer	3.5%	4.4%	5.6%	3.7%	2.2%	6.1%	2.2%

Table 17 Born with a variation of sex characteristics (n=1207/1215)

	Total	Deaf total	Hearing
Total Count (All)	1.215.0	846.0	369.0
Yes	0.9%	1.2%	0.3%
No	91.9%	90.0%	96.5%
Don't know	3.0%	3.8%	1.1%
Prefer not to answer	3.5%	4.1%	2.2%

Table 18 Born with a variation of sex characteristics (n=1207/1215)

Q10.1 (n=1,213/1,215) All respondents were asked if they identify as Aboriginal, Torres Strait Islander, or South Sea Islander. Almost 3% of deaf respondents reported yes, while only 1.4% of hearing respondents reported yes. No respondents identified as Torres Strait Islander (Table 19 and Table 20).

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)	No, I am hearing
Yes - Aboriginal	2.4%	3.0%	0.0%	0.0%	2.9%	3.0%	1.4%
Yes - Torres Strait Islander	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Yes - South Sea Islander	0.1%	0.0%	0.0%	0.0%	0.7%	0.0%	0.0%
No	97.4%	97.0%	94.4%	100.0%	97.1%	93.9%	98.4%

Table 19 Identify as Aboriginal, Torres Strait Islander, or South Sea Islander (n=1213/1215)

	Total	Deaf total	Hearing
Total Count (All)	1.215.0	846.0	369.0
Yes - Aboriginal	2.4%	2.8%	1.4%
Yes - Torres Strait Islander	0.0%	0.0%	0.0%
Yes - South Sea Islander	0.1%	0.1%	0.0%
No	97.4%	96.9%	98.4%

Table 20 Identify as Aboriginal, Torres Strait Islander, or South Sea Islander (n=1213/1215)

Q11.1 All respondents (n=1,215) were asked about their connections to Country. Responses include APY (Anangu Pitjantjatjara Yankunytjatjara) Lands, Bunnurong, Darkinjung, Dharawal, Gumbaynggirr, Kungarakana, Mutti Mutti, Wemba Wemba, Wiradjuri, Wurundjuri Woi-Wurrung, Yorta Yorta, and Yuin.

Q12.1 (n=1,181/1,215) All respondents were asked the postcode where they currently live (Figure 5 and Table 21). This map was created by coding postcode boundaries according to the Australian Statistical Geography Standard (ASGS) Remoteness Areas (ABS, 2021b). The

five categories of the ASGS were merged into three main categories: Urban (Major Cities of Australia), Regional (Inner Regional and Outer Regional Australia), and Rural (Remote and Very Remote Australia). Instances where postcode regions overlapped with two ASGS Remoteness Areas were assigned to the category that represented the most coverage. Note that five postcodes are absent from Australia Post records and could not be coded: 1916, 1989, 2270, 4905, 5403.

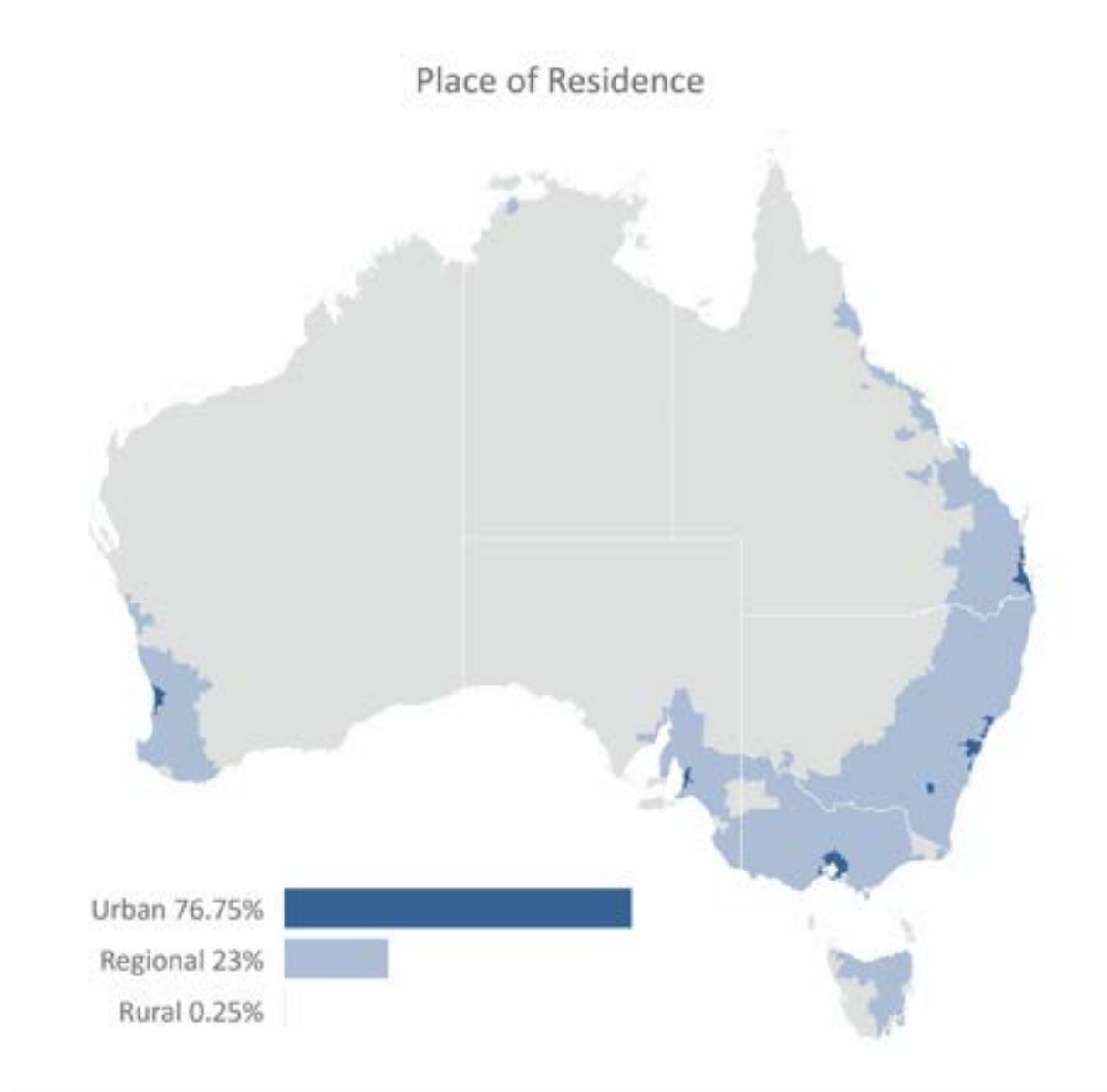


Figure 5 Where respondents currently live (n=1175)

	Urban	Regional	Rural	Total
Victoria	312	66	0	378

	Urban	Regional	Rural	Total
New South Wales	191	94	0	286
Queensland	208	64	1	273
South Australia	95	6	1	103
Western Australia	70	4	1	75
Australian Capital Territory	22	6	0	28
Northern Territory	0	19	1	20
Tasmania	0	12	0	12
Total	898	271	3	1175
Percentage	75.75%	23.0%	0.25%	-

Table 21 Where respondents currently live (n=1175)

Q13.1 (n=2,373/1,215) All respondents were asked about their ancestry. More than one response to this question was possible. Most respondents reported Australian ancestry (69%), followed by English (37%), Irish (21.8%) or Scottish (22.5%) ancestry. Fewer respondents reported German (8.2%), Italian (4.8%), Aboriginal (2.9%) or Chinese (2.1%) ancestry (Table 22 and Table 23). We received 325 responses describing a second ancestry and 81 responses describing a third ancestry. A small number reported not knowing their ancestry, including because they were adopted.

A wide range of other ancestries were reported including: African, American, American Indian, Argentinian, Ashkenazi Jewish, Austrian, Baltic, Barbadian, Basque, Belgian, British, Burmese, Burundian, Canadian, Chilean, Cornish, Croatian, Cypriot, Czech, Danish, Dutch, East European, Egyptian, Estonian, European, Filipino, French, Greek, Hazara, Hungarian, Icelandic, Indian, Indian-Fijian, Czech, Indigenous (Mapuche Andean Indian), Indigenous Chilean, Indonesian, Iraqi, Israeli, Japanese, Jewish, Jordanian, Kurdish, Latvian, Lebanese, Lithuanian, Macedonian, Malaysian, Maltese, Māori, Mauritian, Mediterranean, Mexican, Middle-Eastern, Native American (Salish), Nepalese, New Zealand, Nordic, Norfolk Island,

North-East Europe, North-West Europe, Norwegian, Palestinian, Pan-Asian, Pan-European, Papua New Guinean, Peruvian, Pitcairn Island, Polish, Polynesian, Portuguese, Romani, Russian, Samoan, Scandinavian, Serbian, Slovakian, Slovenian, South African, South Sudanese, Spanish, Sri Lankan, Swedish, Swiss, Taiwanese, Thai, Turkish, Ukrainian, Vietnamese, Welsh, West African, West European, Yugoslav, and Zimbabwean.

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)	No, I am hearing
Aboriginal	2.9%	3.0%	0.0%	3.7%	4.4%	6.1%	1.9%
Torres Strait Islander	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
South Sea Islander	0.2%	0.0%	5.6%	0.0%	0.7%	0.0%	0.3%
Australian	69.0%	71.0%	55.6%	51.9%	58.1%	63.6%	71.8%
English	37.0%	32.6%	50.0%	40.7%	36.8%	36.4%	43.9%
Irish	21.8%	19.5%	16.7%	29.6%	20.6%	18.2%	26.3%
Scottish	22.5%	21.5%	16.7%	29.6%	18.4%	30.3%	24.7%
Chinese	2.1%	2.2%	5.6%	0.0%	0.7%	0.0%	2.4%
Italian	4.8%	4.4%	5.6%	3.7%	4.4%	9.1%	5.1%
German	8.2%	7.9%	0.0%	7.4%	5.1%	9.1%	10.3%
Other ancestry 3 (type below)	26.8%	25.5%	38.9%	40.7%	31.6%	30.3%	25.5%

Table 22 Ancestry of all respondents (n=2373/1215)

	Total	Deaf total	Hearing
Total Count (All)	1.215.0	846.0	369.0
Aboriginal	2.9%	3.3%	1.9%
Torres Strait Islander	0.0%	0.0%	0.0%
South Sea Islander	0.2%	0.2%	0.3%
Australian	69.0%	67.7%	71.8%
English	37.0%	34.0%	43.9%
Irish	21.8%	19.9%	26.3%
Scottish	22.5%	21.5%	24.7%
Chinese	2.1%	1.9%	2.4%
Italian	4.8%	4.6%	5.1%
German	8.2%	7.3%	10.3%
Other ancestry 3 (type below)	26.8%	27.4%	25.5%

Table 23 Ancestry of all respondents (n=2373/1215)

Q14.1 All respondents (n=1,215) were asked what country they were born in. Most respondents (86.8%) were born in Australia, suggesting 13.2% of respondents were born outside Australia (Figure 6).

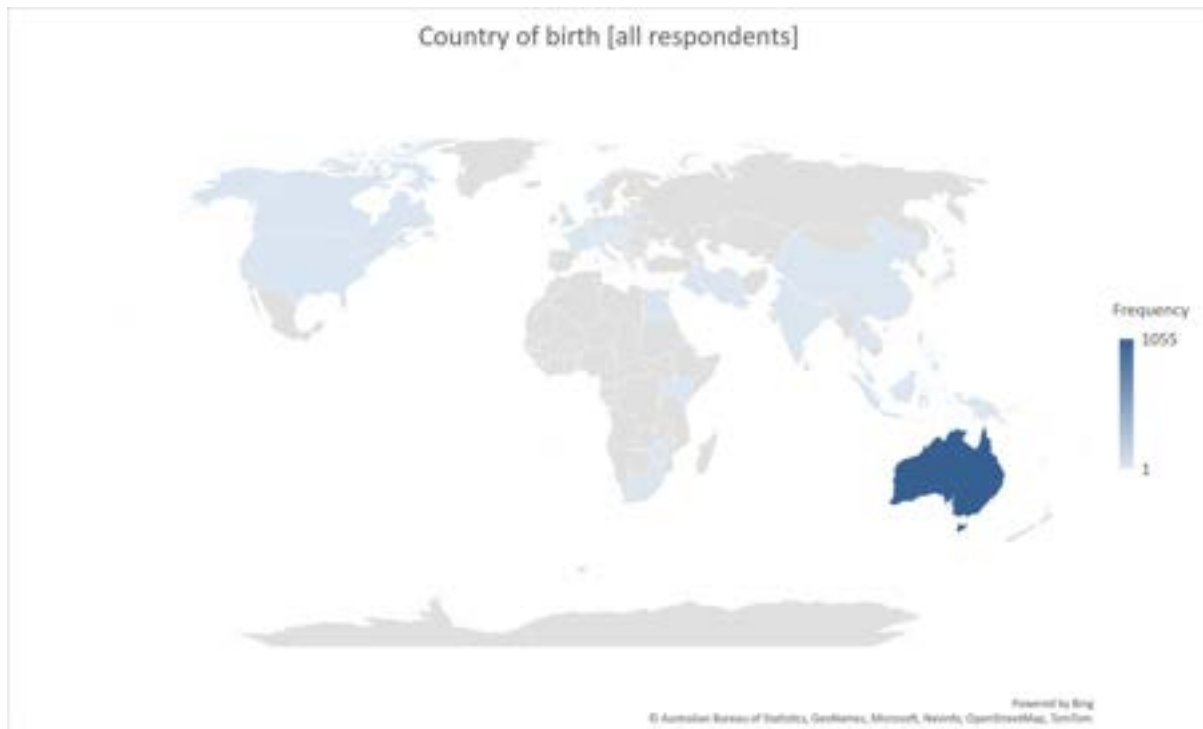


Figure 6 Country of birth of all respondents (n=1215)

Q15.1 Respondents born in Australia (n=1,023/1,215) were asked where they were born by postcode (Figure 7 and Table 24). This map was created by coding postcode boundaries according to the Australian Statistical Geography Standard (ASGS) Remoteness Areas (ABS, 2021b). The five categories of the ASGS were merged into three main categories: Urban (Major Cities of Australia), Regional (Inner Regional and Outer Regional Australia), and Rural (Remote and Very Remote Australia). Instances where postcode regions overlapped with two ASGS Remoteness Areas were assigned to the category that represented the most coverage. Note that five postcodes are absent from Australia Post records and could not be coded: 1916, 1989, 2270, 4905, 5403.



Figure 7 Where Australian-born respondents were born by postcode (n=1055)

	Urban	Regional	Rural	Total
Victoria	243	73	1	317
New South Wales	225	94	3	322
Queensland	100	54	7	161
South Australia	101	10	2	113

	Urban	Regional	Rural	Total
Western Australia	46	10	5	61
Australian Capital Territory	23	3	0	26
Northern Territory	0	5	2	7
Tasmania	0	16	0	16
Total	738	265	20	1023
Percentage	72.14%	25.9%	1.96%	-

Table 24 Where Australian-born respondents were born by postcode (n=1055)

Q16.1 Respondents born outside Australia (n=160/1,215) were asked how old they were when they came to Australia. Almost 40% arrived before age 10, while approximately 20% arrived before age 20 (Figure 8).

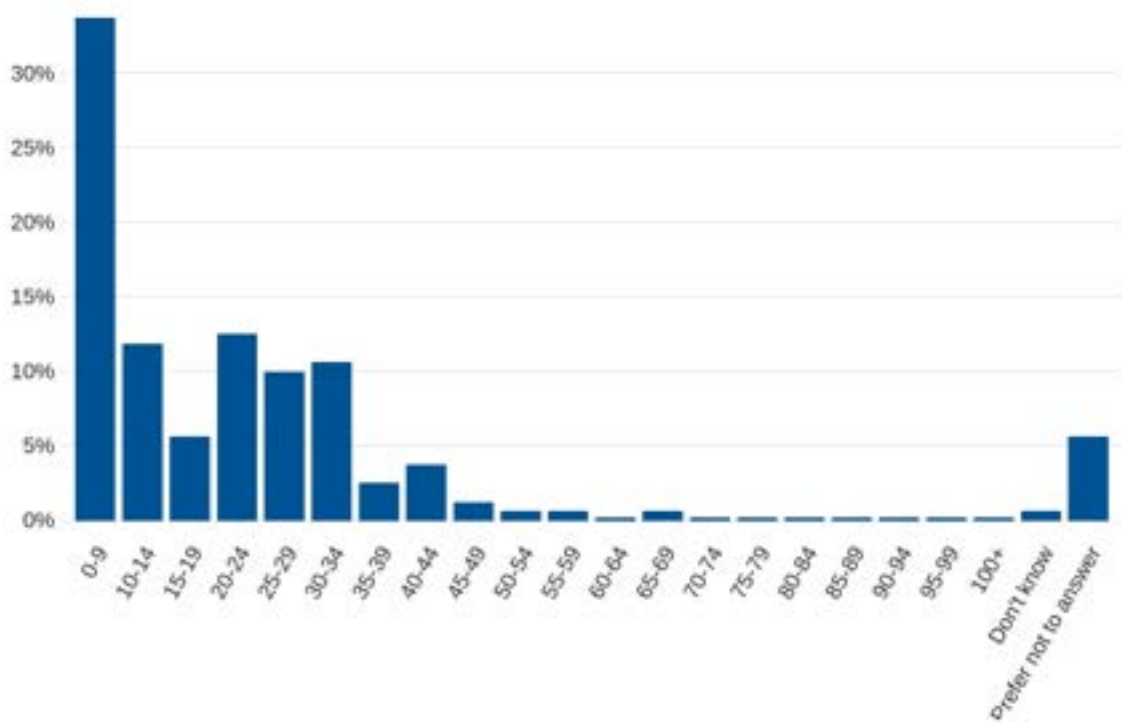


Figure 8 Age on arrival in Australia (n=160/1215)

Q17.1 Respondents born outside Australia ($n=160/1,215$) were asked if they came to Australia as an asylum seeker or refugee. Just over 1% responded they arrived as an asylum seeker or refugee (Table 25 and Table 26).

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)	No, I am hearing
Yes	1.2%	1.6%	0.0%	0.0%	1.5%	0.0%	0.8%
No	11.6%	10.6%	38.9%	11.1%	13.2%	12.1%	11.4%
Don't know	0.2%	0.3%	0.0%	0.0%	0.0%	0.0%	0.0%
Prefer not to answer	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%	0.5%

Table 25 Asylum seeker or refugee ($n=160/1215$)

	Total	Deaf total	Hearing
Total Count (All)	1.215.0	846.0	369.0
Yes	1.2%	1.4%	0.8%
No	11.6%	11.7%	11.4%
Don't know	0.2%	0.2%	0.0%
Prefer not to answer	0.2%	0.0%	0.5%

Table 26 Asylum seeker or refugee ($n=160/1215$)

Q18.1 ($n=1,211/1,215$) All respondents were asked if one or more of their parents came to Australia as an asylum seeker or refugee. A small minority (6.7%) responded that one or both of their parents came to Australia as an asylum seeker or refugee (Table 27 and Table 28).

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)	No, I am hearing
Yes - one of my parents	2.9%	3.6%	0.0%	7.4%	2.9%	0.0%	1.6%
Yes - both of my parents	3.8%	6.2%	5.6%	7.4%	0.7%	3.0%	0.5%
No - neither of my parents	90.5%	85.9%	94.4%	81.5%	94.9%	97.0%	96.5%
Don't know	1.4%	1.9%	0.0%	3.7%	0.7%	0.0%	0.8%
Prefer not to answer	1.2%	1.9%	0.0%	0.0%	0.0%	0.0%	0.5%

Table 27 One or more parent was an asylum seeker or refugee (n=1211/1215)

	Total	Deaf total	Hearing
Total Count (All)	1.215.0	846.0	369.0
Yes - one of my parents	2.9%	3.4%	1.6%
Yes - both of my parents	3.8%	5.2%	0.5%
No - neither of my parents	90.5%	87.8%	96.5%
Don't know	1.4%	1.7%	0.8%
Prefer not to answer	1.2%	1.4%	0.5%

Table 28 One or more parent was an asylum seeker or refugee (n=1211/1215)

Q18.2 (n=1,211/1,215) All respondents were asked if one or more of their grandparents came to Australia as an asylum seeker or refugee. A slightly greater minority (11.1%)

reported that one or more of their grandparents came to Australia as an asylum seeker or refugee (Table 29 and Table 30).

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)	No, I am hearing
Yes - grandparents on one side of my family	7.4%	8.9%	0.0%	14.8%	5.9%	3.0%	5.7%
Yes - grandparents on both sides of my family	3.7%	5.1%	5.6%	3.7%	4.4%	0.0%	1.4%
No - none of my grandparents	81.6%	76.4%	72.2%	74.1%	86.8%	90.9%	88.9%
Don't know	5.6%	7.0%	22.2%	7.4%	2.2%	6.1%	3.5%
Prefer not to answer	1.3%	2.1%	0.0%	0.0%	0.7%	0.0%	0.5%

Table 29 One or more grandparent was an asylum seeker or refugee (n=1211/1215)

	Total	Deaf total	Hearing
Total Count (All)	1.215.0	846.0	369.0
Yes - grandparents on one side of my family	7.4%	8.2%	5.7%
Yes - grandparents on both sides of my family	3.7%	4.7%	1.4%
No - none of my grandparents	81.6%	78.5%	88.9%

	Total	Deaf total	Hearing
Don't know	5.6%	6.5%	3.5%
Prefer not to answer	1.3%	1.7%	0.5%

Table 30 One or more grandparent was an asylum seeker or refugee (n=1211/1215)

Q19.1 (n=1,211/1,215) All respondents were asked if they identify as neurodivergent. One-tenth reported they identify as neurodivergent (11.9%), including 37% of Deaf and disabled people, 21.2% of people who describe it differently, 19.9% of hard of hearing people, 5.6% of Deaf people and 5.7% of Deafblind people (Table 31). A further one-tenth of all respondents reported they did not know if they are neurodivergent (12.8%). This could mean that they do not know what it means to be neurodivergent, or suspect they are neurodivergent but do not yet know (Table 32).

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)	No, I am hearing
Yes	11.9%	5.7%	5.6%	37.0%	19.9%	21.2%	17.3%
No	72.3%	78.6%	77.8%	37.0%	61.0%	66.7%	68.6%
Don't know	12.8%	12.2%	16.7%	25.9%	14.7%	12.1%	12.2%
Prefer not to answer	2.6%	3.2%	0.0%	0.0%	2.9%	0.0%	1.9%

Table 31 Identify as neurodivergent (n=1211/1215)

	Total	Deaf total	Hearing
Total Count (All)	1.215.0	846.0	369.0
Yes	11.9%	9.6%	17.3%

	Total	Deaf total	Hearing
No	72.3%	74.0%	68.6%
Don't know	12.8%	13.1%	12.2%
Prefer not to answer	2.6%	2.8%	1.9%

Table 32 Identify as neurodivergent (n=1211/1215)

3.4 Religion

Q20.1 All respondents (n=1,212/1,215) were asked if they are a member of a religious community. More than half of deaf respondents (n=846) reported they have no religion (54.4%). Less than one-fifth reported they are a member of a religious community (18.8%), while a further one-fifth reported they are religious but not part of a community (19.4%) (Table 33 and Table 34).

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)	No, I am hearing
Yes	18.8%	17.4%	27.8%	25.9%	21.3%	12.1%	20.1%
No - I am religious, but not part of a community	19.4%	22.0%	22.2%	18.5%	22.8%	21.2%	13.6%
No - I have no religion	54.4%	52.4%	38.9%	44.4%	50.0%	48.5%	61.5%
Prefer not to answer	7.1%	7.9%	11.1%	11.1%	5.9%	18.2%	4.6%

Table 33 Member of religious community (n=1215)

	Total	Deaf total	Hearing
Total Count (All)	1.215.0	846.0	369.0
Yes	18.8%	18.3%	20.1%
No - I am religious, but not part of a community	19.4%	22.0%	13.6%
No - I have no religion	54.4%	51.3%	61.5%
Prefer not to answer	7.1%	8.2%	4.6%

Table 34 Member of religious community (n=1215)

Q21.1 Respondents who reported having a religion (n=478/1,215) were asked to name their religion (Table 35 and Table 36). These included Catholic (12.6%), Other Christian (10.3%), Anglican (6.1%), and Jehovah's Witnesses (1.2%). Less than 1% reported Islam, Judaism, Hinduism, or Buddhism (Table 21a and Table 21b). We also received 84 free text responses describing other religions, including Agnostic, Bahá'í, Baptist, Church of Satan/Satanism, Church of Christ, Church of England, Church of Jesus Christ of Latter Day Saints, Deaf Church, Deaf Lutheran, Druid, Eastern Orthodox, Greek Orthodox, Uniting Church, Jainism, Jewish, Literature, Lutheran, Messiah Judaism, Methodist, Jesus, Orthodox, Pagan, Pentecostal, Presbyterian, Protestant, Reformed Baptist Church, Religious Society of Friends (Quakers), Roman Catholic, Salvation Army, Serbian Orthodox, Seventh-Day Adventist, Spiritual, Yazidi, Wiccan, and Yoga.

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)	No, I am hearing
Catholic	12.6%	14.1%	11.1%	7.4%	13.2%	12.1%	10.3%
Anglican	6.1%	6.0%	5.6%	18.5%	6.6%	9.1%	4.9%
Jehovah's Witness	1.2%	0.9%	0.0%	0.0%	0.7%	0.0%	2.2%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)	No, I am hearing
Other Christian	10.3%	10.3%	5.6%	14.8%	7.4%	9.1%	11.4%
Islam	0.7%	0.6%	0.0%	0.0%	2.2%	0.0%	0.3%
Judaism	0.4%	0.3%	0.0%	0.0%	0.7%	0.0%	0.5%
Hinduism	0.5%	0.8%	0.0%	0.0%	0.0%	0.0%	0.3%
Buddhism	0.5%	0.2%	0.0%	0.0%	0.7%	0.0%	1.1%
My religion is not listed here (type below)	7.1%	6.6%	27.8%	3.7%	12.5%	6.1%	5.1%

Table 35 Religion (n=478/1215)

	Total	Deaf total	Hearing
Total Count (All)	1.215.0	846.0	369.0
Catholic	12.6%	13.6%	10.3%
Anglican	6.1%	6.6%	4.9%
Jehovah's Witness	1.2%	0.8%	2.2%
Other Christian	10.3%	9.8%	11.4%
Islam	0.7%	0.8%	0.3%
Judaism	0.4%	0.4%	0.5%

	Total	Deaf total	Hearing
Hinduism	0.5%	0.6%	0.3%
Buddhism	0.5%	0.2%	1.1%
My religion is not listed here (type below)	7.1%	7.9%	5.1%

Table 36 Religion (n=478/1215)

Q21.2 Deaf respondents who are part of a religious community (n=155/846) were asked if they receive the support and services they need to participate in their religious community. Their responses were split down the middle: about half of deaf respondents who are part of a religious community reported yes, while the other half reported no (Table 37).

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Yes	8.2%	8.5%	11.1%	7.4%	5.9%	9.1%
No	8.3%	7.6%	16.7%	11.1%	11.0%	3.0%
Don't know	0.9%	0.9%	0.0%	0.0%	1.5%	0.0%
Prefer not to answer	0.9%	0.3%	0.0%	7.4%	2.9%	0.0%

Table 37 Deaf respondents receiving supports and services to participate in a religious community (n=155/846)

Q21.3 Deaf respondents who are part of a religious community (n=155/846) were asked if they are part of a Deaf group in their religious community. Their responses were split down the middle: about half of deaf respondents who are part of a religious community reported yes, while the other half reported no (Table 38). Unfortunately it is not possible to determine any overlaps from deaf people responding to Q21.2 and Q21.3.

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Yes	9.0%	10.3%	5.6%	11.1%	3.7%	6.1%
No	8.6%	6.3%	22.2%	14.8%	16.9%	6.1%
Don't know	0.6%	0.6%	0.0%	0.0%	0.7%	0.0%
Prefer not to answer	0.1%	0.2%	0.0%	0.0%	0.0%	0.0%

Table 38 Deaf respondents who are part of a Deaf group in their religious community (n=155/846)

Q21.4 Deaf respondents (n=846) were asked if they wanted to add more information about accessing their religion. We received 80 free text responses describing other information about accessing religion. These responses identified many gaps and barriers including: lack of Auslan interpreters for religious services, coupled with a general lack of interest from interpreters to work at religious events, especially for non-Catholic services such as Anglican, Jewish, Druid, and for Deaf people living in the country (Catholic churches and people in the city were said to have far more access); lack of captions or other assistive technologies such as large print for church services; lack of deaf awareness and therefore lack of understanding and inclusion within religious communities; lack of priests or other officiating people who sign Auslan; lack of translations of religious texts into Auslan (with the exception of Jehovah's Witnesses, who provide translations into 96 signed languages on their website); lack of other Deaf people at Church; lack of Deaf Bible and Quran study groups and/or community inclusion practices; lack of NDIS funding to cover interpreters for religious services over the year; and lack of support and inclusion from church for other reasons, particularly discrimination against deaf LGBTQIA+ people.

These responses also documented specific experiences, such as being the only Deaf person in the church, the existence and importance of Deaf churches, the existence of older people losing their hearing but not yet knowing enough Auslan to follow an interpreter, and the availability of NDIS funding meaning that Deaf people are now more likely to choose local services rather than previously accessible services. Overall, the importance of accessing one's religion was made clear. This is exemplified by a comment from one respondent who

explained they receive lots of general support and access from their specific religion, when others have failed and even when there was no money. They also said, “I know there’s a lot of negativity regarding my religion, but at the end of the day it’s my choice. Everyone has the right to make their own choices. So I thank you for putting my religion on the list even though people don’t like my religion.”

3.5 Employment

Q22.1 (n=970/846) Deaf respondents were asked their current employment status (Figure 9). More than one response was possible. Most reported they work full-time (35.7%) or part-time (19.5%). 13.9% reported they work casual hours, run their own business (10%), or do parenting/caring work at home (6%). 4.3% reported they are not working but looking for work. 14.1% reported they are retired, and 5.4% reported they are not working and not looking for work. Deafblind respondents were slightly more likely to be working part-time, casual hours, or running their own business.

A further 5.7% of deaf respondents described their employment status another way (Table 39). We received 47 responses describing other employment statuses. These included caring for elderly parents, casual tutoring, Disability Pension, student, have a business idea but not sure where to start, home worker, various jobs, injured on Workcover, just turned 14, looking for work as contract not being renewed, on leave, contract work, Pension, at school, self-employed, semi-retired, studying, taking time and looking for part-time work one day, temporary contract, volunteer, and working in the gig economy.

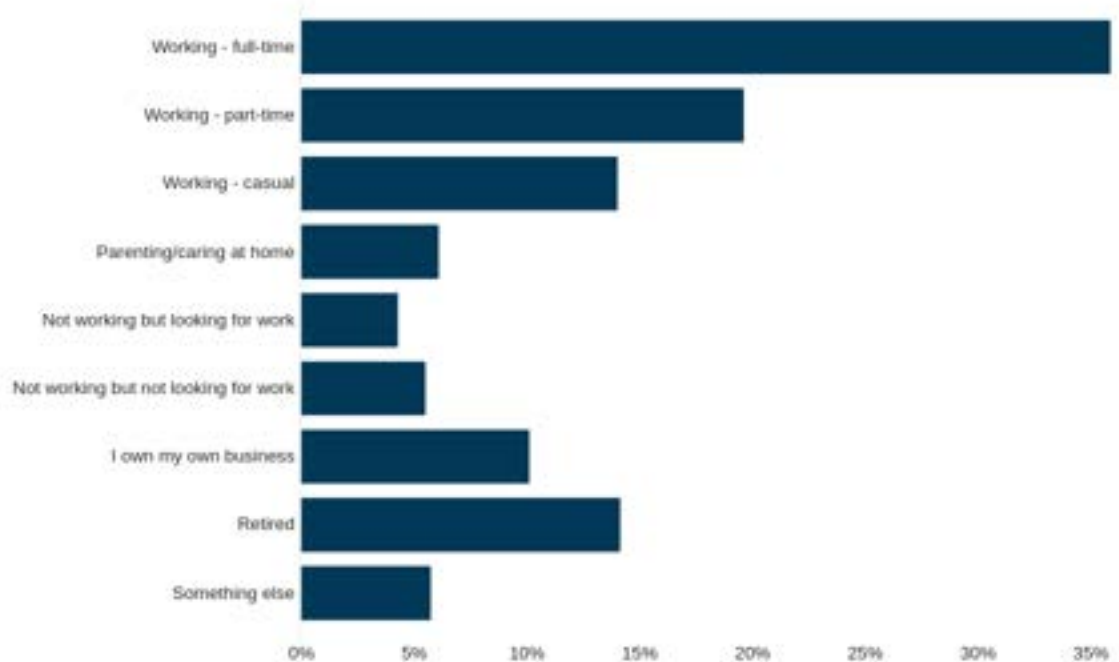


Figure 9 Current employment status of deaf respondents (n=970/846)

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Working - full-time	35.7%	39.2%	5.6%	14.8%	31.6%	18.2%
Working - part-time	19.5%	19.8%	33.3%	7.4%	18.4%	21.2%
Working - casual	13.9%	13.6%	22.2%	0.0%	16.9%	15.2%
I own my own business	10.0%	10.4%	16.7%	7.4%	5.9%	18.2%
Parenting/caring at home	6.0%	4.6%	5.6%	11.1%	8.8%	18.2%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Not working but looking for work	4.3%	3.5%	5.6%	11.1%	5.9%	6.1%
Not working but not looking for work	5.4%	3.8%	11.1%	33.3%	3.7%	18.2%
Retired	14.1%	14.6%	11.1%	14.8%	15.4%	0.0%
My employment status is not listed here (type below)	5.7%	4.0%	11.1%	18.5%	8.1%	15.2%

Table 39 Current employment status of deaf respondents (n=970/846)

Q23.1 (n=590/846) Deaf respondents who are currently working were asked to describe the main industry in which they work (Figure 10). The categories offered mirror those provided in the ABS Census. Most reported they work in education and training (31%), healthcare and social assistance (17%), administrative and support services (16%). Only 6% of deaf respondents report they work in professional, scientific, and technical services, 4% in retail trade, and 3% in interpreting and translation services. Deaf and disabled and Deafblind respondents represent the least employed category of deaf workers, with the least representation across multiple industries. Deaf and hard of hearing respondents are employed across a wider range of industries, suggesting they have comparably more options or opportunities (Table 40).

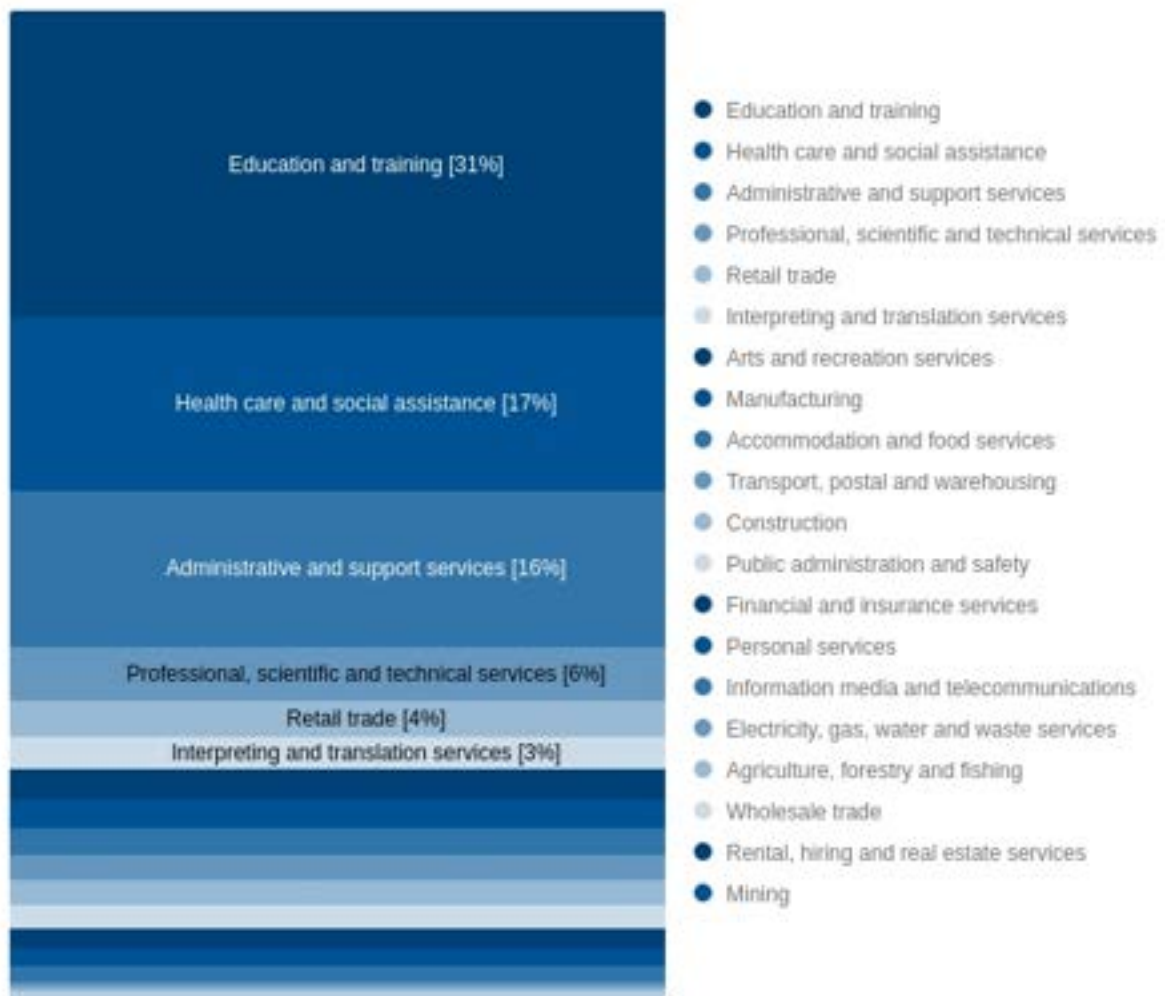


Figure 10 Main industry of deaf respondents who are currently working (n=590/846)

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Accommodation and food services	1.9%	1.7%	0.0%	0.0%	2.9%	3.0%
Administrative and support services	11.0%	12.7%	11.1%	0.0%	8.1%	0.0%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Agriculture, forestry and fishing	0.4%	0.3%	0.0%	0.0%	0.7%	0.0%
Arts and recreation services	2.1%	1.7%	0.0%	7.4%	2.9%	3.0%
Construction	1.8%	2.2%	0.0%	0.0%	0.0%	3.0%
Education and training	21.6%	23.3%	22.2%	7.4%	20.6%	6.1%
Electricity, gas, water and waste services	0.5%	0.5%	5.6%	0.0%	0.0%	0.0%
Financial and insurance services	1.4%	1.7%	5.6%	0.0%	0.0%	0.0%
Health care and social assistance	12.2%	11.7%	5.6%	3.7%	16.2%	15.2%
Information media and telecommunications	1.1%	1.1%	0.0%	0.0%	1.5%	0.0%
Interpreting and translation services	2.2%	2.1%	5.6%	0.0%	0.7%	12.1%
Manufacturing	2.0%	1.9%	0.0%	0.0%	2.2%	6.1%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Mining	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Personal services	1.3%	1.6%	0.0%	0.0%	0.7%	0.0%
Professional, scientific and technical services	3.9%	4.1%	0.0%	0.0%	4.4%	3.0%
Public administration and safety	1.7%	1.4%	0.0%	3.7%	2.2%	3.0%
Rental, hiring and real estate services	0.2%	0.2%	0.0%	0.0%	0.0%	3.0%
Retail trade	2.5%	2.5%	5.6%	3.7%	2.2%	0.0%
Transport, postal and warehousing	1.8%	1.7%	5.6%	0.0%	1.5%	3.0%
Wholesale trade	0.2%	0.0%	0.0%	3.7%	0.7%	0.0%

Table 40 Main industry of deaf respondents who are currently working (n=590/846)

Q23.2 Deaf respondents who are currently working (n=603/846) were asked if their workplace is accessible, and whether they are properly supported to do their job. Only 42.4% reported their workplace is accessible, with 21.2% reporting it is sometimes accessible. Deaf and disabled respondents were more likely than other groups to report their workplace is only sometimes accessible, compared to always accessible (Table 41).

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Yes	42.4%	47.5%	38.9%	7.4%	28.7%	33.3%
No	5.4%	4.7%	5.6%	3.7%	8.8%	6.1%
Sometimes	21.2%	20.4%	22.2%	18.5%	25.7%	18.2%
Don't know	1.1%	0.6%	0.0%	0.0%	2.9%	3.0%
Prefer not to answer	1.2%	1.3%	0.0%	0.0%	1.5%	0.0%

Table 41 Accessibility of deaf respondents' workplaces (n=603/846)

Q23.3 (n=1,735/846) Deaf respondents who are currently working were asked what access their workplace provides (Figure 11). More than one response to this question was possible. The most common mechanisms for access were in-person interpreting with hearing Auslan interpreters (40%) and Video Remote Interpreting (VRI) with hearing Auslan interpreters (29.7%); direct communication, i.e., working with other Deaf people (30.9%) and/or signing colleagues (24%); and open, closed, in-person or remote captioning services (41.7%). A small minority (6.3%) reported working with an in-person Deaf Interpreter or VRI in the workplace. Deafblind respondents were slightly more likely to report using Notetakers (11.1%) compared to other deaf respondents. Crucially, 6.1% of deaf respondents reported their workplace is not accessible to them, especially hard of hearing respondents and people who describe it differently (Table 42).

We received 85 responses describing other access to the workplace not listed here. These included using rich languages such as Auslan directly between colleagues, or sometimes more basic communication strategies such as Makaton and easy signed language. One respondent specified their workplace provides Auslan classes to all new staff. Responses also included deaf-specific adaptations to spoken language norms, such as lipreading, communicating face to face, speaking in a quiet and private office, making sure the hearing person has their attention before speaking, or being debriefed by hearing colleagues after meetings.

Other access tools mentioned included written text tools, such as pen and paper, email, writing on white board, text messages, email, speech to text on phone or iPad, and text-capable two-way radios. They also included assistive listening devices, such as hearing aids, Telecoil, automated live captions, noise-cancelling headphones, and specific apps such as Zoom or MS Teams. Respondents also reported using a number of visual strategies, such as sirens for safety and breaks, flashing doorbells, mirrors, repositioning desks, or even moving to a new office. One person specified an alert system that uses Fitbit watches for announcements. Another person working in customer service specified they have signs explaining to customers that they are deaf. An overall understanding from employers and colleagues was reported as important for access, as was working in a Deaf organisation or being a self-employed sole trader with EAF and/or NDIS. Others reported accessibility and inclusion training, Deafblind Awareness and/or Deafblind Communication training as improving their access at work.

Respondents reported specific positive experiences relating to access at work, such as patient and understanding colleagues who will take on telephone duties; clients who use Auslan; and workplaces which make adjustments when an employee cannot participate equitably as a standard practice. However, respondents also reported many more specific negative experiences. These ranged from dealing with rude and ignorant customers, and included information about the strategies that deaf employees use to combat these people, such as asking a colleague to take over instead; being the only deaf person in the workplace, or being a deaf person who lives and works in a rural area with no access to interpreters or sufficient internet for VRI; workplaces that will not update their technologies to enable access; employees having to use NDIS funds for their workplace access; employees not having enough EAF, rendering them unviable for employers; not having any workplace access at all, and coupled with managers who refuse to support, micromanage, and who are bullying and rude. Self-employed people also reported having to be “creative” with working out access solutions.

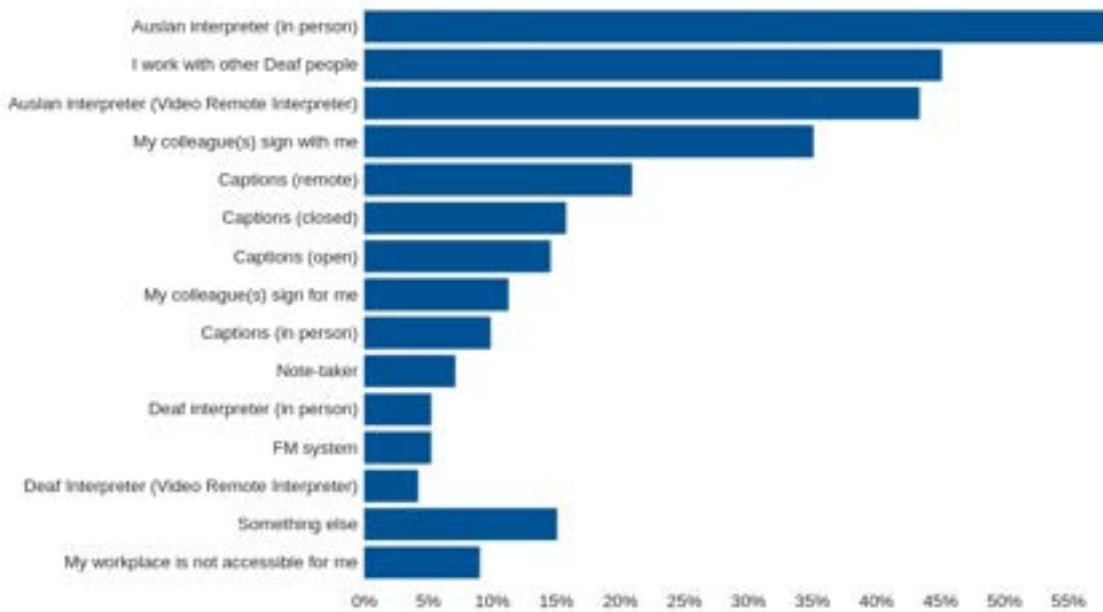


Figure 11 Access provided in the workplace for deaf respondents (n=1735/846)

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Auslan interpreter (in person)	40.0%	49.4%	55.6%	14.8%	7.4%	6.1%
Auslan interpreter (Video Remote Interpreter)	29.7%	36.7%	27.8%	7.4%	8.1%	3.0%
Deaf interpreter (in person)	3.5%	4.0%	16.7%	0.0%	1.5%	0.0%
Deaf Interpreter (Video Remote Interpreter)	2.8%	3.2%	5.6%	0.0%	1.5%	3.0%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
I work with other Deaf people	30.9%	37.8%	16.7%	7.4%	10.3%	9.1%
My colleague(s) sign with me	24.0%	29.1%	27.8%	7.4%	8.8%	0.0%
My colleague(s) sign for me	7.7%	9.2%	5.6%	0.0%	4.4%	0.0%
Captions (remote)	14.3%	15.0%	11.1%	11.1%	13.2%	9.1%
Captions (in person)	6.7%	7.4%	5.6%	0.0%	5.9%	3.0%
Captions (open)	9.9%	11.1%	11.1%	3.7%	5.1%	12.1%
Captions (closed)	10.8%	11.7%	11.1%	11.1%	8.1%	3.0%
Note-taker	4.8%	5.1%	11.1%	3.7%	2.2%	9.1%
FM system	3.5%	2.4%	11.1%	7.4%	7.4%	3.0%
Something else (type below)	10.3%	9.2%	16.7%	7.4%	12.5%	21.2%
My workplace is not accessible for me	6.1%	3.2%	0.0%	3.7%	19.1%	15.2%

Table 42 Access provided in the workplace for deaf respondents (n=1735/846)

Q23.4 Deaf respondents who are currently working (n=602/846) were asked if they have the Employment Assistance Fund. 39.2% reported they have the EAF, while 25.5% reported they do not have EAF. Worryingly, 6.4% reported they do not know about the EAF. Hard of

hearing respondents were the most likely group of deaf respondents to both not have the EAF, and also to not know about it (Table 43).

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Yes	39.2%	48.1%	44.4%	11.1%	10.3%	9.1%
No	25.5%	22.2%	22.2%	14.8%	39.0%	45.5%
I don't know what this is	6.4%	4.1%	0.0%	3.7%	18.4%	6.1%

Table 43 EAF support for deaf respondents currently working (n=602/846)

Q23.5 (n=160/846) Deaf respondents were asked if they wanted to add more information about access in their workplace. We received 160 responses describing additional information about access in the workplace. Respondents offered some positive experiences, such as feeling included and supported in the workplace by hearing employers and colleagues. Employers encouraging employees to learn to sign. Employers paying above the EAF caps for interpreters and captioning. Hearing colleagues protecting deaf staff from abusive customers in public-facing roles. Employers providing Auslan interpreters and other access needs on request. Employers having dedicated workspaces for Deaf staff. Respondents working in a sector that easily accommodates Deaf workers, such as a Deaf organisation of Deaf-oriented business. Deaf staff given career advancement opportunities. Workplaces transitioning from terms such as 'hearing impaired' to 'hard of hearing'. Workplaces initiating simple adjustments, such as providing quick summaries of key points at the end of meetings, meetings with circular seating arrangements, and providing noise-cancelling headsets for phone calls and online meetings. One respondent who is an UberEats driver reported working with their ConvoAus number on call forwarding for restaurants or customers to call them if needed.

However, respondents mostly offered information about negative experiences. Many of these related to the lack of funding provided via the EAF. The EAF cap has now increased from AUD 6,000 to AUD 12,000 per year, which may ease some of this stress. However, this is still not enough for many people. It was also noted that workplaces with more than one Deaf person often pool their EAF resources. Other issues with the EAF also remain, such as

the fact that New Zealand residents, Permanent Residents, and casual workers are not eligible for the EAF. Respondents also reported cases of employers refusing to continue with EAF processes because it entails too much paperwork, and employers abusing the EAF system to use the funding for their own benefit. One respondent said they had applied for the EAF, but JobAccess wanted to know why they had not gotten hearing aids as per their audiologist recommendations, suggesting that some JobAccess staff are overstepping their roles and policing deaf people's access requests.

Respondents also reported issues with employers and colleagues displaying audism and not respecting their access needs. For example, employers not asking about access requirements, or making deaf employees organise all their own access, sometimes at their own cost. Employers not actioning requests for visible alerts or updates to office equipment, or not booking interpreters or providing large print options when requested. Employers and colleagues not respecting individuals' communication preferences, such as pressuring hard of hearing or oral deaf people to use Auslan when they prefer to speak English, or pressuring deaf people to use captions when they prefer to use Auslan interpreters, or making the deaf person communicate via written notes all the time.

Respondents reported some meeting organisers not using mics in meetings when requested; not giving the Deaf person co-host status in Zoom so they can pin the interpreter on their screen; and also making last minute changes to meetings, which creates havoc with interpreter bookings, so that Deaf staff are forced to miss out or rely on highly inaccurate automated captions. Meeting organisers were also reported as being unaware of deaf space needs, the need for speakers to use a reasonable rate and tone, and allowing deaf audiences time to read presentation slides and think about the information provided before turning their attention back to the Auslan interpreter and/or taking in new information. Respondents reported that hearing colleagues often persist in using spoken English with each other, even if they know Auslan, or expressing desire to learn Auslan but then not putting in the effort, or assuming the deaf person can hear more than they actually can. Hearing colleagues from non-English speaking backgrounds were described as not making efforts to make themselves understood in alternative ways. Hearing colleagues using masks in the healthcare sector were described as not making efforts to remove these or find alternative methods of communication with deaf colleagues.

Deaf employees reported constantly missing out on work social opportunities, such as casual conversations and banter at work, and therefore feeling alone at work. Even when interpreters are booked, one deaf person said that their "colleagues look too scared to approach." Deaf respondents reported masking their needs in the workplace to the point of exhaustion, and at the cost of career progression. Deaf respondents reported a strong need for ongoing Deaf Awareness Training in most workplaces, although some reported their colleagues persist in being not deaf aware even if they have received this training.

Deaf respondents reported choosing to work in Deaf organisations or as sole traders to have greater control and access in their workplace. However, just because an organisation is a deaf organisation, this does not necessarily mean it is always accessible or deaf friendly. Deaf business owners expressed concern that their business is at the mercy of how much clients, suppliers and contractors can tolerate adjusting to their needs, especially relating to telephone use and any delays in communication that might arise from using different methods. These issues led one respondent to change their business model to reduce need for immediate communications, yet this decision also resulted in business isolation and a reduction in earnings.

Deaf respondents reported a strong need for better access in the country, as there is no support for deaf workers in small towns, and also in the TAFE sector. One respondent reported having to threaten reporting breaches of the DDA (Disability Discrimination Act) and DSE (Disability Standards for Education) to the Victorian Equal Opportunity and Human Rights Commission to get access, and even then their workplace is still not accessible. No respondents had anything good to say about employment consultants. Instead, they complained that employment consultants were patronising and wasted their time, often for years. Career progression was of particular concern in relation to access, since career progression often comes with greater access demands. When access needs are not fulfilled by employers, it causes extreme stress and higher likelihood of depression for all groups of deaf people.

3.6 Centrelink

Q24.1 (n=863/846) Deaf respondents were asked if they receive any payments from Centrelink. More than one response to this question was possible. Over half (56.6%) responded they do not receive any Centrelink payments. The most reported payment was the Disability Support Pension (20.9%), especially for Deafblind and Deaf and disabled respondents. We received 47 responses describing other Centrelink payment not listed here, including the Age Pension, Blind Pension, Carer's Allowance, Concession Card, Energy Supplement, Family Tax Benefits, Maternity Leave, NDIS Travel Subsidy, Paid Parental Leave, Pensioner Education Supplement, Rent Assistance, Single Parent Pension, and Youth Allowance (Table 44).

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Yes - Disability Support Pension	20.9%	19.1%	77.8%	59.3%	13.2%	24.2%
Yes - Aged Pension	8.5%	9.3%	5.6%	3.7%	8.1%	0.0%
Yes - Jobseeker	2.6%	1.7%	0.0%	7.4%	6.6%	0.0%
Yes - Austudy	0.6%	0.2%	0.0%	0.0%	1.5%	6.1%
Yes - Child Care Subsidy	4.4%	5.2%	0.0%	0.0%	2.2%	3.0%
Yes - a different payment (type below)	5.6%	4.3%	16.7%	3.7%	9.6%	9.1%
No	56.6%	58.9%	11.1%	25.9%	59.6%	51.5%
Don't know	0.5%	0.6%	0.0%	0.0%	0.0%	0.0%
Prefer not to say	2.4%	2.7%	0.0%	3.7%	0.0%	6.1%

Table 44 Payments from Centrelink to deaf respondents (n=863/846)

Q25.1 Deaf respondents who receive a Centrelink payment (n=306/846) were asked how positive were their interactions with Centrelink. The most common response was that their interactions are neutral (12.9%), positive (9.0%) or negative (5.9%). Deafblind and Deaf and Disabled people were more likely to respond that their interactions are very negative (Table 45).

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Very positive	3.0%	2.8%	11.1%	3.7%	2.2%	3.0%
Positive	9.0%	9.2%	22.2%	11.1%	7.4%	3.0%
Neutral	12.9%	11.9%	33.3%	22.2%	14.0%	9.1%
Negative	5.9%	6.3%	5.6%	14.8%	3.7%	0.0%
Very negative	3.4%	2.2%	11.1%	18.5%	3.7%	9.1%
Don't know	0.9%	0.9%	0.0%	0.0%	0.0%	6.1%
Prefer not to answer	1.1%	1.1%	0.0%	0.0%	0.7%	3.0%

Overall Stat Test of Percentages: 0.0693672658988271

Table 45 How positive are interactions with Centrelink for deaf respondents (n=306/846)

Q25.2 Deaf respondents who receive a Centrelink payment (n=306/846) were asked if they want to add more information about their interactions with Centrelink. We received 100 responses describing additional information about interacting with Centrelink. Almost all responses detailed negative experiences with Centrelink. Only a few described having no problems with Centrelink. This was because staff knew some basic Auslan, would use pen and paper, and/or were willing to pull down their facemask to enable clients to lipread.

In general, respondents reported that Centrelink does not understand deafness or disabilities. There are no translations of Centrelink information into Auslan, and the written English of Centrelink letters is too complex for most people to understand. Deaf respondents reported extensive experiences of audism, ableism and discrimination from Centrelink staff and disability employment services, including staff questioning their disabilities, and staff being difficult to understand without help. Centrelink staff were described as treating communication access as a hassle and an inconvenience. They were

also described as being disrespectful, rude, impatient, and leaving deaf clients without what they need.

Respondents reported that insensitive staff (including security guards) consistently misunderstand the issues and barriers experienced by deaf people and create stressful situations. For example, one person reported that Centrelink asked them to work more, without realising that it is difficult for deaf people to communicate at work, while another described how Centrelink removed their mobility allowance, claiming they could access alternative funds via the NDIS, even though this was not true. One person reported being on the wrong payment for almost ten years because it was impossible to fix it in the current system. Another reported having to repay Centrelink AUD 28,000 as they could not understand the written English conditions of the payments originally made to them.

Centrelink staff were also described as consistently forgetting to book Auslan interpreters, not knowing how to book them, or claiming to have booked them, only for deaf clients to arrive at an appointment with no interpreter available. Deaf respondents also complained that when Centrelink does book interpreters, they do not inform deaf clients which interpreter is booked, even though most deaf people would like to know the name of the interpreter who is booked and maintain personal agency within the interaction. Some deaf people are now told by Centrelink staff to book their own interpreter, and some deaf people would rather book their own interpreters via the NDIS. However, deaf respondents also reported that Centrelink staff have refused to work with their booked interpreter when they attended appointments.

Centrelink is generally hard to contact by telephone via the NRS, as it involves long waiting times and calls often drop out after being on hold for a long time. Deaf respondents reported Centrelink staff cutting off NRS calls, thinking that the NRS is a scam or prank call. It can often take three days to get through to someone. Respondents also expressed distrust with the stated NRS privacy policy, as this service involves third parties. Deaf respondents reported that when they try to call Centrelink via an Auslan interpreter or Convo Australia instead of the NRS, Centrelink staff often refuse to accept the call. This is a particular issue for rural deaf clients who use Auslan, as in-person interpreters are rarely available in their area.

Centrelink staff also constantly demand for deaf people to attend phone appointments, without providing alternative formats for communication. One deaf respondent described being made to talk on the phone to confirm they are deaf. Deafblind people reported Centrelink staff lacking any understanding of deafblind people, especially the fact there is no way to communicate with Centrelink if you cannot use the phone. One deafblind person also described being turned away by security because they were present with a guide dog,

and not being able to fill out extensive multi-page forms as they were inaccessible and not available in alternative formats.

Centrelink proposes that one way around the telephone barriers is for deaf and disabled people to nominate an authorised person who can call on their behalf. Some deaf respondents reported having a financial advisor, interpreter, or other nominee selected to make telephone calls on their behalf. However, major issues were reported about this system. One person described that this meant they were no longer able to lodge or make decisions on their own, and if they want to lodge a form or make a change, their nominee needs to approve it first. The authorised person system essentially forces deaf and disabled people to have a nominated Power of Attorney even when the only issue is Centrelink's lack of alternative communication formats.

When deaf respondents try to sidestep these issues by attending in person, Centrelink staff often still refuse to assist. This results in issues not getting fixed and payments getting cut, even after complaints have been lodged and escalated. One deaf respondent reported that their complaint was closed because Centrelink called them to discuss it, even though they had on their record not to call. The complaint was then closed because the deaf respondent did not answer the phone. Another respondent reported that the illegal Robodebt Scheme was an issue for them. The Centrelink app was also described as very restrictive, with not enough information and lack of support to ask questions, only via a bot. Several deaf respondents reported that the old TTY services were much better, as they offered a direct line of communication to Centrelink staff. Indeed, some Centrelink staff still insist that deaf clients call via TTY, even though this service no longer exists. TTY ceased existing over twenty years ago.

To improve Centrelink interactions, deaf respondents requested that Auslan interpreting services be made available and that Centrelink staff are trained in how to work with Auslan interpreters. They also requested that Centrelink staff receive ongoing Deaf Awareness Training, especially in relation to alternative communication formats, such as using pen and paper, and believing people when they say they are deaf and/or disabled. Other proposals included non-telephone methods for contact, such as a standard VRI service for Centrelink and other Government services, website chat, emails and/or text message services.

Respondents also called for Auslan translations of information, an online appointment booking service, and for vision impaired clients to be able to enlarge the screen. One respondent mentioned that when attending in person, that they would prefer to take a ticket and watch their number appear on a screen, instead of having to lipread a Centrelink staff member every time they call a client's name or number. This person reported Centrelink staff getting angry at them for not responding to their name being called, even though they had advised that they need an alternative method. Other proposals include

more support for disabled people to find suitable work, access to Centrelink assistance that is not means tested, and one week payments instead of fortnightly, to help them manage budgets more easily.

3.6 NDIS

Q26.1 Deaf respondents ($n=844/846$) were asked if they are eligible for NDIS (National Insurance Disability Scheme) funding. Overall, 77.8% responded they are eligible, while 13.4% responded they are not eligible. Almost 10% responded they do not know or prefer not to answer. Deafblind and Deaf and disabled people were most likely to respond that they are eligible. Hard of hearing people and people who describe it differently were most likely to respond they are not eligible, or do not know if they are eligible (Table 46).

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Yes	77.8%	85.3%	94.4%	96.3%	40.4%	63.6%
No	13.4%	10.6%	5.6%	3.7%	27.9%	18.2%
Don't know	7.4%	2.4%	0.0%	0.0%	31.6%	15.2%
Prefer not to answer	1.2%	1.4%	0.0%	0.0%	0.0%	3.0%

Table 46 Deaf respondents who are eligible for NDIS funding ($n=844/846$)

Q27.1 Deaf respondents ($n=657/846$) were asked if they have a NDIS Plan. Overall, most deaf people responded they have a NDIS Plan (73.5%). Hard of hearing people were least likely to have NDIS Plan (Table 47).

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Yes	73.5%	80.9%	94.4%	88.9%	36.8%	60.6%
No	3.5%	3.6%	0.0%	7.4%	2.9%	3.0%
Don't know	0.1%	0.0%	0.0%	0.0%	0.7%	0.0%
Prefer not to answer	0.5%	0.6%	0.0%	0.0%	0.0%	0.0%

Table 47 Deaf respondents who have a NDIS Plan (n=657/846)

Q27.2 Deaf respondents who have an NDIS plan (n=622/846) were asked if they are happy with their NDIS plan. Almost half responded they are happy with their NDIS Plan (47.4%), while almost 25% responded they were not happy, or did not know. Deafblind and Deaf and disabled people were most likely to respond that they were not happy with their NDIS Plan (Table 48).

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Yes	47.4%	53.5%	44.4%	48.1%	22.8%	33.3%
No	17.1%	17.7%	33.3%	33.3%	8.8%	18.2%
Don't know	6.9%	7.6%	11.1%	3.7%	3.7%	6.1%
Prefer not to answer	2.1%	2.1%	5.6%	3.7%	1.5%	3.0%

Table 48 Whether deaf respondents are happy with their NDIS Plan (n=622/846)

Q27.3 Deaf respondents who have an NDIS plan ($n=621/846$) were asked if they know how to change their NDIS plan. Half responded they know how to change their NDIS Plan (50%), while more than one-tenth responded they do not know how to change their NDIS Plan (12.1%). Another one-tenth responded they do not know if they know how to change their NDIS Plan or not, which could mean they have not yet tried or needed to do so (Table 49).

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Yes	50.0%	54.9%	72.2%	55.6%	26.5%	36.4%
No	12.1%	13.3%	5.6%	11.1%	6.6%	15.2%
Don't know	9.5%	10.3%	16.7%	14.8%	3.7%	9.1%
Prefer not to answer	1.9%	2.2%	0.0%	7.4%	0.0%	0.0%

Table 49 Whether deaf respondents know how to change their NDIS Plan ($n=621/846$)

Q27.4 Deaf respondents who have an NDIS plan ($n=621/846$) were asked if their NDIS Plan provides enough funding for Auslan interpreters. Almost half responded that their NDIS Plan provides enough funding (45%), while almost one-fifth responded it does not (18.6%). Deafblind and Deaf and disabled people were most likely to respond that their NDIS Plan does not provide enough funding for Auslan interpreters (Table 50).

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Yes	45.0%	53.5%	55.6%	37.0%	10.3%	27.3%
No	18.6%	18.5%	33.3%	33.3%	14.0%	18.2%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Don't know	8.9%	7.8%	5.6%	18.5%	11.8%	12.1%
Prefer not to answer	0.9%	0.9%	0.0%	0.0%	0.7%	3.0%

Table 50 Whether deaf respondents' NDIS Plan provides enough funding for Auslan interpreters (n=846)

3.7 Authorised person

Q28.1 (n=1,103/846) Deaf respondents were asked if they have an authorised person to call on their behalf for any of the listed services, such as Centrelink, JobAccess (EAF), NDIS, utilities (e.g., gas, electricity), insurance (e.g., health, car), banking, and other services. More than one response to this question was possible. Most deaf people responded they do not have an authorised person (57.8%). As for the deaf people who responded they do have an authorised person, the NDIS represents the most common service (16.9%), followed by Centrelink (11%), and Bank (8.3%) (Table 51).

We received 17 responses describing other services including GP, specialist doctor, hospital, Occupational Therapist, Aged Care, and anything else that requires phone use. One person explained they only have an authorised person on utilities because they live together with that person, not because of their deafness. Another person said that the ATO (Australian Taxation Office) staff ridiculed them.

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Centrelink	11.0%	11.2%	0.0%	22.2%	8.1%	15.2%
EAF (Job Access)	5.0%	5.9%	11.1%	3.7%	1.5%	0.0%
NDIS	16.9%	18.7%	27.8%	25.9%	8.1%	6.1%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Utilities (e.g., gas, electricity)	6.9%	7.3%	5.6%	14.8%	3.7%	6.1%
Insurance (e.g., health, car)	6.5%	7.0%	0.0%	18.5%	2.9%	6.1%
Bank	8.3%	8.9%	5.6%	22.2%	3.7%	6.1%
Other services not listed above (type below)	2.2%	2.1%	0.0%	3.7%	2.2%	6.1%
I don't know what this is	9.3%	7.6%	11.1%	14.8%	14.7%	15.2%
I do not have an authorised person	57.8%	56.0%	50.0%	48.1%	68.4%	60.6%
Prefer not to answer	6.5%	6.6%	16.7%	7.4%	4.4%	6.1%

Table 51 Deaf respondents with an authorised person to call on their behalf (n=846)

3.8 Education

Q29.1 (n=838/846) Deaf respondents were asked the highest level of education they have completed. The most common response was TAFE level (27.4%), graduate or professional degree (18.8%), and undergraduate degree (14.7%). Almost one-tenth responded they had completed some university, but no degree (6.9%). Only 1.5% responded they have completed a doctoral degree, but this was more likely to be hard of hearing people (3.7%) or people who describe it differently (6.1%). No Deafblind or Deaf and disabled people reported completing a doctoral degree (Table 52).

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Less than primary	0.8%	0.9%	0.0%	3.7%	0.0%	0.0%
Primary	2.2%	2.8%	0.0%	3.7%	0.0%	0.0%
Some secondary	9.2%	10.4%	0.0%	7.4%	5.9%	6.1%
Secondary	12.5%	13.8%	11.1%	7.4%	11.0%	0.0%
TAFE	27.4%	26.3%	55.6%	25.9%	29.4%	27.3%
Some university but no degree	6.9%	5.7%	5.6%	7.4%	10.3%	15.2%
University - undergraduate degree	14.7%	14.1%	0.0%	25.9%	18.4%	9.1%
Graduate or professional degree	18.8%	17.9%	22.2%	7.4%	20.6%	36.4%
Doctoral degree	1.5%	0.9%	0.0%	0.0%	3.7%	6.1%
Prefer not to answer	5.0%	6.0%	5.6%	11.1%	0.0%	0.0%

Table 52 Highest level of education completed for deaf respondents (n=838/846)

Q30.1 (n=834/846) Deaf respondents were asked if they are currently studying. Most responded they are not currently studying (77%). Less than one-tenth responded they are currently at university (7.2%), TAFE (6.9%), or a different educational institution (5%) (Table 53). We received 41 responses describing an educational institution not listed here. These

included private Registered Training Organisations, professional accreditation institutes, online courses, short courses, job training provider courses, Auslan classes, training for admission into medical school, and home school.

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Yes - at school	2.6%	3.0%	0.0%	3.7%	1.5%	0.0%
Yes - at TAFE	6.9%	5.7%	11.1%	3.7%	11.0%	12.1%
Yes - at university	7.2%	6.5%	0.0%	7.4%	11.0%	9.1%
Yes - at a different educational institution (type below)	5.0%	4.3%	5.6%	3.7%	5.9%	15.2%
No	77.0%	79.0%	83.3%	81.5%	69.1%	63.6%

Table 53 Deaf respondents currently studying (n=834/846)

Q31.1 (n=1,180/846) Deaf respondents were asked what access was or is available to them in primary school (Figure 12). More than one response to this question was possible. The most common response was that access was not or is not offered (34.6%), or that they used other access options not listed (21.5%). One-fifth of deaf people who use Auslan were offered Signed English (20.9%), but only one-tenth were offered in-person Auslan interpreters (13%) (Table 54).

We also received 180 free text responses describing access that was available in primary school but not listed here. These included bilingual and/or residential schools for deaf children where signing was permitted. It also included personnel such as signing ToDs, including Deaf signing ToDs, itinerant ToD (typically no more than one hour per week), mainstream teachers who were deaf aware or could sign and/or fingerspell, native Auslan teachers, Teacher Aides, Education Assistants and Support Attendance at Deaf signing schools. Some respondents attended deaf oral schools or deaf units in mainstream schools.

Specific strategies used by personnel included Sign Supported English, Total Communication and Auditory-Verbal Therapy. Deaf people reported relying on hearing aids, lipreading and oralism. Some people explained that as children they sat at the front of the classroom and had one-on-one time with the teacher if necessary. One person explained their mother maintained contact with the teacher every Friday afternoon to get the curriculum for the next week and cover it during the weekend. Another person complained about fake interpreters who did not respect ethical practices. Another person remembered their Deaf parents not being offered access to attend essential meetings and events at their child's primary school. Several responded they were not deaf in primary school, or studied overseas.

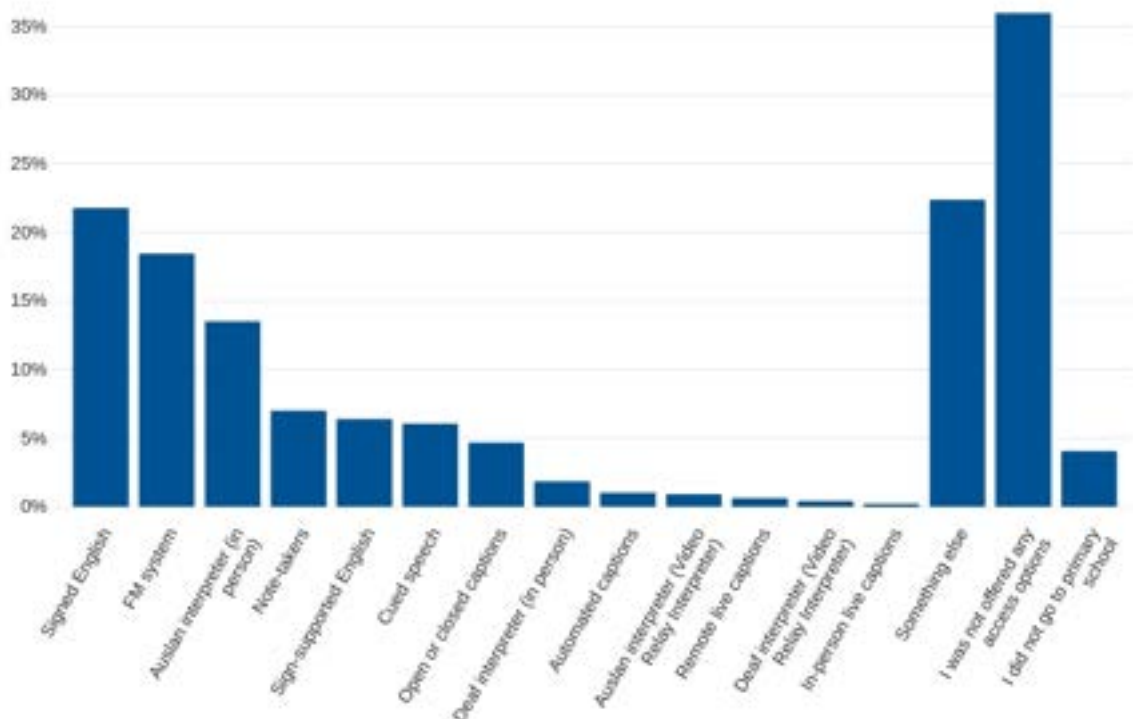


Figure 12 Access available in primary school (n=1180/846)

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Auslan interpreter (in person)	13.0%	15.5%	5.6%	11.1%	5.1%	3.0%
Auslan interpreter (Video Relay Interpreter)	0.8%	0.9%	0.0%	0.0%	0.7%	0.0%
Deaf interpreter (in person)	1.8%	2.1%	0.0%	3.7%	0.7%	0.0%
Deaf interpreter (Video Relay Interpreter)	0.4%	0.3%	0.0%	0.0%	0.0%	3.0%
Signed English	20.9%	26.1%	11.1%	11.1%	3.7%	6.1%
Sign-supported English	6.1%	7.0%	0.0%	0.0%	5.1%	3.0%
Cued speech	5.8%	6.6%	11.1%	0.0%	2.2%	6.1%
FM system	17.7%	18.4%	11.1%	18.5%	18.4%	6.1%
Note-takers	6.7%	6.6%	5.6%	7.4%	8.1%	3.0%
Remote live captions	0.6%	0.6%	0.0%	0.0%	0.7%	0.0%
In person live captions	0.1%	0.2%	0.0%	0.0%	0.0%	0.0%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Open or closed captions	4.5%	4.4%	5.6%	3.7%	5.9%	0.0%
Automated captions	0.9%	1.1%	0.0%	0.0%	0.7%	0.0%
My access options are not listed here (type below)	21.5%	21.0%	22.2%	33.3%	19.1%	30.3%
I was not offered any access options in primary school	34.6%	28.5%	44.4%	37.0%	55.9%	57.6%
Not applicable - I did not go to primary school	3.9%	4.4%	0.0%	11.1%	1.5%	0.0%

Table 54 Access available in primary school (n=1180/846)

Q31.2 (n=1,262/846) Deaf respondents were asked what access was or is available to them in secondary school (Figure 13). More than one response to this question was possible. The most common response was that access is or was not offered (31.3%) or that they used other options not listed (22%). One-fifth of deaf people who use Auslan were offered in-person or VRI Auslan interpreters (21.8%). Only 1.6% were offered in-person or VRI Deaf interpreters. A further 16.9% were offered Notetakers, especially Deafblind people (Table 55).

We also received 184 free text responses describing access that was available in secondary school, but not listed here. The personnel and strategies described were much the same as for **Q31.1**. However, there were many more mentions of unqualified interpreters, and non-signing Teacher Aides who were not helpful. Captions were used only rarely. Some people had a notetaker, but only for part of Year 11 and Year 12, or Year 12 only. One person described their notetaker as more of an assisted learning person who just repeated what the teacher said. Another person described only having a ToD in their mainstream school because their parents advocated for one every year, and extra support outside of class while

everyone else had religion or health subjects. One person reported they were only offered access for HSC exams, and that this only involved extra time, a separate room, and a dictionary. One person reported their school offered them an Education Assistant and tutoring, but their mother refused as she did not want her child identified as different. Others described having to relocate from their country home to the city to attend secondary schools with Auslan signing teachers.

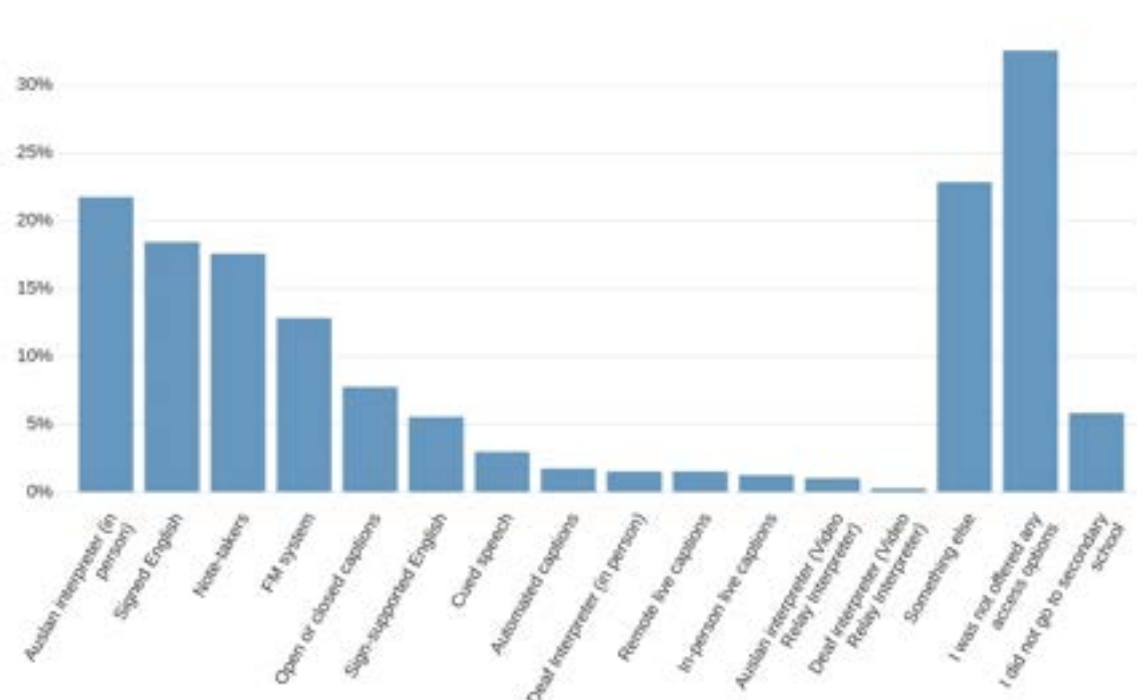


Figure 13 Access available in secondary school (n=1262/846)

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Auslan interpreter (in person)	20.9%	25.3%	16.7%	22.2%	4.4%	6.1%
Auslan interpreter (Video Relay Interpreter)	0.9%	0.9%	5.6%	0.0%	0.7%	0.0%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Deaf Interpreter (in person)	1.4%	1.6%	0.0%	3.7%	0.7%	0.0%
Deaf interpreter (Video Relay Interpreter)	0.2%	0.3%	0.0%	0.0%	0.0%	0.0%
Signed English	17.7%	22.2%	16.7%	14.8%	1.5%	3.0%
Sign-supported English	5.3%	6.3%	0.0%	0.0%	2.9%	3.0%
Cued speech	2.8%	3.3%	5.6%	0.0%	1.5%	0.0%
FM system	12.3%	13.1%	0.0%	11.1%	11.8%	6.1%
Note-takers	16.9%	18.2%	27.8%	11.1%	12.5%	9.1%
Remote live captions	1.4%	1.6%	0.0%	0.0%	1.5%	0.0%
In person live captions	1.2%	1.6%	0.0%	0.0%	0.0%	0.0%
Open or closed captions	7.4%	7.3%	11.1%	11.1%	8.8%	0.0%
Automated captions	1.7%	1.4%	0.0%	7.4%	2.2%	0.0%
My access options are not listed here (type below)	22.0%	21.7%	16.7%	25.9%	22.1%	27.3%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
I was not offered any access options in secondary school	31.3%	24.8%	33.3%	29.6%	56.6%	51.5%
Not applicable - I did not go to secondary school	5.6%	6.2%	5.6%	14.8%	1.5%	3.0%

Table 55 Access available in secondary school (n=1262/846)

Q31.3 (n=1,082/846) Deaf respondents were asked what access was or is available to them at TAFE (Figure 14). More than one response to this question was possible. The most common response was that in-person Auslan interpreters were offered (35.6%), followed by Notetakers (19%). Yet almost one-fifth responded they were not offered any access at TAFE (16.7%), especially hard of hearing people (Table 56). We also received 54 free text responses describing access that was available at TAFE but not listed here. Many respondents reported studying Auslan at TAFE and therefore access was not needed. Others reported being provided with captions and/or transcripts, or using MS Teams auto-captions. One person explained they often needed to remind teachers and students to slow down the pace and tone of their speech so that the automated speech-to-text software could capture their speech. Others reported using hearing aids, lip reading, microphones, or asking teachers and students to speak more slowly.

Some respondents used itinerant teachers once per month, or notetakers. One person reported using Tactile Auslan at TAFE. Others paid for their own interpreters because it was a non-government TAFE and the NDIS would not cover their needs. Another described having Auslan interpreters, but were often threatened by audit Disability Liaison Officers to cancel the interpreter if they were running late. Others had deaf teachers to help them one night per week with understanding literacy, while another had a private tutor after their TAFE classes with another deaf person. Some people did not know they could access support at TAFE.

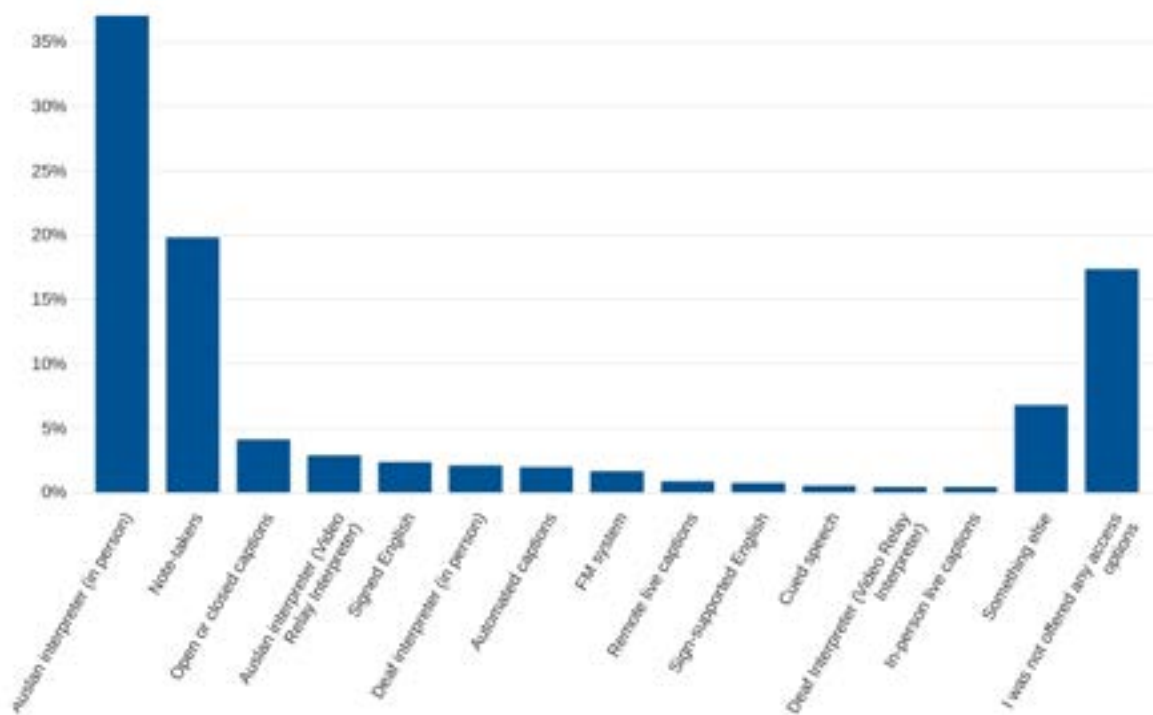


Figure 14 Access available at TAFE (n=1082/846)

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Auslan interpreter (in person)	35.6%	42.1%	61.1%	33.3%	7.4%	15.2%
Auslan interpreter (Video Relay Interpreter)	2.7%	3.5%	0.0%	0.0%	0.7%	0.0%
Deaf interpreter (in person)	2.0%	1.9%	0.0%	0.0%	2.2%	6.1%
Deaf Interpreter (Video Relay Interpreter)	0.4%	0.5%	0.0%	0.0%	0.0%	0.0%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Signed English	2.2%	2.7%	0.0%	7.4%	0.0%	0.0%
Sign-supported English	0.7%	0.8%	0.0%	0.0%	0.7%	0.0%
Cued speech	0.5%	0.5%	0.0%	0.0%	0.7%	0.0%
FM system	1.5%	0.9%	0.0%	7.4%	2.9%	3.0%
Note-takers	19.0%	20.3%	50.0%	25.9%	8.1%	18.2%
Remote live captions	0.8%	0.9%	0.0%	0.0%	0.7%	0.0%
In person live captions	0.4%	0.5%	0.0%	0.0%	0.0%	0.0%
Open or closed captions	3.9%	4.3%	5.6%	0.0%	3.7%	0.0%
Automated captions	1.9%	1.7%	0.0%	0.0%	2.9%	3.0%
My access options are not listed here (type below)	6.5%	5.7%	5.6%	7.4%	9.6%	9.1%
I am not/was not offered any access options at TAFE	16.7%	12.5%	16.7%	11.1%	36.0%	21.2%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Not applicable - I did not go to TAFE	33.1%	32.8%	16.7%	40.7%	35.3%	33.3%

Table 56 Access available at TAFE (n=1082/846)

Q31.4 (n=1,248/846) Deaf respondents were asked what access was or is available to them at university (Figure 15). More than one response to this question was possible. The most common response was in-person Auslan interpreters (25.5%), followed by Notetakers (24.7%). Almost one-tenth were not offered any access options (9.8%), especially Deafblind and hard of hearing people (Table 57).

We also received 57 free text responses describing access that was available at university but not listed here. Some respondents reported their university lecturers were deaf and/or knew a signed language (including signed languages other than Auslan), or that they were provided with extra tutorials and study support. One person reported being supported with Tactile Auslan and academic support. Others described relying on other students if they missed information, or existing devices provided through the NDIS such as hearing aids or Roger pens. Many reported that signed language interpreters were only provided after extensive advocacy efforts. Some respondents were provided with transcripts of recorded lectures. One person received tape recordings via correspondence study. Assessment accommodations were also provided, such as extra time on exams, alternative assessments, and separate rooms.

Many respondents described having to advocate and fight for any access and support they received, even basic support such as Auslan interpreters and notetakers. This could take many years. Others reported being offered Auslan interpreting services, even though they used Signed English, while others were told there were no interpreters or captions available, only notetakers. Disability Liaison Officers were heavily criticised as having no idea how to provide access for deaf and/or disabled students. Respondents also reported only being offered access as postgraduate students, with no access for undergraduate studies.

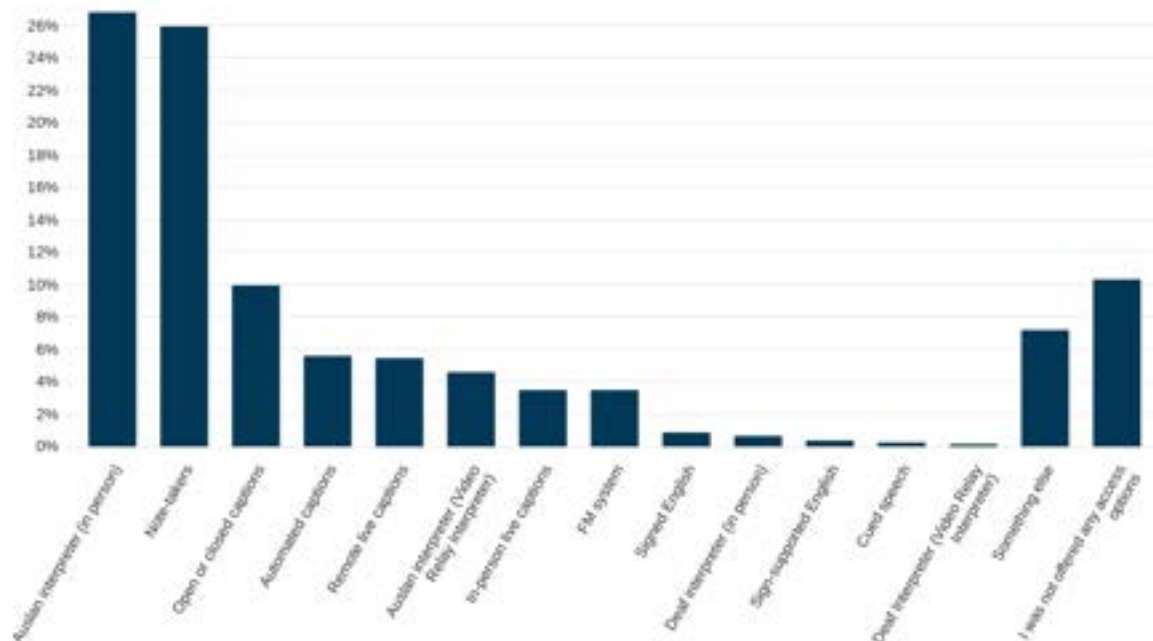


Figure 15 Access available at university (n=1248/846)

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Auslan interpreter (in person)	25.5%	31.3%	16.7%	14.8%	5.9%	9.1%
Auslan interpreter (Video Relay Interpreter)	4.4%	4.9%	0.0%	0.0%	4.4%	0.0%
Deaf interpreter (in person)	0.6%	0.8%	0.0%	0.0%	0.0%	0.0%
Deaf Interpreter (Video Relay Interpreter)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Signed English	0.8%	0.8%	0.0%	3.7%	0.7%	0.0%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Sign-supported English	0.4%	0.5%	0.0%	0.0%	0.0%	0.0%
Cued speech	0.2%	0.3%	0.0%	0.0%	0.0%	0.0%
FM system	3.3%	2.1%	0.0%	11.1%	7.4%	6.1%
Note-takers	24.7%	28.0%	11.1%	25.9%	14.0%	12.1%
Remote live captions	5.2%	5.4%	0.0%	11.1%	4.4%	3.0%
In person live captions	3.3%	2.8%	0.0%	0.0%	5.9%	6.1%
Open or closed captions	9.5%	9.0%	0.0%	22.2%	11.0%	6.1%
Automated captions	5.3%	4.7%	0.0%	11.1%	7.4%	6.1%
My access options are not listed here (type below)	6.9%	5.5%	5.6%	7.4%	8.8%	24.2%
I am not/was not offered any access options at university	9.8%	4.9%	22.2%	7.4%	29.4%	18.2%
Not applicable - I did not go to university	47.6%	50.2%	55.6%	55.6%	37.5%	30.3%

Table 57 Access available at university (n=1248/846)

3.9 Health

Q32.1 (n=841/846) Deaf respondents were asked if they have been diagnosed with any physical health conditions (Table 58). Deaf and disabled people, Deafblind, hard of hearing people, and people who describe it differently were more likely to respond that they have been diagnosed with physical health conditions compared to Deaf people.

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Yes	40.0%	32.4%	72.2%	81.5%	56.6%	63.6%
No	52.2%	59.2%	27.8%	7.4%	36.0%	36.4%
Don't know	3.5%	4.0%	0.0%	3.7%	2.9%	0.0%
Prefer not to answer	3.7%	3.8%	0.0%	7.4%	3.7%	0.0%

Table 58 Diagnosed with any physical health conditions (n=841/846)

Q32.2 Deaf respondents with a diagnosed physical health condition (n=337/846) were asked if they were provided with access to physical health support and care as a Deaf, Deafblind, or hard of hearing person who uses Auslan (Table 59). Their response was split down the middle: about half of deaf respondents who have been diagnosed with a physical health condition reported yes, while the other half reported no. Deaf and disabled people and hard of hearing people were most likely to respond that they were not provided with access to physical health support and care as a person who uses Auslan.

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Yes	13.8%	14.6%	38.9%	25.9%	4.4%	15.2%
No	20.2%	13.3%	33.3%	48.1%	41.9%	33.3%
Don't know	3.3%	2.8%	0.0%	7.4%	5.1%	3.0%
Prefer not to answer	2.5%	1.7%	0.0%	0.0%	5.1%	9.1%

Table 59 Access to physical health support and care (n=337/846)

Q33.1 (n=833/846) Deaf respondents were asked if they have any undiagnosed physical health conditions (Table 60). Just over 10% of all deaf respondents reported yes, they have undiagnosed physical health conditions. Deafblind, Deaf and Disabled, and people who describe it differently were more likely to report they have undiagnosed health conditions.

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Yes	11.1%	9.5%	16.7%	25.9%	11.8%	24.2%
No	62.6%	66.8%	61.1%	29.6%	53.7%	48.5%
Don't know	19.6%	17.1%	16.7%	33.3%	28.7%	21.2%
Prefer not to answer	5.1%	5.7%	0.0%	7.4%	2.9%	3.0%

Table 60 Undiagnosed physical health conditions (n=833/846)

Q33.2 Deaf respondents who reported they have an undiagnosed health condition (n=162/846) were asked why they have not yet been diagnosed (Figure 16). The most common responses were healthcare professionals not understanding Deaf needs, respondents not being able to pay, the poor location and availability of healthcare services, and the lack of Auslan interpreters or healthcare professionals who understand Auslan. Interestingly, no-one reported that the reason was because Deaf Interpreters were not available or that Deaf Interpreters could not understand them.

We also received 28 free text responses from deaf people describing why they were not yet diagnosed with physical health conditions. Many of these detailed reasons that are common to everyone, such as long processes with long wait times for appointments, conditions that are difficult to diagnose (e.g., endometriosis), doctors who are unsure about diagnoses due to complex medical problems or suggestive symptoms, unknown diagnosis, receiving contradictory information from different health professionals, doctors not caring, and patients being too busy to attend or unable to pay.

Reasons specific to deafness include medical professionals not knowing how to deal with deafness, such as being unwilling to offer longer consultations to enable effective communication, and deaf people not understanding doctors. Some respondents explained there is no healthcare available that meets their needs, or that they are ineligible for Auslan interpreting support. Others described having no support system and experiencing anxiety about having different interpreters booked for their medical appointments. Another person wanted to be able to choose their interpreter, not be stuck with the one provided by the service provider, while someone else reported having to bring a friend to their appointments because there are no interpreters available. Respondents also described negative attitudes of health professionals affecting their access. These include lack of care, additional discrimination such as ageism and transphobia, lack of safe services for queer, trans and neurodivergent people, medical gaslighting of young and disabled people, and doctors not believing deaf patients when they explain something is wrong (Table 61).

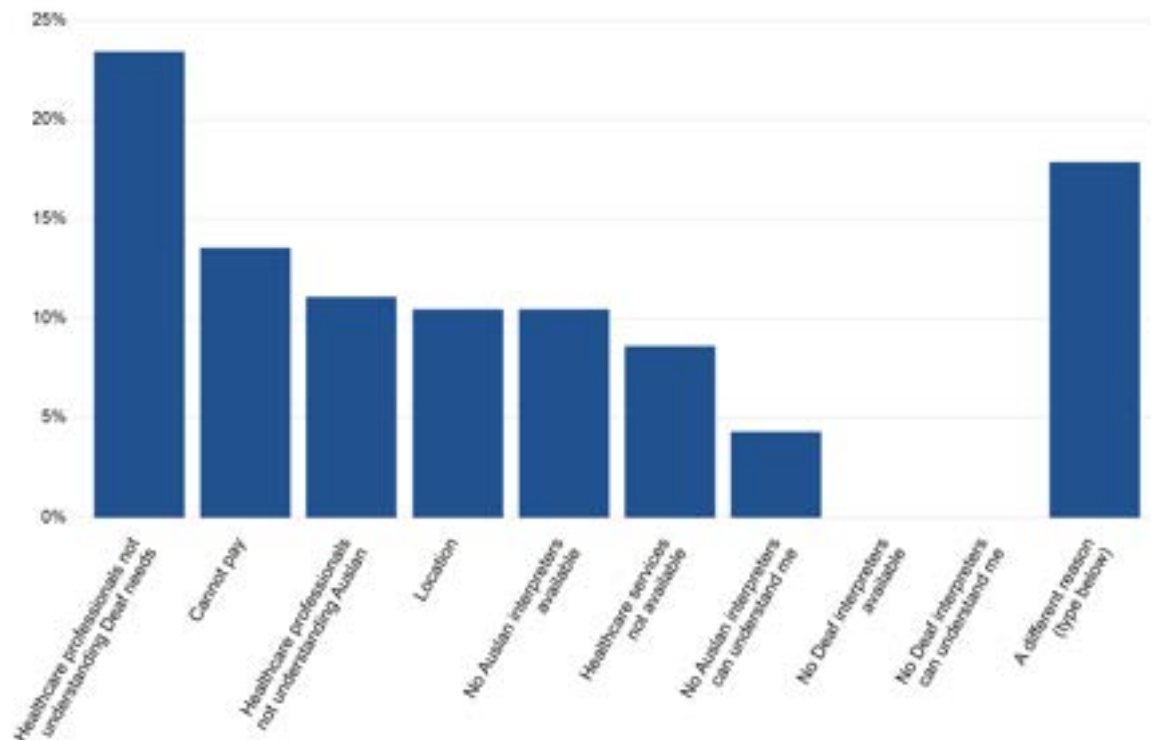


Figure 16 Reasons physical health condition has not yet been diagnosed (n=162/846)

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Location	2.0%	1.6%	0.0%	0.0%	2.2%	12.1%
Healthcare services not available	1.7%	0.5%	11.1%	7.4%	3.7%	6.1%
Cannot pay	2.6%	1.6%	5.6%	3.7%	3.7%	15.2%
Healthcare professionals not understanding Deaf needs	4.5%	4.3%	5.6%	11.1%	2.2%	12.1%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Healthcare professionals not understanding Auslan	2.1%	2.4%	5.6%	0.0%	0.0%	6.1%
No Auslan interpreters available	2.0%	2.1%	0.0%	7.4%	0.0%	6.1%
No Auslan interpreters can understand me	0.8%	0.9%	0.0%	0.0%	0.0%	3.0%
No Deaf interpreters available	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
No Deaf interpreters can understand me	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
A different reason (type below)	3.4%	2.5%	5.6%	11.1%	5.1%	6.1%

Table 61 Reason physical health condition has not yet been diagnosed (n=162/846)

Q34.1 (n=841/846) Deaf respondents were asked if they have been diagnosed with any mental health conditions (Table 62). Approximately 30% reported they have been diagnosed with mental health conditions. Deaf and disabled people, hard of hearing people, people who describe it differently, and Deafblind people were more likely to report they have been diagnosed with a mental health condition compared to Deaf people. Worryingly, 16.7% of Deafblind people reported they do not know if they have been diagnosed with any mental health conditions.

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Yes	30.6%	25.6%	33.3%	66.7%	44.1%	39.4%
No	58.3%	62.3%	50.0%	22.2%	50.7%	45.5%
Don't know	5.0%	5.2%	16.7%	3.7%	1.5%	9.1%
Prefer not to answer	5.6%	6.3%	0.0%	7.4%	2.9%	3.0%

Table 62 Diagnosed with any mental health conditions (n=841/846)

Q34.2 Deaf respondents with a diagnosed mental health condition (n=259/846) were asked if they were provided with access to mental health support and care as a Deaf, Deafblind or hard of hearing person who uses Auslan (Table 63). The most common response was no. Deaf and disabled people, hard of hearing people, and people who describe it differently were most likely to report this.

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Yes	9.9%	9.8%	22.2%	18.5%	7.4%	9.1%
No	17.8%	13.4%	11.1%	48.1%	30.9%	27.3%
Don't know	1.3%	1.1%	0.0%	0.0%	2.9%	0.0%
Prefer not to answer	1.5%	1.3%	0.0%	0.0%	2.9%	3.0%

Table 63 Access to mental health support and care (n=259/846)

Q35.1 (n=832/846) Deaf respondents were asked if they have any undiagnosed mental health conditions (Table 64). Overall 13.4% reported that they do have undiagnosed mental health conditions, with Deafblind people being more likely to report this. Overall, 18.6% reported they did not know. This includes 37% of Deaf and disabled people, and at least 10% of Deaf, Deafblind, hard of hearing, and people who describe it differently.

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Yes	13.4%	12.8%	33.3%	11.1%	14.0%	12.1%
No	60.6%	62.8%	50.0%	44.4%	56.6%	54.5%
Don't know	18.6%	15.8%	16.7%	37.0%	25.0%	30.3%
Prefer not to answer	5.8%	6.5%	0.0%	7.4%	3.7%	3.0%

Table 64 Undiagnosed mental health conditions (n=846)

Q35.2 Deaf respondents with an undiagnosed mental health condition (n=228/846) were asked why they have not yet been diagnosed (Figure 17). The most common responses were mental healthcare professionals not understanding Deaf needs or Auslan, and not being able to pay. Other responses included the lack of Auslan interpreters, and the location and availability of mental healthcare services. Some Deaf people also reported there are no Auslan interpreters who understand them, or that Deaf Interpreters were not available. Some people who describe it differently reported that Deaf Interpreters could not understand them (Table 65).

We also received 32 free text responses describing why they were not yet diagnosed with mental health conditions. Many of these detailed reasons that are common to everyone, such as mental health diagnosis being a time-consuming and complicated process; that they have not yet sought support, have no time to seek it, are awaiting an appointment for a specialist service or test (e.g., ADHD, ASD); doctors do not listen or that no-one is able to say where to get answers.

Reasons specific to deafness include it being difficult to communicate via a third person, and having low trust in interpreters due to privacy concerns, not wanting to have an interpreter from a specific booking agency, or not being eligible for an Auslan interpreter. Respondents described the process as very complicated and embarrassing, that it is difficult to find safe care with intersectional identities. Some people are still looking for a diagnosis, or have self-diagnosed and are managing it this way. Some people expressed frustration with mental health professionals who step around diagnosis instead of offering a full diagnosis, and that they experienced intended and unintended ableism. Another person explained they think it is normal to have depression.

Others said they are too scared, that it is too much and too hard to do, or that their current mental health capacity affects their ability to get diagnosed. Deafblind respondents reported there are no mental health services available to them in Australia. One person said they had tried to reach out to a psychologist many times, but the psychologist kept putting them off and refused to book appointments, even when their mother or an interpreter called on their behalf. One person questioned how any mental health professional can help them, because the only way their issues will go away is if they stop being deaf, and that cannot be fixed.

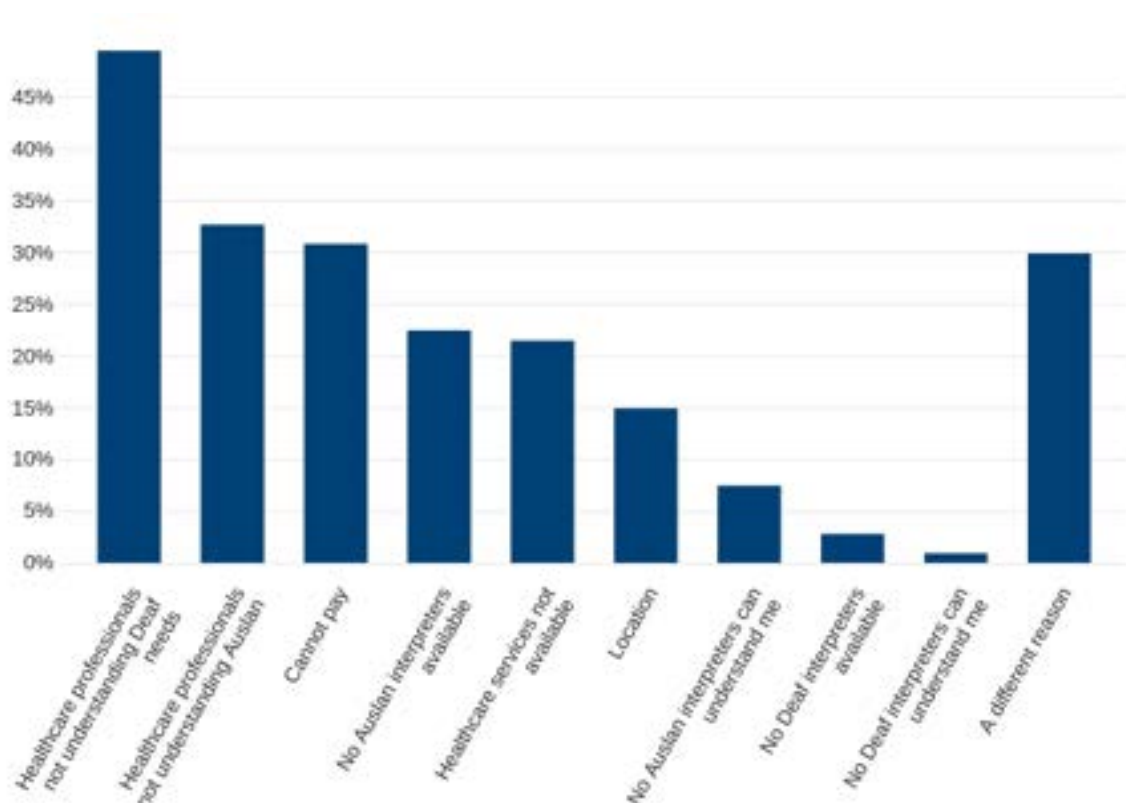


Figure 17 Reasons mental health condition not yet diagnosed (n=228/846)

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Location	1.9%	1.6%	0.0%	3.7%	2.9%	3.0%
Healthcare services not available	2.7%	2.4%	5.6%	7.4%	2.9%	3.0%
Cannot pay	3.9%	2.7%	5.6%	7.4%	8.1%	6.1%
Healthcare professionals not understanding Deaf needs	6.3%	7.1%	5.6%	7.4%	2.2%	6.1%
Healthcare professionals not understanding Auslan	4.1%	4.7%	0.0%	3.7%	0.7%	9.1%
No Auslan interpreters available	2.8%	2.8%	11.1%	7.4%	0.0%	6.1%
No Auslan interpreters can understand me	0.9%	1.1%	0.0%	0.0%	0.0%	3.0%
No Deaf interpreters available	0.4%	0.5%	0.0%	0.0%	0.0%	0.0%
No Deaf interpreters can understand me	0.1%	0.0%	0.0%	0.0%	0.0%	3.0%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
A different reason (type below)	3.8%	2.7%	16.7%	3.7%	7.4%	3.0%

Table 65 Reasons mental health condition not yet diagnosed (n=228/846)

Q36.1 (n=840/846) Deaf respondents were asked how many times they have been to a GP in the last 12 months. The most common response was 1-5 times (Table 66). However, 47.6% of all deaf people reported they have been to a GP more than 6 times in the last 12 months. This represents a significant amount of visits to a GP. A larger proportion of Deafblind people attended up to 20 times in the last 12 months compared to other deaf people.

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
1-5 times	48.2%	49.1%	44.4%	37.0%	42.6%	66.7%
6-10 times	25.2%	24.8%	16.7%	22.2%	31.6%	12.1%
11-15 times	11.1%	10.3%	5.6%	22.2%	13.2%	12.1%
16-20 times	6.1%	6.5%	22.2%	7.4%	3.7%	0.0%
21-30 times	2.4%	1.9%	5.6%	3.7%	3.7%	3.0%
More than 30 times	2.8%	2.8%	5.6%	3.7%	2.9%	0.0%
I have not been to a GP in the last 12 months	3.4%	4.0%	0.0%	3.7%	1.5%	3.0%

Table 66 Number of visits to GP in last 12 months (n=840/846)

Q36.2 (n=814/846) Deaf respondents who have been to a GP in the last 12 months were asked how easy it is to book an appointment with their GP when they need one. The most common response was that it is very easy or somewhat easy to book an appointment (Table 67). However, 14.7% found it somewhat difficult or more than difficult, especially Deafblind people.

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Very easy	40.2%	40.7%	38.9%	18.5%	45.6%	27.3%
Somewhat easy	25.8%	24.5%	27.8%	25.9%	30.1%	30.3%
Neutral	12.3%	13.1%	11.1%	18.5%	8.1%	9.1%
Somewhat difficult	10.6%	10.4%	22.2%	7.4%	9.6%	15.2%
Very difficult	4.1%	4.0%	0.0%	18.5%	2.2%	6.1%
Not applicable - I do not book appointments with a GP	3.2%	3.2%	0.0%	7.4%	2.9%	3.0%

Table 67 Ease of booking GP appointment (n=814/846)

Q36.3 (n=1,469/846) Deaf respondents who have been to a GP in the last 12 months were asked how they communicate with their GP (Figure 18). More than one response to this question was possible. The most common responses were writing English, attending with an in-person Auslan interpreter, and speaking English. 15% reported that a hearing family member or friend attends with them, presumably to broker communication with the GP and/or advocate for the deaf person. Over 10% reported that they use gestures to communicate with their GP. Deafblind people were most likely to report using an in-person Auslan interpreter and/or Deaf interpreter, while hard of hearing people were least likely to

use an interpreter. Deaf and disabled people and people who describe it differently were most likely to report that they use gestures with their GP. 2.1% reported they cannot communicate with their GP, especially Deaf and disabled people, and people who describe it differently. Only 1.3% of respondents reported their GP uses Auslan (Table 68).

We also received 70 free text responses describing other ways people communicate with their GP. Many respondents reported lipreading and speaking with their GP, even if they had to ask their GP to repeat information many times. One person clarified they repeat everything their GP says to make sure they understand, and that the GP writes down any technical words. Another said they speak and lipread for basic issues, but attend with an Auslan interpreter for more serious issues. Some people said they attend with a family member to interpret or write notes. Respondents also reported using specific tools, including pen and paper, typing on the computer or mobile phone, voice recognition apps such as Otter AI and Live Transcribe (even if they are not really accurate), online booking systems and email. People also reported using telehealth services with interpreters, or VRI services such as Convo Australia. One person reported using a Tactile Auslan interpreter, and another said the nurse at their GP is a translator.

Several respondents shared negative experiences about communicating with their GP. They reported it is difficult to find interpreters available at short notice, such as for work medical certificates, and that it is difficult to deal with GPs using face masks. Some GPs refuse to take their masks off even when someone needs to lipread. One person explained that communication is extremely difficult, but they type on their phone and usually have a list ready beforehand so they do not have to communicate. Another person said they are not eligible for funding to book an interpreter, while someone else said they always request a GP with “no accent” and for them not to wear a mask. One person described needing their daughter to attend the GP with them before they received CI, but now they can hear well enough to go on their own, unless the GP is wearing a mask.

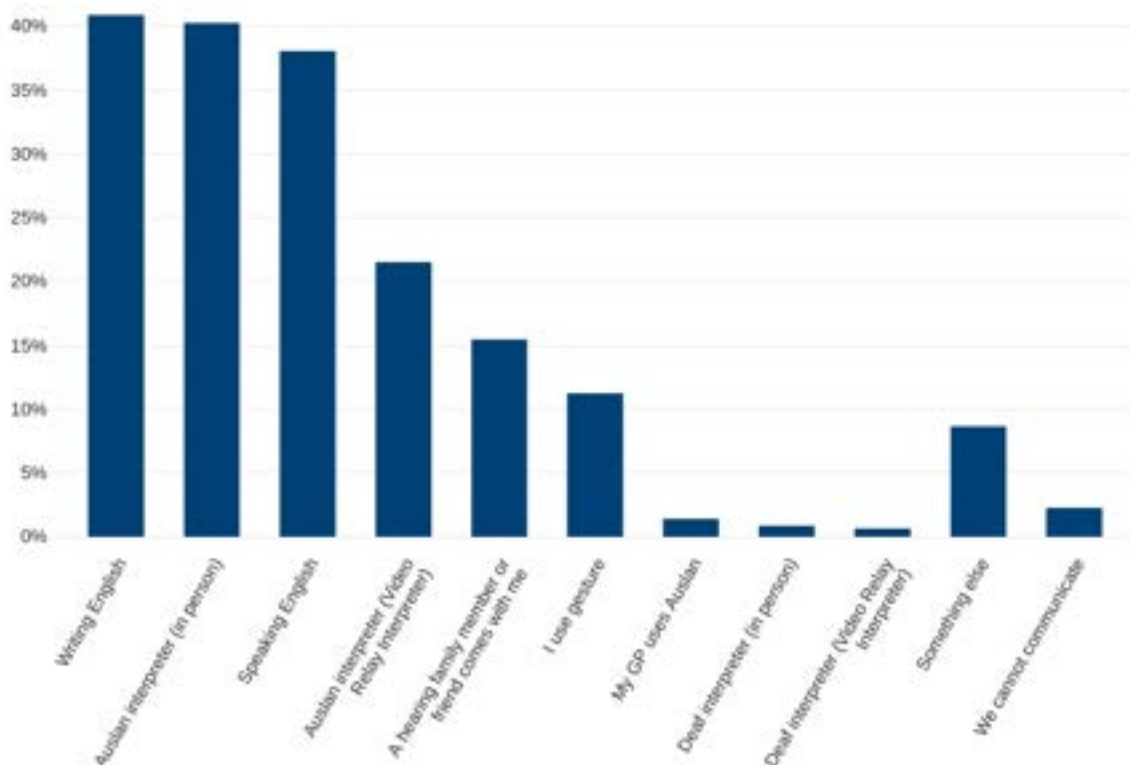


Figure 18 Communication with GP (n=1469/846)

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Auslan interpreter (in person)	38.5%	47.0%	61.1%	33.3%	3.7%	12.1%
Auslan interpreter (Video Relay Interpreter)	20.6%	25.6%	33.3%	11.1%	1.5%	3.0%
Deaf interpreter (in person)	0.8%	0.8%	11.1%	0.0%	0.0%	0.0%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Deaf interpreter (Video Relay Interpreter)	0.6%	0.5%	0.0%	3.7%	0.0%	3.0%
A hearing family member or friend comes with me	14.8%	13.8%	16.7%	33.3%	14.0%	21.2%
Writing English	39.1%	47.0%	33.3%	18.5%	11.0%	24.2%
Speaking English	36.4%	26.4%	22.2%	40.7%	77.2%	63.6%
My GP uses Auslan	1.3%	1.6%	0.0%	3.7%	0.0%	0.0%
We cannot communicate	2.1%	2.1%	0.0%	7.4%	0.7%	6.1%
I use gesture	10.8%	10.6%	5.6%	14.8%	8.8%	21.2%
Our communication method(s) are not listed here (type below)	8.3%	6.8%	16.7%	7.4%	12.5%	15.2%
No - I have not been to a GP	0.4%	0.3%	0.0%	0.0%	0.7%	0.0%

Table 68 Communication with GP (n=1469/846)

Q36.4 (n=835/846) Deaf respondents were asked how many times they have been to a specialist doctor in the last 12 months. The most common response was 1-5 times (Table 69). 15.3% of all deaf people reported they have been to a specialist doctor more than 6 times in the last 12 months. A larger proportion of Deaf and disabled people, Deafblind,

hard of hearing and people who describe it differently attended up to 10 times in the last 12 months, compared to Deaf people.

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
1-5 times	50.6%	50.2%	55.6%	48.1%	52.9%	48.5%
6-10 times	11.1%	9.0%	16.7%	25.9%	15.4%	18.2%
11-15 times	3.3%	3.3%	5.6%	3.7%	2.9%	3.0%
16-20 times	0.7%	0.5%	5.6%	0.0%	1.5%	0.0%
21-30 times	0.1%	0.2%	0.0%	0.0%	0.0%	0.0%
More than 30 times	0.1%	0.0%	0.0%	0.0%	0.7%	0.0%
I have not been to a specialist doctor in the last 12 months	32.7%	35.8%	16.7%	22.2%	24.3%	27.3%

Table 69 Number of visits to specialist doctor in last 12 months (n=835/846)

Q36.5 (n=561/846) Deaf respondents who have been to a specialist doctor in the last 12 months were asked how easy it is to book an appointment with their specialist doctor(s) when they need one. The most common response was very easy or somewhat easy (Table 70). However, 15.3% found it somewhat difficult or more than difficult, especially Deafblind people and people who describe it differently.

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Very easy	18.4%	19.0%	16.7%	0.0%	19.1%	21.2%
Somewhat easy	17.7%	16.6%	27.8%	18.5%	21.3%	18.2%
Neutral	12.2%	11.7%	11.1%	25.9%	14.0%	3.0%
Somewhat difficult	10.9%	10.1%	22.2%	11.1%	11.8%	15.2%
Very difficult	4.4%	3.6%	5.6%	14.8%	4.4%	9.1%
Not applicable	2.7%	2.2%	0.0%	7.4%	4.4%	3.0%

Table 70 Ease of booking specialist doctor appointment (n=561/846)

Q36.6 (n=911/846) Deaf respondents who have been to a specialist doctor in the last 12 months were asked how they communicate with their specialist doctor(s) (Figure 19). More than one response to this question was possible. The most common responses were an in-person Auslan interpreter, speaking English and writing English (Table 71). Almost 20% reported using a VRI Auslan interpreter, and over 15% reported that a hearing family member or friend comes with them, especially Deaf and Disabled people, presumably to broker communication with the specialist doctor and/or advocate for the deaf person. Over 5% reported that they use gestures to communicate with their specialist doctor, especially Deaf and disabled people and people who describe it differently. 1.3% reported they cannot communicate with their specialist doctor, and only 0.2% reported their specialist doctor uses Auslan.

We also received 33 free text responses describing other ways people communicate with their specialist doctors. These include voice recognition apps that transcribe speech to text, telehealth services, National Relay Service, and email. Respondents reported speaking and lipreading, or using a Tactile Auslan interpreter or a family member who interprets. Others described having access to a quiet room and asking professionals to remove their mask and write down technical words. One person described communication as being extremely

difficult, and that they type on their phone and usually have a list ready beforehand. One person said they ask to see someone who does not have a foreign accent. Others described negative experiences, such as professionals not booking interpreters for their appointment, or that they find it hard because most appointments are online now. One person reported feeling scared at their appointment because the professional did not listen to them and prescribed something dangerous and unnecessary that the person did not want to take, making it an expensive and wasted journey.

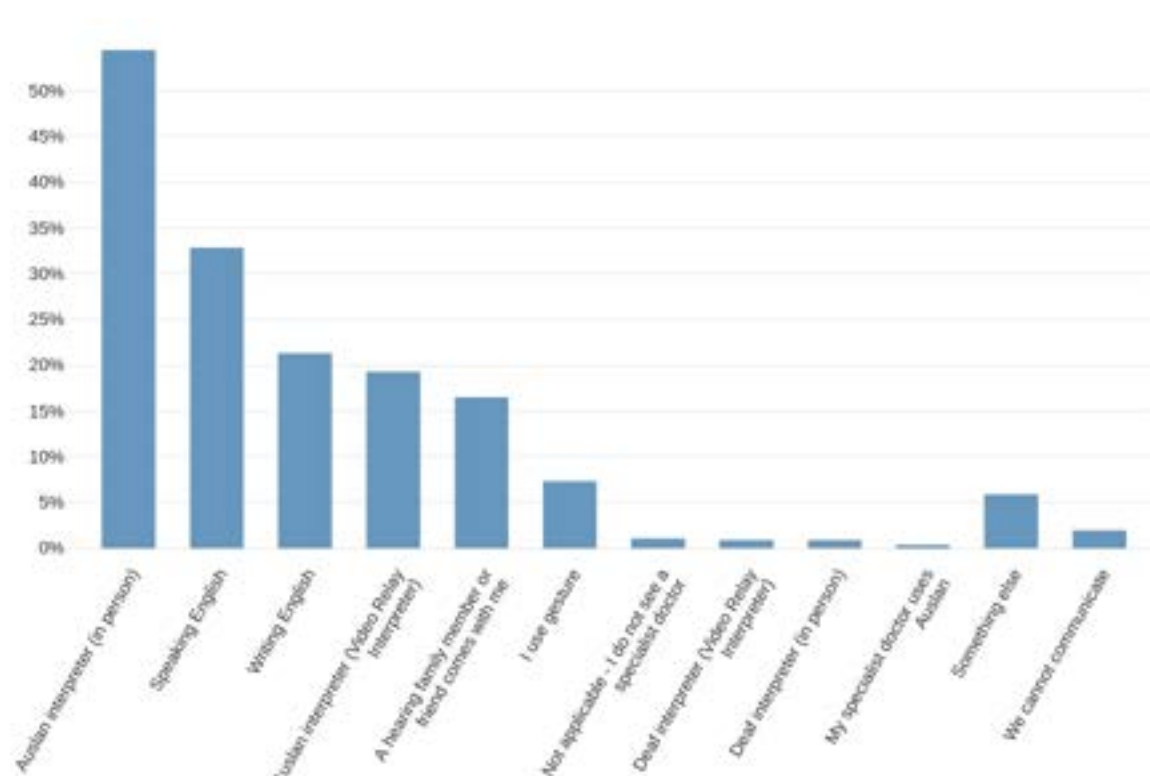


Figure 19 Communication with specialist doctor (n=911/846)

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Auslan interpreter (in person)	36.1%	43.4%	55.6%	33.3%	5.1%	15.2%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Auslan interpreter (Video Relay Interpreter)	12.8%	15.7%	16.7%	7.4%	2.2%	3.0%
Deaf interpreter (in person)	0.6%	0.3%	11.1%	3.7%	0.0%	0.0%
Deaf interpreter (Video Relay Interpreter)	0.6%	0.6%	0.0%	0.0%	0.7%	0.0%
A hearing family member or friend comes with me	10.9%	7.9%	11.1%	44.4%	16.9%	15.2%
Writing English	14.1%	14.4%	11.1%	18.5%	8.8%	27.3%
Speaking English	21.7%	12.2%	11.1%	33.3%	58.8%	48.5%
My specialist doctor uses Auslan	0.2%	0.3%	0.0%	0.0%	0.0%	0.0%
I use gesture	4.8%	4.0%	0.0%	14.8%	5.1%	15.2%
We cannot communicate	1.3%	1.1%	0.0%	3.7%	0.7%	6.1%
Our communication method(s) are not listed here (type below)	3.9%	3.3%	5.6%	7.4%	4.4%	9.1%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Not applicable - I do not see a specialist doctor	0.7%	0.6%	0.0%	0.0%	1.5%	0.0%

Table 71 Communication with specialist doctors (n=911/846)

Q36.7 (n=836/846) Deaf respondents were asked if they wanted to add more information about visiting their GP or specialist doctor(s). We received 205 free text responses describing additional information about visiting GP or specialist doctors. Respondents offered more detailed information about their access needs, especially how they might be able to communicate via lipreading or pen and paper with their GP, but require Auslan interpreters for appointments with specialist doctors. The overwhelming majority also preferred to book appointments via online booking systems or in person while visiting the medical centre.

Some respondents detailed positive experiences about visiting their GP or specialist doctors. They said it was easy because of specific attitudes and communication practices. These include actions such as doctors willingly pulling down their masks to communicate, understanding that a double appointment is often needed to give deaf clients more time, GPs coming into the reception area to meet deaf clients in person, and GPs allowing assistance dogs into the consultation room. One person explained their GP makes sure their appointment is top priority because they are aware the interpreter is booked for a limited time. Another person described how their experience at a centre for transgender health was fantastic because the staff organised an Auslan interpreter, which reduced their overall anxiety.

However, most respondents detailed negative experiences about visiting GPs or specialist doctors. Many people complained about interpreters not being booked by GPs or specialist doctors, not booking interpreters far enough in advance, or the limited availability of both doctors and interpreters making it difficult to find an appointment that can accommodate both, let alone the deaf client too. It is very time consuming and difficult to coordinate availability between the doctor and interpreter. People living in the country have few interpreters available in their area. People from New Zealand, and people over 65 expressed frustration that they are not eligible for interpreters. For example, Aged Care does not support funding for interpreters, leaving deaf clients having to pay out of pocket. One person described their doctor telling them they did not need an interpreter, and another had their doctor refusing a mask exemption as he did not believe the person was deaf. One

person described being treated as though they are an unintelligent child, simply because they are non-speaking, while others reported feeling stressed when their interpreter was late, but the GP insisted on beginning the appointment anyway.

VRI services were consistently described as not being useful for medical appointments, because the internet connection in medical centres and hospitals is usually not sufficient for quality service. Furthermore, when VRI was made available, medical staff often did not understand how to work with an Auslan interpreter and consequently wasted precious time in their appointment learning how to use VRI. In any case, interpreters were reported as being more often unwilling to attend face to face, even when the internet connection at many medical buildings is not sufficient quality for VRI. One person who recently received a CI expressed their relief at how much easier it is to access medical services now compared to before, but also grief that their deaf peers continue to experience barriers. Others prefer to book their own interpreters, as they find that the interpreters booked by agency and hospital staff are never fluent. Deaf people in some regional locations complained that interpreters in that area do not adhere to professional conduct in keeping information confidential. For example, every time someone books an interpreter, everyone in the community knows about it. Coupled with high demand for interpreters in this region, deaf people feel defeated, knowing their health suffers as a consequence.

Many of these complaints also apply to reception staff. Reception staff often book deaf clients for double appointments, even though this makes it harder to find available appointments and therefore available interpreters. Telephone barriers make it difficult for deaf people to book, change, or cancel appointments. Even when respondents use the NRS, reception staff often hang up on them. Deaf respondents were also concerned about privacy, such as some services using staff members' private mobile phones to communicate via SMS. Email contact was reported as being too slow. For example, one person accepted a time offered via email, but by the time reception read the email and responded, the appointment slot had been taken, and they had to see another doctor.

On arrival for appointments, deaf respondents complained they never know if their name is being called or not; that interpreters are often late or cancelling at the last minute; or the interpreter is someone they do not want to work with in medical contexts. If the interpreter is available for an appointment, some people complained that the interpreter could not understand their fluent Auslan and also could not understand the doctor. During appointments, some doctors insist on their own communication methods such as pen and paper, even asking interpreters to leave and shouting through masks, rather than going through third parties such as VRI and in-person interpreters. Some doctors try to communicate via deaf patients' young children, some as young as eleven years old. Doctors using telehealth sometimes refuse to switch from inaccessible platforms such as MS Teams, to more accessible ones such as Zoom, citing privacy reasons.

Respondents also complained about how doctors use masks. Some preferred that masks be removed so they can lipread, others preferred that masks remain on, and for doctors to use alternative communication methods. Deaf respondents described noticing their family GP gives them less attention than they give to the hearing members of their family.

Respondents also reported having to advocate for specific services, such as mental health services, as their GP does not really understand. One person explained their GP refused to complete their NDIS review form on grounds that the NDIS is wasting GP time and resources by seeking repeated medical reviews. The client's request to have their secondary disability acknowledged in their NDIS Plan was consequently rejected by the NDIS.

Deaf respondents also reported that hospitals still do not know, or do not realise, that they are responsible for organising interpreters, especially pre- and post-surgery, or in the emergency department. Hospitals also refuse to send text messages instead of calling. One hard of hearing person described calling reception and asking them to put her appointment in writing, only to be told "you can obviously hear me well" after the fourth repeat. Hospital staff also refuse simple physical accommodations, such as standing on the left side of the bed rather than the right side. Deaf respondents reported that access at the hospital depends on the training and awareness experienced by specific individuals rather than the system.

A range of requests for improvements were put forward by respondents. These include technological improvements, such as for all GP and specialist medical services to have better WiFi and internet connections for VRI services, and their own iPads with secure speech-to-text software (e.g., NAL Scribe) and VRI capabilities, both to deal with privacy concerns and for clients with no access to funding for interpreters. One person proposed an app detailing medical terminology in Auslan for deaf clients and interpreters. Deaf and Deafblind people requested medical services to enable them to book their own appointments, so they can more easily liaise with booking Auslan or Tactile Auslan interpreters. Respondents also requested educational improvements, such as doctors being trained in more balanced and nuanced understanding of the Deaf community, and to stop forcing people to use CI or other technologies when they are not wanted. This refers to basic Deaf Awareness Training and basic Auslan for medical professionals, including for reception staff.

Q37.1 (n=836/846) Deaf respondents were asked how many times they have been to hospital in the last 12 months (Table 72). The most common response was that they have not been to a hospital (51.1%) or that they have been only once to a hospital (20.4%) in the last 12 months. 27.3% reported they have been to a hospital more than two times, especially Deaf and disabled people.

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Once	20.4%	20.1%	33.3%	25.9%	21.3%	12.1%
2 times	12.9%	11.9%	5.6%	18.5%	17.6%	12.1%
3-4 times	8.7%	8.7%	11.1%	22.2%	6.6%	6.1%
5 or more times	5.7%	5.5%	11.1%	3.7%	5.1%	9.1%
I have not been to hospital in the last 12 months	51.1%	52.7%	38.9%	29.6%	48.5%	54.5%

Table 72 Communication with specialist doctors (n=911/846)

Q37.2 (n=718/846) Deaf respondents who have been to hospital in the last 12 months were asked how they communicate with medical staff in the hospital (Figure 20). More than one response to this question was possible. The most common responses were writing or speaking English, or using an in-person Auslan interpreter (Table 73). Over 25% reported that a hearing family member or friend comes with them, especially Deaf and disabled people, presumably to broker communication with medical staff in the hospital and/or advocate for the deaf person. Almost 15% reported using a VRI Auslan interpreter, and over 10% reported they cannot communicate with the medical staff in the hospital. Only 0.7% reported using an in-person or VRI Deaf interpreter, and only 0.2% reported their nurse or doctor uses Auslan.

We also received 38 free text responses describing other ways people communicate with medical staff in the hospital. These primarily included strategies such as writing on paper or whiteboard, or typing on mobile phone, as well as relying on lipreading and speech-to-text voice recognition apps. Several respondents reported that masks make it difficult to communicate, and that interpreters were requested but never provided. Sometimes family members were asked to interpret, or the deaf person took a screenshot of written information and sent it to their family interpreter. Older people find VRI too difficult and isolating while in hospital, and one person described being hospitalised with Covid, but

receiving interpreter support only twice in the five days they were there. People expressed concern about the lack of available interpreters and needing to book in advance, as this does not help people when they are suddenly sick or in an accident.

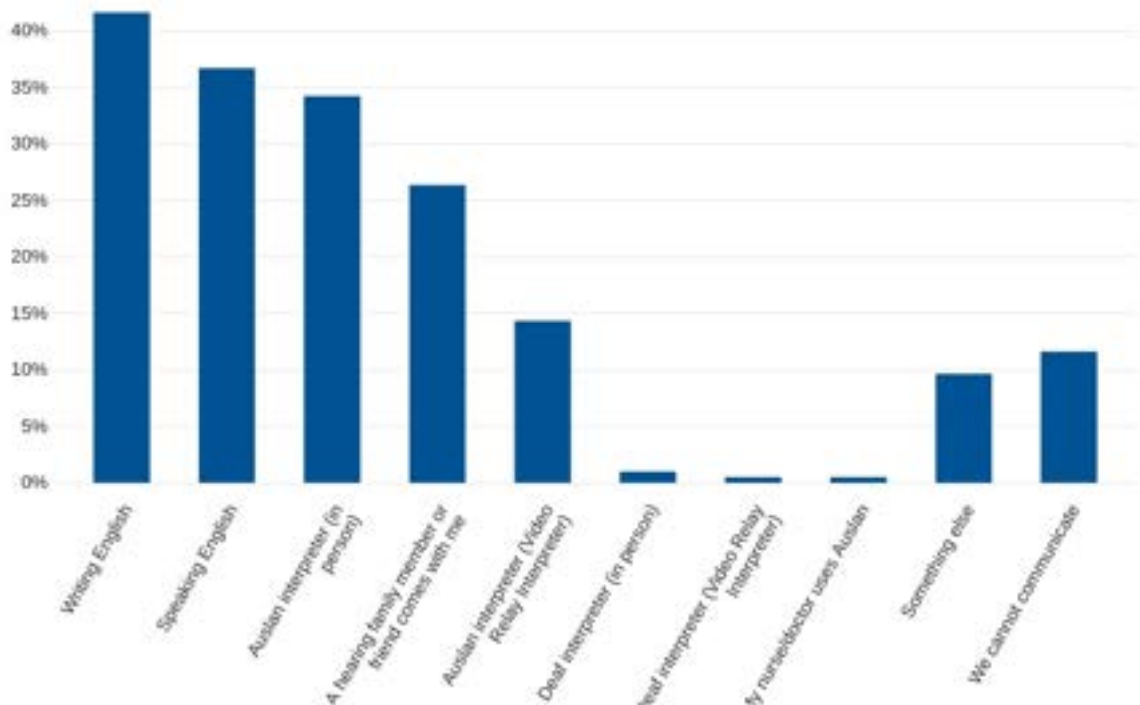


Figure 20 Communication with medical staff in the hospital (n=718/846)

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Auslan interpreter (in person)	16.4%	19.8%	27.8%	14.8%	2.9%	3.0%
Auslan interpreter (Video Relay Interpreter)	6.9%	8.4%	5.6%	11.1%	0.7%	0.0%
Deaf interpreter (in person)	0.5%	0.5%	5.6%	0.0%	0.0%	0.0%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Deaf interpreter (Video Relay Interpreter)	0.2%	0.3%	0.0%	0.0%	0.0%	0.0%
A hearing family member or friend comes with me	12.6%	10.8%	22.2%	44.4%	14.7%	9.1%
Writing English	20.0%	22.5%	11.1%	25.9%	8.1%	21.2%
Speaking English	17.6%	11.4%	5.6%	25.9%	44.1%	27.3%
My nurse/doctor uses Auslan	0.2%	0.0%	0.0%	0.0%	0.7%	3.0%
We cannot communicate	5.6%	5.7%	0.0%	14.8%	1.5%	15.2%
Our communication method(s) are not listed here (type below)	4.6%	4.1%	5.6%	7.4%	4.4%	12.1%
Not applicable - I have never been to hospital	0.2%	0.0%	0.0%	0.0%	0.7%	3.0%

Table 73 Communication with medical staff in hospital (n=718/846)

Q38.1 (n=1,223/846) Deaf respondents were asked if they have been to an allied health professional in the last 12 months. More than one response to this question was possible. Most respondents have been to an allied health professional (Table 74). The most common response was an audiologist (40.2%), physiotherapist (23.3%), psychologist (20.1%), or occupational therapist (17.7%). Hard of hearing people were most likely to visit an audiologist, while Deaf and disabled and Deafblind people were most likely to visit an

occupational therapist. Deaf and disabled people were also most likely to visit a psychologist.

We also received 103 responses describing allied health professionals and services not listed here, including acupuncture therapist, behaviour therapist, cardiologist, chiropractor, CI specialist, counsellor, dentist, diabetes clinician, dietician, endocrinologist, ENT doctor, exercise physiologist, geneticist, naturopath, neuro-physiotherapist, neurologist, nutritionist, obstetrician, ophthalmologist, optometrist, orientation mobility therapist, orthopedic surgeon, gastroenterologist, orthoptic, osteopath, paediatrician, physiotherapist, podiatrist, psychiatrist, radiologist, remedial massage therapist (such as Myotherapy), renal clinician, skin cancer surgeon, sonography specialist, dental surgeon, Traditional Chinese Medicine practitioner, and women's health nurse.

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Yes - a psychologist	20.1%	17.6%	16.7%	40.7%	26.5%	27.3%
Yes - a physiotherapist	23.3%	19.1%	50.0%	44.4%	33.1%	30.3%
Yes - an occupational therapist	17.7%	15.7%	44.4%	63.0%	14.7%	18.2%
Yes - an audiologist	40.2%	33.5%	50.0%	55.6%	64.7%	48.5%
Yes - an allied health professional that is not listed here (type below)	13.1%	10.6%	27.8%	22.2%	17.6%	27.3%
I have not been to an allied health professional in the last 12 months	30.1%	35.6%	22.2%	3.7%	14.0%	18.2%

Table 74 Number of visits to allied health professional in last 12 months (n=1223/846)

Q38.2 (n=572/846) Deaf respondents who have been to an allied health professional in the last 12 months were asked how easy it is to book an appointment with an allied health professional when they need one (Table 75). The most common response was very easy or somewhat easy (44.6%). However, 11% of all deaf people responded that it is somewhat difficult or very difficult. Deaf and disabled people were most likely to report this.

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Very easy	24.6%	23.1%	33.3%	18.5%	31.6%	24.2%
Somewhat easy	20.0%	16.3%	33.3%	18.5%	33.8%	27.3%
Neutral	12.1%	12.7%	5.6%	22.2%	10.3%	3.0%
Somewhat difficult	7.9%	7.3%	5.6%	22.2%	8.1%	9.1%
Very difficult	3.1%	2.7%	0.0%	14.8%	1.5%	9.1%

Table 75 Ease of booking appointment with allied health professionals (n=572/846)

Q38.3 (n=918/846) Deaf respondents who have been to an allied health professional in the last 12 months were asked how they communicate with allied health professionals (Figure 21). More than one response to this question was possible. The most common responses were speaking English and using an in-person Auslan interpreter (Table 76). Over 25% reported using written English, while about 15% use a VRI Auslan interpreter. 15% attend with a hearing family member or friend, especially Deaf and Disabled people, presumably to broker communication with the allied health professional and/or advocate for the deaf person. While 6.5% reported that their allied health professional uses Auslan, 1.4% reported they cannot communicate with their allied health professional. Only 0.4% use an in-person or VRI Deaf interpreter.

We also received 53 free text responses describing methods people use to communicate with allied health professionals which are not listed here. These include technologies such as email, typing on phone, FM system, Augmentative and Alternative Communication

devices, NRS, telehealth with captions, live captioning and voice recognition speech-to-text apps such as Live Transcribe, as well as Convo Australia. One person described having their consultations in a very quiet room with the allied health practitioner facing them and speaking clearly so they can lipread. Others reported they used a Tactile Auslan interpreter, attended with a family member and/or support worker, requested a practitioner with no accent, or that their practitioner knew basic Auslan. Another person said they speak and the practitioner writes, or they use gestures.

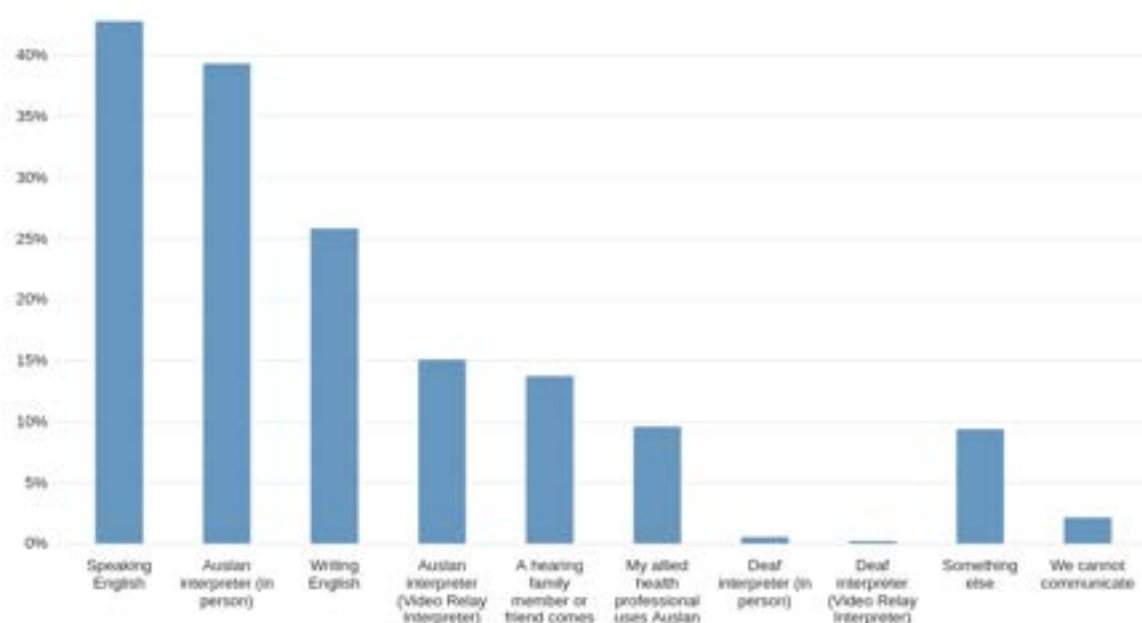


Figure 21 Communication with allied health professionals (n=918/846)

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Auslan interpreter (in person)	26.8%	32.1%	33.3%	33.3%	4.4%	9.1%
Auslan interpreter (Video Relay Interpreter)	10.3%	12.3%	22.2%	7.4%	1.5%	3.0%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Deaf interpreter (in person)	0.4%	0.2%	5.6%	0.0%	0.0%	3.0%
Deaf interpreter (Video Relay Interpreter)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
A hearing family member or friend comes with me	9.3%	7.4%	16.7%	37.0%	11.8%	9.1%
Writing English	17.6%	18.4%	5.6%	14.8%	13.2%	30.3%
Speaking English	29.2%	18.8%	11.1%	40.7%	69.9%	60.6%
My allied health professional uses Auslan	6.5%	7.0%	11.1%	18.5%	2.2%	3.0%
We cannot communicate	1.4%	1.4%	0.0%	3.7%	0.0%	6.1%
Our communication method(s) are not listed here (type below)	6.4%	4.9%	11.1%	11.1%	10.3%	12.1%
I have never been to an allied health professional	0.6%	0.6%	0.0%	0.0%	0.7%	0.0%

Table 76 Communication with allied health professionals (n=918/846)

Q38.4 Deaf respondents (n=846) were asked if they want to add more information about visiting allied health professionals. We received 103 responses describing additional

information about visiting allied health professionals. Respondents generally had more positive experiences to report compared to GPs and specialist doctors. They also reported allied health professionals having more knowledge and experience in deaf-specific areas. More allied health professionals were reported as being deaf aware, or even being able to use some degree of Auslan. One person described them generally being more empathetic, perhaps due to most practitioners being female. Others reported using captions on their phone while making appointments, or using online booking systems. Convo Australia services are popular when Auslan interpreters are needed. Respondents also described being able to receive ongoing treatments without interpreters, if they had a few sessions with interpreters to learn the process early on.

However, some negative experiences with allied health professionals were still reported. These mostly relate to Auslan interpreters, the continued use of face masks, and the attitudes of allied health practitioners and relevant staff, including NDIS Support Coordinators. The issues with Auslan interpreters relate to none being available, especially interpreters experienced with deaf blindness. Some people rely on family members to interpret, even though they would prefer not to. Even though it is comparably easier to book allied health professionals online, it is harder to find interpreters available in person and professionals with compatible availability. It is seen as a waste of funding to book interpreters for a 15 minute appointment. Many respondents were also unhappy with interpreting being contracted to a Deaf community service provider. Most people reported preferring to choose and book their own interpreting agency and compatible interpreters, and pay from their NDIS funds. The Deaf community service provider was described as unreliable and not a good service. One person was exasperated that the Government needs to control the Deaf community in this way, as it removes choice and self-autonomy.

Respondents reported that they want more allied health professionals to learn and use Auslan fluently, so that deaf clients can communicate directly with them. Basic Auslan is not enough. Deaf people would prefer to use Auslan, especially in mental health crisis contexts. Mental health is an area of major concern for many respondents. Most mental health services are designed for hearing people with phone line systems and audio-based treatments, but these are not accessible or culturally appropriate for Deaf people. One person said chat lines might be a good short term solution, but it is time consuming and may be unhelpful when one is distressed.

Many people complained about Hearing Australia, describing it as completely lacking in deaf awareness. For example, staff persist in wearing masks and reminding deaf clients about appointments via phone, and do not offer interpreters. One person reported being put under a lot of pressure from an audiologist to “hear properly”, even though their brain gets tired listening to sounds. Another person described their experience with allied health professionals as generally positive, except with audiologists.

Psychologists were also reported as engaging in audism and ableism. These range from not offering deaf clients any communication access or accommodations, to telling clients that they seem to cope well in life, that they are not sure why the deaf person thinks they have difficulty in everyday life. In essence, they are not believing, not showing interest, or not understanding the deaf person's experience, even when a deaf person is distressed and anxious. One person reported having to explain the basic elements of disability theory and the social model of deafness to a psychologist during an appointment they had to pay for, and how they are not distressed by their deafness, but by the social barriers at work and in life. In other words, deaf people are having to pay to repeatedly educate psychologists during their own treatment sessions.

Others reported frustration at the lack of communication between GPs, specialist doctors and allied health professionals such as audiologists. This leads to the deaf person missing information, especially when professionals do not write down information for the person. In general, there are not enough hearing allied health professionals trained to work with deaf people. For example, one person asked their occupational therapist about visible smoke alarms, doorbells, and other alerts. They were told that phones are "a hard one" and to buy anything they needed from the consumables budget of their NDIS Plan. Another person said they struggle to find allied health professionals who are both deaf aware and queer friendly. Others described professionals not removing their mask to communicate, even when it is explained that it is legal to do so in such contexts. Other respondents left comments in this part of the survey such as "waste of time saying" and "I've given up", although it was unclear if this was about their experiences with allied health professionals, or with the Deaf Census online survey.

Improvements suggested by respondents included ongoing Deaf Awareness Training for allied health professionals, especially audiologists. Regarding audiologists, one person reported, "I wish they would encourage a bilingual approach. There's many of us older deaf who wish we weren't either forced to talk or just had the option of learning signed language from a young age, so that we could feel more connected to our people and community as we get older." Another person said it was important for audiologists to be able to suit different deaf people, "especially those of us who are child NAL [National Acoustic Laboratory] users."

Online booking systems, SMS appointment reminder services, and remote technologies such as Convo Australia are also important advancements. Some respondents reported preferring VRI services as it is cheaper. Others would prefer to organise and pay for their own interpreters using their NDIS funds, although not everyone has access to the NDIS. Direct communication would be preferred by many, if more allied health professionals improved their Auslan fluency to the level required. It was also suggested that Deaf Interpreters be

made available for specialist doctors and emergency departments, and for deaf people to receive an annual wellbeing check from a mental health professional.

3.10 Auslan interpreters

Q39.1 (n=832/846) Deaf respondents were asked how often they use Auslan interpreters (Table 77). The most common response from deaf people who use Auslan interpreters (66.3%) was a few times a week and a few times a month. While 18.3% reported they never use Auslan interpreters and 13.7% reported they use something else, these respondents were primarily hard of hearing people or people who describe it differently. We also received 111 responses describing how often people use Auslan interpreters, but not listed here. These responses described alternative frequencies, such as working days only or when work provides, whenever I can afford to, whenever needed, or whenever possible. Several people commented they would like to book Auslan interpreters more often, but there are none available in their area, or they do not have NDIS or EAF funding to pay for them.

A major issue reported is the trend of interpreters not accepting face-to-face assignments. This forces deaf people to use VRI services even when it is not preferred. One deaf person explained that before the pandemic, they used to book Auslan interpreters for in-person assignments at least once or twice a week. However, now they do not bother booking because it is a waste of time filling in the booking form when no-one is willing to accept face-to-face assignments. This person clarified they do understand that VRI is sometimes more appropriate, but the current situation is so ridiculous that they have taken to writing on paper for medical appointments and outings. They stated, “The issue here is clear: interpreters are making money off our language and at the expense of our full access to clear information. However, no agency is willing to enforce or mandate the interpreters to have some face-to-face interactions at least.” Another major issue is the lack of interpreters available in specific areas. For example, there is only one qualified interpreter available in Darwin.

Others referred to specific contexts in which they book interpreters, such as medical appointments, loud classrooms or other noisy situations, big events, large meetings and some business calls, and to access performing arts events such as gallery tours. One person said they book interpreters when they feel like captions will drain them. Some people reported they do not currently book interpreters as they do not have sufficient funding, or they are not yet able to perceive Auslan fluently, or they feel scared to start working with interpreters and need more confidence. One person saves their interpreting budget for when they will be interacting with two or more people, as they are okay with one on one interactions. Some people reported that Convo Australia makes it easier to access interpreters than before. Others reported using live captioning or transcription services

instead. Another person complained they do not book VRI as much anymore because their phone is too small to see Convo Australia interpreters properly.

Some hearing people with disabilities would like to work with interpreters as they have voice problems, but they do not qualify for this support under the NDIS. Another person reported they do not book interpreters for themselves, as they do not feel entitled to do so. This is because they usually hear and speak. However, if interpreters are available in a specific context, they will use them and find that they cope and understand better. One hard of hearing person, self-identifying as Hearing Impaired, reported they struggle in interpreted situations, as Auslan interpreters are unable to cater for both Deaf and hard of hearing people, as they have different communication needs. One person recommended that if we ask this question again in a later Deaf Census, we should add a category “I don’t use Auslan interpreters” followed by a question asking why not, to find out more about this aspect.

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Every day	6.5%	8.1%	16.7%	0.0%	0.7%	0.0%
Once a week	7.2%	8.5%	11.1%	7.4%	1.5%	3.0%
A few times a week	22.6%	26.7%	22.2%	25.9%	5.9%	9.1%
Once a month	11.1%	12.5%	16.7%	3.7%	4.4%	15.2%
A few times a month	18.9%	22.2%	22.2%	25.9%	5.1%	6.1%
Never	18.3%	7.8%	5.6%	18.5%	65.4%	33.3%
Something else (type below)	13.7%	12.7%	5.6%	18.5%	16.2%	24.2%

Table 77 Frequency of using Auslan interpreters (n=832/846)

Q39.2 (n=827/846) Deaf respondents were asked how often they use Deaf interpreters (Table 78). We also received 55 free text responses describing how often people use Deaf interpreters but not listed here. The most common response (78.1%) was that they never use Deaf interpreters. Some people prefer Auslan for social communication only, while others use live captioning when the interaction is very important. When Deaf interpreters are used, the most common response was once a month or a few times a month. The same demand and supply issue described for Auslan interpreters also affects Deaf interpreters. For example, there are no Deaf interpreters available in the Central Coast area or in Darwin. Deafblind people are the most likely group of deaf people to use Deaf interpreters. Respondents described specific contexts where they use Deaf interpreters, such as conferences and watching media online, or at work. Others reported using Deaf interpreters when they are available or whenever they are needed, such as medical appointments, hospital, school, or if they are supporting someone else.

One person reported they never use Deaf interpreters, and that they believe Deaf interpreters are only for one-on-one interactions, not on television. Someone else reported that they prefer Deaf interpreters for online information or in person to break down concepts. Another person said they do not book them formally, but one Deaf interpreter at work sometimes helps them when they get stuck communicating with difficult clients. Some people also reported they are realising that they need Deaf interpreters and would like to try working with them, especially as they get older. However, quite a few people are not yet sure of the difference between Auslan interpreters and Deaf interpreters, do not know what Deaf interpreters do exactly, have not yet had the chance to try it, or do not know how to book them.

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Every day	0.1%	0.2%	0.0%	0.0%	0.0%	0.0%
Once a week	2.0%	2.2%	11.1%	0.0%	0.0%	3.0%
A few times a week	3.0%	2.8%	0.0%	11.1%	2.2%	3.0%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Once a month	4.3%	4.4%	16.7%	3.7%	2.2%	3.0%
A few times a month	3.4%	3.2%	22.2%	7.4%	0.7%	6.1%
Never	78.1%	78.2%	44.4%	74.1%	86.0%	66.7%
Something else (type below)	6.9%	6.8%	5.6%	3.7%	6.6%	12.1%

Table 78 Frequency of using Deaf interpreters (n=827/846)

Q39.3 (n=2,032/846) Deaf respondents who use Auslan interpreters were asked where they use Auslan interpreters (Figure 22). More than one response to this question was possible. The most common response was medical appointments (56.4%), events (49.5%), work (44.7%) and social activities (40.9%). Deafblind people were more likely to use Auslan interpreters at school and home compared to other deaf people, as well as in other locations not listed in this question. Less than 10% used Auslan interpreters at university, although this could reflect the low numbers of deaf people currently at university (Table 79). We also received 69 responses describing where people use Auslan interpreters but not listed here. These included specific educational spaces, such as workshops, training courses, TAFE, dog training sessions, professional development, conferences, parent teacher interviews, online events, classes and meetings, as well as NDIS Support Coordinator meetings and at the Disability Royal Commission meetings.

Respondents reported using interpreters within physical activity spaces, such as sports training, swimming, meditation, rehabilitation and health exercise. Respondents reported using Auslan interpreters on holidays, at the dentist, at church, for funerals, on aeroplanes, at the shops, at the hairdressers, for phone calls, and via the NRS. Art spaces were also popular, including tour guides and theatre events, and theatre or art workshops. Other locations included while volunteering, to communicate with extended family, or when family are not available, or with hearing social groups, such as other seniors. Respondents also reported using interpreters for tax accountants, legal appointments, mortgage brokers, banks and Government departments such as Centrelink, real estate agents, internet service providers, transport and tradespeople. One person reported that they enjoy watching

interpreted news and other interpreted events. Others reported having no funding for interpreters or being ineligible for funding.

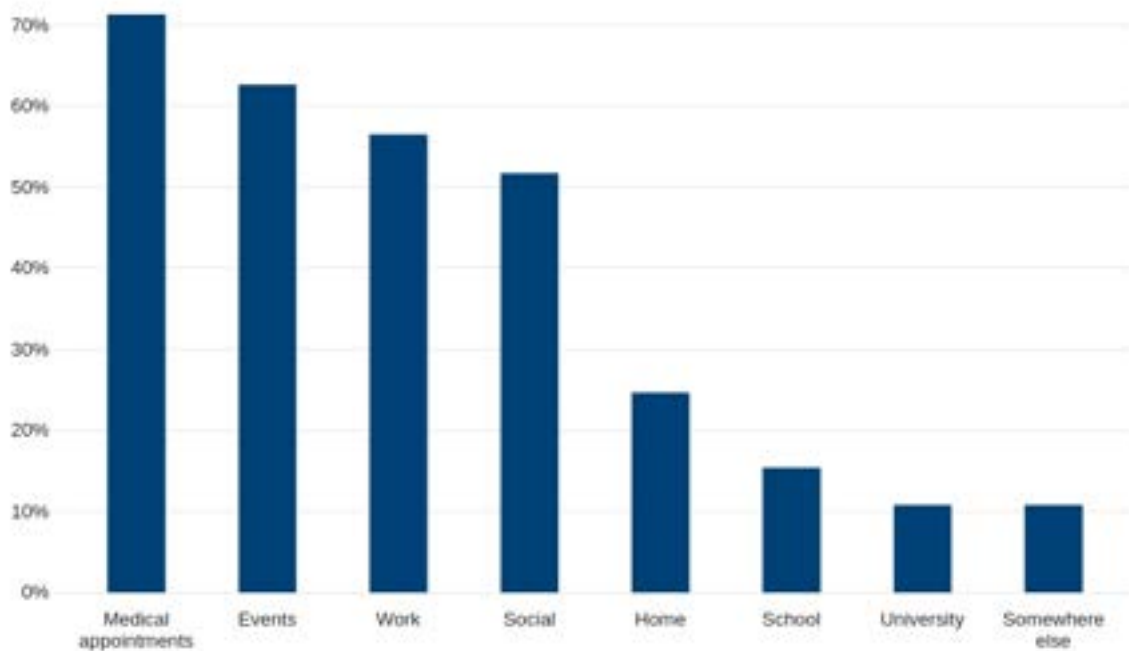


Figure 22 Where Auslan interpreters are used (n=2032/846)

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Work	44.7%	54.6%	66.7%	11.1%	11.0%	9.1%
School	12.2%	14.9%	22.2%	3.7%	2.2%	3.0%
University	8.5%	10.1%	5.6%	7.4%	2.2%	6.1%
Home	19.5%	22.6%	55.6%	22.2%	2.9%	6.1%
Social	40.9%	47.9%	66.7%	40.7%	9.6%	21.2%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Medical appointments	56.4%	67.2%	88.9%	59.3%	9.6%	21.2%
Events	49.5%	57.0%	61.1%	48.1%	19.1%	27.3%
Somewhere else (type below)	8.5%	8.5%	11.1%	11.1%	7.4%	9.1%

Table 79 Where Auslan interpreters are used (n=2032/846)

Q39.4 Deaf respondents who use Deaf interpreters (n=270/846) were asked where they use Deaf interpreters (Figure 23). More than one response to this question was possible. Bearing in mind that Deaf interpreters are used much less frequently than hearing Auslan interpreters, the most common response was social activities (6.5%), medical appointments (5.8%) and events (5.4%). Deaf interpreters are reported as being used less frequently at home (3.5%) and school (1.7%). Deafblind and Deaf and disabled people are the two groups most likely to use Deaf interpreters (Table 80). We also received 27 free text responses describing where people use Deaf interpreters but not listed here. These included at work, on television, translations, in the theatre, online courses and meetings, conferences and international meetings, church, sports, and whenever appropriate access to concepts is necessary, such as educational contexts for deaf children. One person reported using Deaf interpreters whenever possible, while others reported using them in conjunction with Auslan interpreters. Some people stated there are none available in their area, that they do not have funding for Deaf interpreters, or that they need them but do not know how to book them.

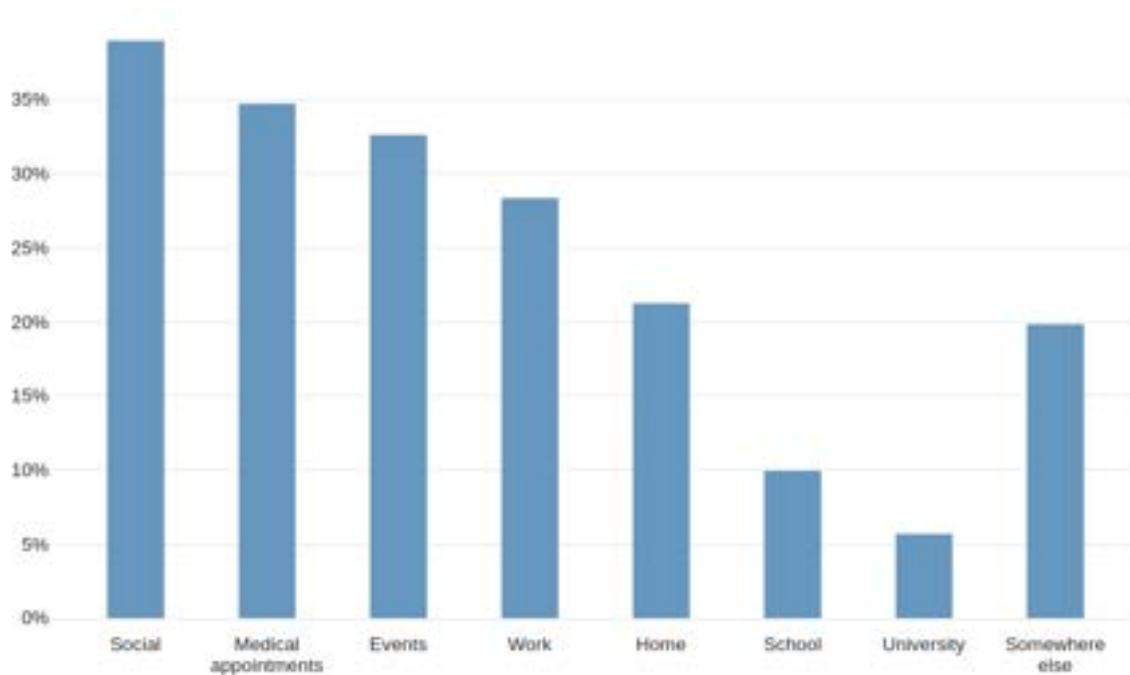


Figure 23 Where Deaf interpreters are used (n=270/846)

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Work	4.7%	5.1%	22.2%	0.0%	1.5%	6.1%
School	1.7%	1.3%	11.1%	3.7%	1.5%	3.0%
University	0.9%	0.8%	5.6%	0.0%	0.7%	3.0%
Home	3.5%	3.6%	27.8%	3.7%	0.7%	0.0%
Social	6.5%	6.2%	33.3%	11.1%	3.7%	6.1%
Medical appointments	5.8%	5.5%	22.2%	18.5%	2.9%	3.0%
Events	5.4%	5.2%	22.2%	14.8%	2.9%	3.0%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Somewhere else (type below)	3.3%	3.6%	0.0%	3.7%	2.2%	3.0%

Table 80 Where Deaf interpreters are used (n=270/846)

Q39.5 (n=679/846) Deaf respondents who use Auslan interpreters were asked if they can access Auslan interpreters when they need them (Table 81). The most common response was yes (42.1%) and sometimes (30%). However, almost one-tenth (8.2%) of deaf people who use Auslan interpreters responded they cannot access Auslan interpreters when needed. Deafblind people were most likely to experience this lack of access.

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Yes	42.1%	49.2%	50.0%	37.0%	15.4%	15.2%
No	8.2%	7.8%	22.2%	11.1%	6.6%	12.1%
Sometimes	30.0%	34.7%	22.2%	33.3%	11.0%	21.2%

Table 81 Access to Auslan interpreters (n=679/846)

Q39.6 (n=159/846) Deaf respondents who use Deaf interpreters were asked if they can access Deaf interpreters when they need them (Table 82). The most common response was sometimes (7.1%) and yes (6.6%). However, 5.1% of deaf people who use Deaf interpreters responded they cannot access Deaf interpreters when needed. Deafblind people, people who describe it differently, and Deaf and disabled people were most likely to experience this.

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Yes	6.6%	7.3%	16.7%	7.4%	2.9%	3.0%
No	5.1%	5.2%	16.7%	3.7%	4.4%	0.0%
Sometimes	7.1%	6.3%	22.2%	14.8%	3.7%	21.2%

Table 82 Access to Deaf interpreters (n=159/846)

Q39.7 Deaf respondents who use Auslan interpreters (n=656/846) were asked how far in advance they usually need to book an Auslan interpreter (Table 83). The most common response was two weeks in advance (28.7%), one week in advance (19.9%), or more than two weeks in advance (16.5%). We also received 65 free text responses describing how far in advance people usually need to book an Auslan interpreter. Most respondents reported needing to book Auslan interpreters 4-6 weeks in advance, sometimes more and up to three months, especially for preferred interpreters and for face-to-face assignments. Convo Australia interpreters are more easy to book, but these are for VRI services only. People also reported having to book last minute because an interpreter cancelled, or that interpreters do not show up anyway, or that booking success is really unpredictable.

Several people also reiterated issues with no interpreters being available in rural areas, or very limited availability, which requires more advance notice. Others stated they have no funding for interpreters. Many respondents explained that booking success depends on the context, day, and time. University bookings were described as hard to fill, as well as bookings for social activities such as arts and crafts. One person reported they need to book eight weeks in advance in Brisbane or Queensland, according to all the interpreter agencies and freelance interpreters in that region. Some people explained that someone else books interpreters for them.

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
One day in advance	4.7%	5.7%	11.1%	0.0%	0.7%	3.0%
One week in advance	19.9%	23.6%	27.8%	22.2%	4.4%	6.1%
Two weeks in advance	28.7%	34.2%	33.3%	25.9%	6.6%	15.2%
More than two weeks in advance (type below)	16.5%	18.8%	16.7%	11.1%	9.6%	6.1%
Someone else books Auslan interpreters for me	7.7%	7.0%	0.0%	14.8%	8.1%	18.2%

Table 83 Booking Auslan interpreters in advance (n=656/846)

Q39.8 Deaf respondents who use Deaf interpreters (n=133/846) were asked how far in advance they usually need to book a Deaf interpreter (Table 84). The most common response was two weeks in advance (4.8%), one week in advance (3.3%) and more than two weeks in advance (2.6%). Deafblind and Deaf and disabled people were the groups most likely to report two weeks in advance. We also received 13 free text responses describing how far in advance people usually need to book a Deaf interpreter. These responses were mixed, ranging from sometimes one week in advance to one month in advance. One person reported it is hard to find a Deaf interpreter available. Others reported they never tried to book Deaf interpreter as they prefer hearing interpreters or their family members are available, or because they have always had one working in the office when needed for short periods.

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
One day in advance	1.2%	1.6%	0.0%	0.0%	0.0%	0.0%
One week in advance	3.3%	3.5%	11.1%	7.4%	1.5%	0.0%
Two weeks in advance	4.8%	4.6%	16.7%	14.8%	2.2%	6.1%
More than two weeks in advance (type below)	2.6%	2.8%	0.0%	0.0%	2.9%	0.0%
Someone else books Auslan interpreters for me	3.8%	3.3%	5.6%	3.7%	2.9%	15.2%

Table 84 Booking Deaf interpreters in advance (n=133/846)

Q39.9 (n=1,164/846) Deaf respondents who use Auslan interpreters and/or Deaf interpreters were asked why they have not been able to access an Auslan interpreter or Deaf interpreter when needed (Figure 24). More than one response to this question was possible. The most common response was that there are not enough interpreters available (57.7%), that the booking was too short notice (45.9%), or another reason not listed in this question (10.6%). Deaf and Deafblind people were most likely to respond that there are not enough Auslan interpreters available. Deafblind people were also most likely to respond that the booking agency does not understand their request, and/or that the booking agency is not accessible for them (Table 85). We also received 154 responses describing why deaf people were not able to access an interpreter when needed. These responses relate to funding, logistics, skills, and ethics.

Respondents reported they could not access NDIS or EAF funding, or were too constrained by these budgets. They also reported many logistic constraints, such as interpreters only

wanting to work VRI services or interpreter agencies only offering these services, even when face-to-face interpreting is both needed and requested. Interpreters not being available at certain times, such as on the weekend, or not being available at all. Not having enough agencies to choose from. Travel costs are prohibitively expensive. Booking interpreters at short notice, especially during emergencies, often means that only unsuitable and poorly skilled interpreters are available. Respondents also reiterated that some specialist doctors do not accept VRI in their consultation rooms, that some hospitals will not book interpreters even if requested in notes, and that many organisations will not pay for interpreters even when requested.

Regarding skills, respondents reported there are not enough interpreters at sufficiently advanced levels for the bookings they require, especially specialist medical appointments, for men's health, for neurodivergent people, for deafblind people, and for hard of hearing people who use Auslan receptively. The lack of male interpreters was highlighted as a persistent issue. One person said they were restricted by Covid rules in the hospital. One Deafblind person reported they require a CommGuide (Deafblind Communication Guide), but these services are not available from traditional outlets. Booking agencies were criticised as not communicating well, not using common sense, and not explaining their processes for finding interpreters to clients. Some people reported they prefer to book freelance interpreters privately rather than through an agency.

Many respondents reported they are not comfortable with any interpreter, and prefer to work with only their preferred interpreters with whom they feel safe and comfortable. One person reported they do not feel comfortable booking interpreters in the current environment, as someone else may need them more. Another said they cannot work out which Auslan interpreter would suit them, while someone else explained they are not yet fluent enough. Others said interpreters do not come even when they are booked. One person said they often do not realise they need an interpreter until after the fact. Others explained they never book interpreters because they only use interpreters at events that are arranged by other people. Some people reported they did not know how to book interpreters.

A range of ethical issues were reported by respondents. These include interpreter biases and conflicts of interest, particularly the lack of engagement with deaf people and communities from access and community perspectives, whereby interpreters appear to be focusing solely on economic motivations. One person stopped booking an interpreter who charges GST on top of their \$120 hourly rate, viewing this as excessive. Others reported that booking agencies are greedy, focusing only on making the booking, and without further consideration of interpreter compatibility, advocacy, and consultation with the deaf client. For example, one person described experiences of interpreters telling them they have not been contacted for their booking requests, even when they were available. They said, "It

seems the booking agency likes to wait until the last minute and then lie and tell me there are no interpreters available, then force me to use VRI even though I've had [internet] connection issues." Experiences such as these contribute to a community-wide perception that booking agencies are not a service for deaf people, they are only focused on making money. This was described as a lack of community accountability.

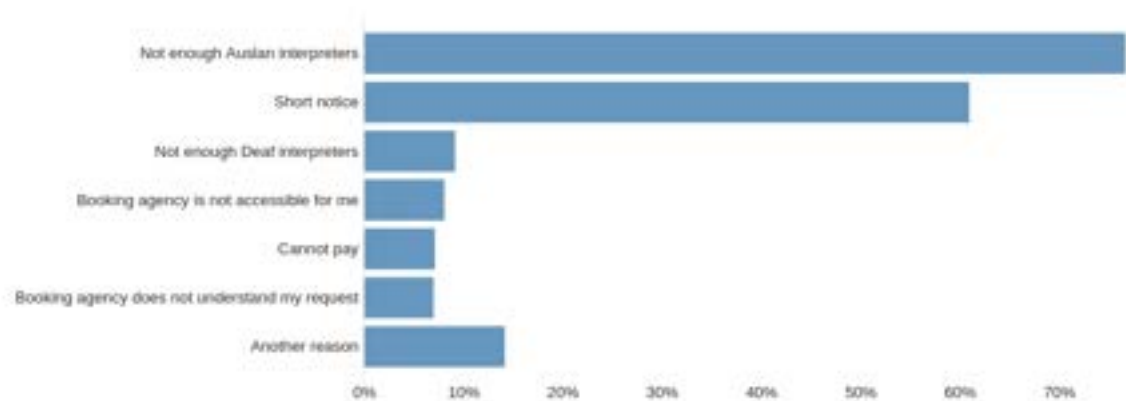


Figure 24 Reasons Auslan interpreter or Deaf interpreter not available (n=1164/846)

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Short notice	45.9%	54.0%	55.6%	40.7%	13.2%	24.2%
Cannot pay	5.3%	4.1%	0.0%	11.1%	8.8%	12.1%
Not enough Auslan interpreters	57.7%	67.9%	88.9%	55.6%	14.0%	27.3%
Not enough Deaf interpreters	6.9%	6.8%	27.8%	11.1%	4.4%	3.0%
Booking agency does not understand my request	5.2%	5.9%	16.7%	0.0%	1.5%	6.1%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Booking agency is not accessible for me	6.0%	6.5%	16.7%	11.1%	1.5%	6.1%
Another reason (type below)	10.6%	10.6%	16.7%	18.5%	6.6%	18.2%

Table 85 Reasons Auslan interpreter or Deaf interpreter not available (n=1164/846)

Q39.10 (n=1,386/846) Deaf respondents who use Auslan interpreters were asked which Auslan interpreting agencies are easy to book (Figure 25). More than one response to this question was possible. The most common responses were Auslan Services (26.4%), Deaf Connect Interpreting (23.0%), NABS (20.8%), and Convo Australia (17.6%). Sweeney Interpreting (14.4%), Anytime Auslan (10.3%) and Expression Interpreting (9.7%) were selected less frequently overall, although higher numbers of Deafblind people responded that Sweeney Interpreting and Expression Interpreting are easy to book (Table 86). It is important to bear in mind that 'easy to book' does not say anything about the quality of agency services or the interpreting services they provide, as this question asked specifically about the agency booking system.

It is also important to note that the data for this question may have been influenced by two key factors. Firstly, Auslan interpreting agencies urging their clients and employees to select favourable responses to this question. Secondly, some Auslan interpreting agencies offer their services nationally or state-wide, while others are smaller and more regional. The National Relay Service (NRS) is also not an Auslan interpreting provider, so these numbers may instead reflect the ease of connecting to callers via NRS internet relay services.

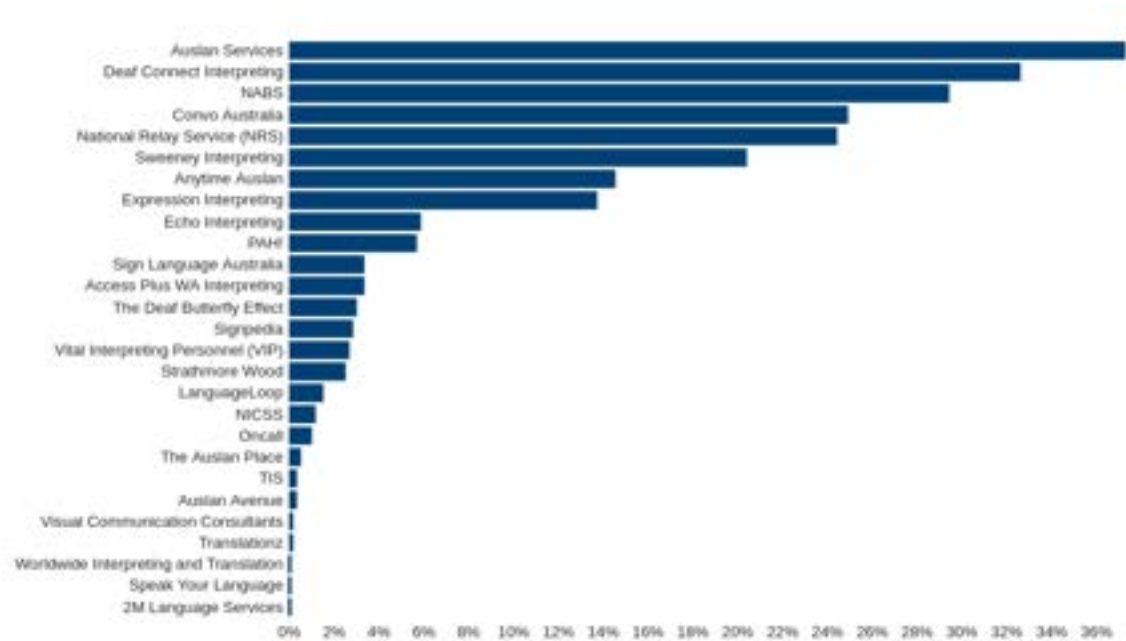


Figure 25 Ease of booking Auslan interpreting agencies (n=1386/846)

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
2M Language Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Access Plus WA Interpreting	2.4%	2.7%	11.1%	0.0%	0.0%	3.0%
Anytime Auslan	10.3%	12.7%	5.6%	7.4%	2.9%	0.0%
Auslan Avenue	0.2%	0.3%	0.0%	0.0%	0.0%	0.0%
Auslan Services	26.4%	31.8%	27.8%	22.2%	6.6%	6.1%
Convo Australia	17.6%	21.0%	16.7%	18.5%	2.9%	12.1%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Deaf Connect Interpreting	23.0%	27.2%	22.2%	25.9%	4.4%	18.2%
Echo Interpreting	4.1%	4.9%	5.6%	3.7%	0.7%	3.0%
Expression Interpreting	9.7%	10.9%	22.2%	7.4%	3.7%	6.1%
LanguageLoop	1.1%	0.8%	16.7%	0.0%	0.7%	0.0%
NABS	20.8%	22.9%	50.0%	29.6%	6.6%	15.2%
National Relay Service (NRS)	17.3%	19.8%	27.8%	18.5%	4.4%	15.2%
NICSS	0.8%	0.9%	5.6%	0.0%	0.0%	0.0%
Oncall	0.7%	0.8%	0.0%	3.7%	0.0%	0.0%
PAH!	4.0%	4.6%	5.6%	7.4%	1.5%	0.0%
Sign Language Australia	2.4%	2.7%	0.0%	3.7%	1.5%	0.0%
Signpedia	2.0%	2.4%	0.0%	0.0%	1.5%	0.0%
Speak Your Language	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Strathmore Wood	1.8%	2.2%	0.0%	3.7%	0.0%	0.0%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Sweeney Interpreting	14.4%	16.5%	33.3%	14.8%	5.1%	3.0%
The Auslan Place	0.4%	0.3%	5.6%	0.0%	0.0%	0.0%
The Deaf Butterfly Effect	2.1%	2.5%	0.0%	0.0%	1.5%	0.0%
TIS	0.2%	0.2%	0.0%	0.0%	0.7%	0.0%
Translationz	0.1%	0.0%	0.0%	3.7%	0.0%	0.0%
Visual Communication Consultants	0.1%	0.2%	0.0%	0.0%	0.0%	0.0%
Vital Interpreting Personnel (VIP)	1.9%	1.9%	16.7%	0.0%	0.7%	0.0%
Worldwide Interpreting and Translation	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

Table 86 Ease of booking Auslan interpreting agencies (n=1386/846)

Q39.11 Deaf respondents (n=846) were asked if they want to add more information about accessing Auslan interpreters or Deaf interpreters. We received 154 free text responses describing additional information about accessing Auslan interpreters or Deaf interpreters. These responses included Deaf, Deafblind and hard of hearing people's preferences for booking interpreters and requests for improvements to interpreter booking agencies. They also documented ongoing issues with interpreters and funding.

Respondents reiterated the need for more trained and qualified Auslan interpreters and Deaf interpreters to meet demand. One person questioned how some interpreters who are good at signing still failed their exams. Many respondents reported that they prefer to work

with freelance interpreters rather than book through an agency. This way they can be more assured of working with their preferred interpreters and maintaining their privacy. One person expressed frustration that booking with an agency means their personal information is “splattered around” when agencies use the “contact all, first to respond gets the job” method. This negates deaf people’s cultural safety and right to privacy. Some people reported they refuse to book through an agency at all. Others book via an agency only when requested by the freelance interpreter they have contacted, and after they have confirmed their availability. One person reported that Deaf interpreters do not have much work unless they are fluent in World Federation of the Deaf International Sign, American Sign Language, and/or Tactile Auslan for Deafblind people.

Many people reported they would like interpreters to be more punctual for appointments, to stop cancelling at the last minute for better paying jobs, and to accept more face-to-face assignments rather than VRI. Deaf people reported that Convo Australia is a great service for casual and work interpreting situations, as well as being available most of the time. However, it does not replace the need for in-person and face-to-face interpreting in other situations. One person proposed a quota for interpreters accepting in-person work. There were repeated frustrations that interpreters make an income from Auslan (“our language”) at the expense of deaf people’s full access to clear information, yet no agency is willing to mandate interpreters to accept at least some face-to-face assignments in addition to VRI.

These issues are exacerbated by a retiring workforce and an urgent need to support people to train as Auslan interpreters and Deaf interpreters in smaller towns and remote locations across Australia. Respondents would like to see more support for online and face-to-face courses for fluent Auslan signers, and for those who want to take the NAATI test to become qualified interpreters. There is a need for more specialised interpreters, including in the performing arts, as well as more competition amongst interpreting agencies for these areas. Several people suggested that fees for VRI services should be reduced to provide incentive for interpreters to accept more in-person assignments, especially when VRI quality can be poor due to variable internet connections. One person complained the interpreter logs off VRI without asking if the deaf client is finished, and that they often need to contact interpreters before or after the assignment, but are given no way of doing this, even though the interpreters can easily contact the deaf client via information in the booking form.

Agency booking systems were heavily criticised as being clunky, confusing, and intrusive. Respondents reported they are forced to repeat lots of information for similar bookings, that their list of preferred interpreters should be adjustable so they can change it depending on the booking, and that it be made easier to claim EAF or NDIS options. Another person specified they would like to have more options in the booking form, such as the ability to accept VRI if there is no face-to-face interpreter available. Others requested more clear instructions on how to book. Often what happens is the agency cannot find a face-to-face

interpreter and proposes VRI, but by the time the client responds, it is too late and the interpreter is no longer available. They also complained that staff at booking agencies do not understand fluent Auslan. One person suggested there should be one organisation for Auslan interpreters so that it is less confusing. Others reported the stress and anxiety they experience when booking via an agency, because they never know the status of the booking and cannot plan. Many people were heavily critical of specific Deaf community service providers being contracted to provide interpreters by some Government and hospital services. They feel that this should be changed so that deaf people using these services can book their own interpreters from whichever agency they want to use and pay from their NDIS, thus retaining choice and control when accessing Government and hospital services.

Respondents documented many negative experiences regarding their efforts to book interpreters. Deafblind people reported a major issue is the small number of Deafblind interpreters available across Australia. Another person reported that the NDIS will not fund interpreters without proof of being deaf. However, this person is unable to get tested for deafness because their other disabilities make access difficult. Someone else reported their university made them exempt from a work placement, citing that it was inappropriate to use an interpreter during work experience. This person was very disappointed by this action, especially as they saw their peers pick up jobs and other career opportunities via work placements. They even contacted the organisation they wanted to work with, who confirmed it would be fine to do the placement with an Auslan interpreter. This led the person to conclude that the university simply did not want to pay the interpreter fees.

Several people reported they would like to work with fluent, male interpreters, especially in mental health contexts. One person with poor mental health reported lacking the motivation to seek help because they cannot find the right interpreter for such a private yet crucial action. Others considered they should start using Deaf interpreters more. One person would like to learn more about interpreters' individual style, tone and voice in order to have more information about who to choose for specific contexts. Many people expressed curiosity about trying Deaf interpreter services, but not knowing how to book them. However, one person commented they are not sure why Deaf interpreters are required, as it "delays the relaying of information." They accepted Deaf interpreters are suitable for deaf people with intellectual disabilities, but not for events. In these cases, people should "stick with actual interpreters." Hard of hearing people reported they want others to understand that they may also need interpreters.

Respondents reported wishing that Convo Australia was time-based, without the need to pay a monthly subscription. However, they specifically appreciate the fact that Convo Australia can meet short-notice demands. Others reported that a specific Deaf community service provider is the worst agency in Australia, and that an alternative service provider was more comfortable. The NDIS was also singled out as needing extensive improvements,

specifically increases in funding for Auslan interpreters. Many people reported they do not have enough funding to cover their basic needs for interpreted hours. Instead, they are forced to choose which services they can have interpreted, and which services they must do without. One person reported they have not applied for NDIS yet, because it is a “rabbit maze”, even though they would use it if funded.

Respondents also provided more information about people who are currently missing out on interpreting services, even though they need them. This includes deaf people over 65, who do not receive any interpreter funding support and/or are constrained to specific agencies contracted by the Government. One person expressed they would like to have a support person once per week, as they are not confident with some things. Others are ineligible for NDIS and EAF because of their citizenship or migration status.

People also shared thoughts on improving awareness of interpreters in the general community. These included information about educating healthcare professionals and hospitals about the importance of interpreters for deaf people. For example, one person reported requesting an interpreter for the hospital where their spouse was in emergency. The hospital declined as the person was not the patient. People raised the need for interpreting courses at all regional TAFEs where there is a significant Deaf community, such as Tweed Heads and Lismore, including subsidised costs to make it more affordable for more diverse people to train as interpreters and therefore represent more deaf people via Auslan interpreting. Another suggested face-to-face workshop roadshow to educate the Deaf community about their rights to interpreters and how to work with interpreters.

3.11 Language use

Q40.1 (n=2,622/1,215) All respondents were asked what language(s) they use at home (Figure 26). More than one response to this question was possible. The most common responses were Auslan (76.2%), spoken English (64.4%) and written English (39.3%). Use of home signs was also reported by Deaf, Deaf and disabled, hard of hearing, people who describe it differently, and hearing people (14.7%). Overall, 13.6% reported using other sign and/or spoken languages, including International Sign, American Sign Language, British Sign Language, New Zealand Sign Language, and Indigenous Sign Language, while 5.2% reported using gestures. Only 2.3% of all respondents reported using Tactile Auslan at home, mostly Deafblind people (Table 87 and Table 88).

Respondents also reported using other languages at home. Many different spoken and written languages were reported, including Turkish, Tswana, Tagalog, Spanish, Slovene, Serbian, Samoan, Russian, Polish, Pitjantjatjara, Māori, Kurdish, Kirundi, Japanese, Italian, Indonesian, Hindi, German, French, Finnish, English, Dinka, Danish, and Africans. Other signed languages reported include Indian Sign Language, Assam Sign Language, South

African Sign Language, Malaysian Sign Language, Korean Sign Language, Irish Sign Language, German Sign Language, French Sign Language, and Finnish Sign Language. Some people reported using Signed English or Key Word Signs. Others stated they live alone.

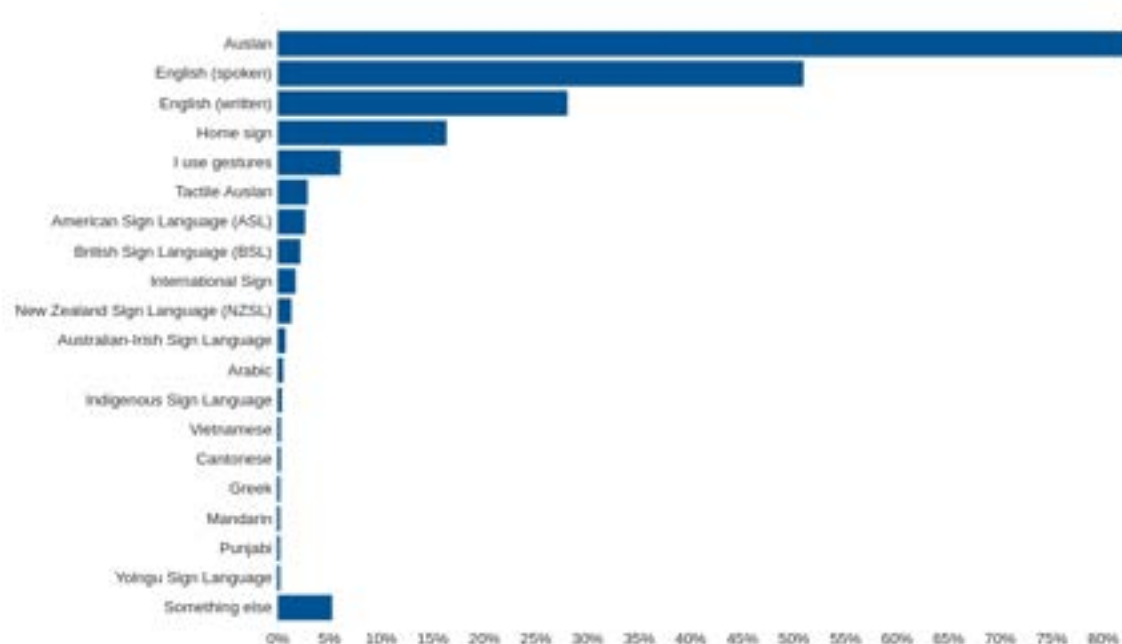


Figure 26 Language(s) used at home (n=2622/1215)

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)	No, I am hearing
Auslan	76.2%	89.2%	77.8%	96.3%	49.3%	69.7%	62.9%
Tactile Auslan	2.3%	2.4%	38.9%	0.0%	0.7%	3.0%	1.1%
English (written)	39.3%	23.3%	38.9%	40.7%	39.0%	57.6%	65.0%
English (spoken)	64.4%	40.3%	50.0%	59.3%	89.7%	84.8%	95.7%
Home sign	14.7%	16.5%	0.0%	37.0%	12.5%	21.2%	11.1%
Australian-Irish Sign Language	0.5%	0.9%	0.0%	0.0%	0.0%	0.0%	0.0%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)	No, I am hearing
Indigenous Sign Language	0.2%	0.5%	0.0%	0.0%	0.0%	0.0%	0.0%
Yolngu Sign Language	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
New Zealand Sign Language (NZSL)	1.0%	1.4%	5.6%	0.0%	0.7%	0.0%	0.3%
American Sign Language (ASL)	2.5%	3.2%	0.0%	0.0%	0.7%	3.0%	2.2%
British Sign Language (BSL)	1.7%	2.2%	5.6%	7.4%	0.7%	0.0%	0.8%
International Sign	1.2%	1.9%	5.6%	0.0%	0.0%	3.0%	0.0%
Mandarin	0.1%	0.0%	0.0%	3.7%	0.0%	0.0%	0.0%
Cantonese	0.2%	0.2%	0.0%	0.0%	0.7%	0.0%	0.3%
Vietnamese	0.2%	0.3%	0.0%	0.0%	0.0%	0.0%	0.0%
Arabic	0.3%	0.3%	0.0%	0.0%	1.5%	0.0%	0.0%
Punjabi	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Greek	0.2%	0.2%	0.0%	0.0%	0.0%	0.0%	0.5%
Language(s) not listed above (type below)	5.5%	3.3%	0.0%	14.8%	11.0%	12.1%	6.2%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)	No, I am hearing
I use gestures	5.2%	4.1%	0.0%	29.6%	8.8%	15.2%	3.3%

Table 87 Language(s) used at home (n=2622/1215)

	Total	Deaf total	Hearing
Total Count (All)	1.215.0	846.0	369.0
Auslan	76.2%	82.0%	62.9%
Tactile Auslan	2.3%	2.8%	1.1%
English (written)	39.3%	28.0%	65.0%
English (spoken)	64.4%	50.8%	95.7%
Home sign	14.7%	16.3%	11.1%
Australian-Irish Sign Language	0.5%	0.7%	0.0%
Indigenous Sign Language	0.2%	0.4%	0.0%
Yolngu Sign Language	0.0%	0.0%	0.0%
New Zealand Sign Language (NZSL)	1.0%	1.3%	0.3%
American Sign Language (ASL)	2.5%	2.6%	2.2%
British Sign Language (BSL)	1.7%	2.1%	0.8%
International Sign	1.2%	1.7%	0.0%

	Total	Deaf total	Hearing
Mandarin	0.1%	0.1%	0.0%
Cantonese	0.2%	0.2%	0.3%
Vietnamese	0.2%	0.2%	0.0%
Arabic	0.3%	0.5%	0.0%
Punjabi	0.0%	0.0%	0.0%
Greek	0.2%	0.1%	0.5%
Language(s) not listed above (type below)	5.5%	5.2%	6.2%
I use gestures	5.2%	6.0%	3.3%

Table 88 Language(s) used at home (n=2622/1215)

Q40.2 (n=1,244/846) Deaf respondents currently working were asked what language(s) they use at work (Figure 27). More than one response to this question was possible. The most common responses were Auslan (35.3%), written English (27.4%), and spoken English (26.4%). Overall, 4.5% reported using other sign and/or spoken languages, including International Sign, British Sign Language, and Indigenous Sign Language, while 5.3% reported using gestures. Only 2.1% of all respondents use Tactile Auslan at work, mostly Deafblind people (Table 89). No other languages were reported.

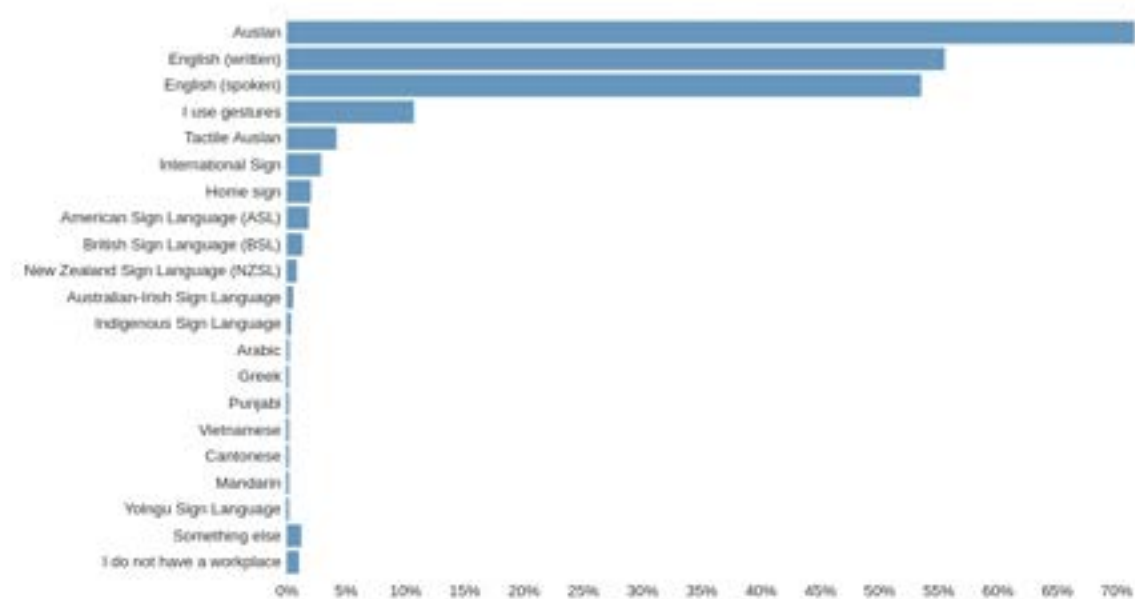


Figure 27 Language(s) used at work (n=1244/846)

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Auslan	35.3%	59.0%	50.0%	22.2%	27.2%	12.1%
Tactile Auslan	2.1%	3.0%	16.7%	0.0%	1.5%	3.0%
English (written)	27.4%	38.6%	50.0%	14.8%	44.9%	45.5%
English (spoken)	26.4%	32.3%	50.0%	25.9%	60.3%	57.6%
Home sign	1.0%	1.6%	0.0%	0.0%	0.7%	3.0%
Australian-Irish Sign Language	0.2%	0.5%	0.0%	0.0%	0.0%	0.0%
Indigenous Sign Language	0.2%	0.2%	0.0%	0.0%	0.0%	3.0%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Yolngu Sign Language	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
New Zealand Sign Language (NZSL)	0.4%	0.5%	0.0%	0.0%	0.7%	3.0%
American Sign Language (ASL)	0.9%	1.6%	0.0%	0.0%	0.0%	3.0%
British Sign Language (BSL)	0.7%	0.8%	0.0%	3.7%	0.7%	3.0%
International Sign	1.4%	2.4%	0.0%	0.0%	0.7%	3.0%
Mandarin	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Cantonese	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Vietnamese	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Arabic	0.1%	0.2%	0.0%	0.0%	0.0%	0.0%
Punjabi	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Greek	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Language(s) not listed above (type below)	0.6%	1.1%	0.0%	0.0%	0.0%	0.0%
I use gestures	5.3%	7.8%	5.6%	3.7%	7.4%	9.1%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Not applicable - I do not have a workplace	0.5%	0.6%	0.0%	3.7%	0.0%	3.0%

Table 89 Language(s) used at work (n=1244/846)

Q40.3 Deaf respondents currently at school (n=37/846) were asked what language(s) they currently use at school (Figure 28). More than one response to this question was possible. Only Deaf, Deaf and disabled, and hard of hearing people responded to this question. The most common responses were spoken English (1.5%), Auslan (1.5%), and written English (0.9%). Only 0.2% reported using other signed and/or spoken languages, including home sign and other languages not listed here. None reported using Tactile Auslan at school (Table 90). One person reported using oral methods at school.

Q40.3 - What language(s) do you use at school?

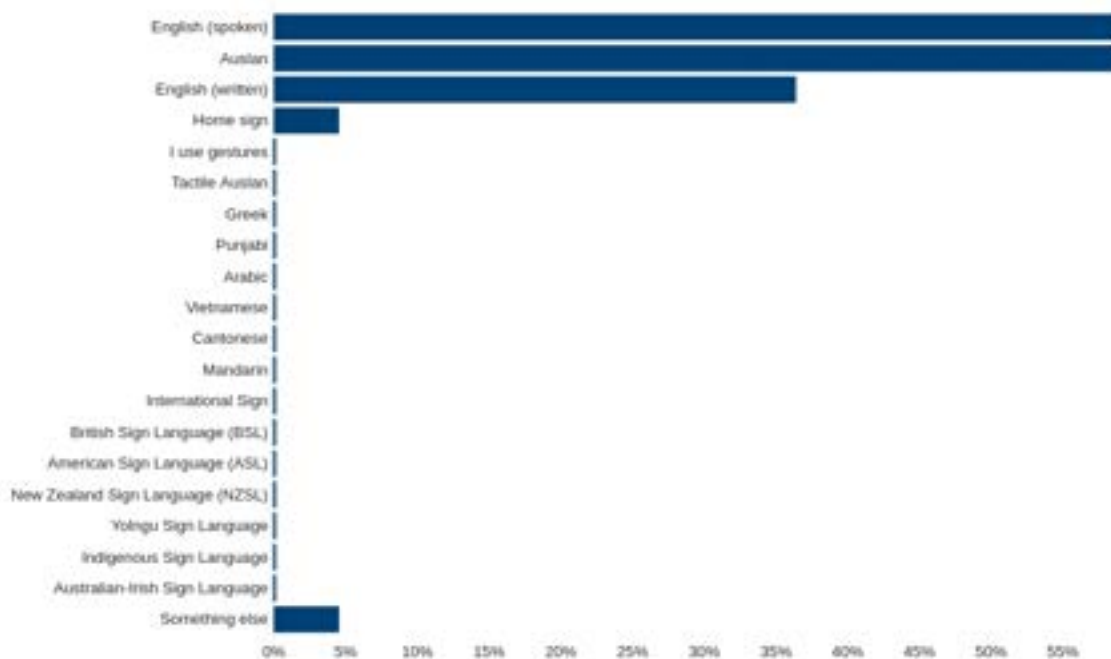


Figure 28 Language(s) used at school (n=37/846)

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Auslan	1.5%	1.7%	0.0%	3.7%	0.7%	0.0%
Tactile Auslan	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
English (written)	0.9%	1.3%	0.0%	0.0%	0.0%	0.0%
English (spoken)	1.5%	1.7%	0.0%	0.0%	1.5%	0.0%
Home sign	0.1%	0.2%	0.0%	0.0%	0.0%	0.0%
Australian-Irish Sign Language	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Indigenous Sign Language	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Yolngu Sign Language	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
New Zealand Sign Language (NZSL)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
American Sign Language (ASL)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
British Sign Language (BSL)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
International Sign	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Mandarin	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Cantonese	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Vietnamese	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Arabic	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Punjabi	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Greek	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Language(s) not listed above (type below)	0.1%	0.2%	0.0%	0.0%	0.0%	0.0%
I use gestures	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Not applicable - I do not go to school	0.1%	0.2%	0.0%	0.0%	0.0%	0.0%

Table 90 Language(s) used at school (n=37/846)

Q40.4 Deaf respondents currently studying at university (n=104/846) were asked what language(s) they currently use at university (Figure 29). More than one response to this question was possible. No Deafblind people responded to this question. The most common responses were written English (4.6%), Auslan (3.8%), and spoken English (3.7%). Only 0.1% reported using other signed and/or spoken languages not listed here. None reported using Tactile Auslan at university (Table 91). One person reported they do not understand most of what is said at university.

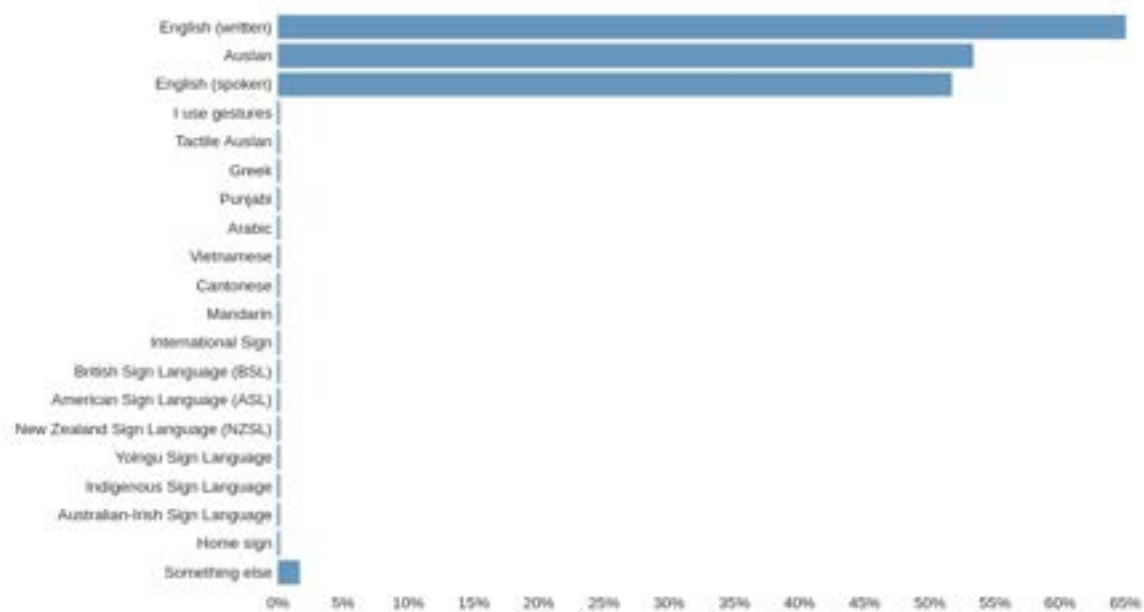


Figure 29 Language(s) used at university (n=104/846)

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Auslan	3.8%	4.4%	0.0%	3.7%	2.2%	0.0%
Tactile Auslan	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
English (written)	4.6%	3.8%	0.0%	3.7%	8.8%	6.1%
English (spoken)	3.7%	1.7%	0.0%	7.4%	11.0%	9.1%
Home sign	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Australian-Irish Sign Language	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Indigenous Sign Language	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Yolngu Sign Language	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
New Zealand Sign Language (NZSL)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
American Sign Language (ASL)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
British Sign Language (BSL)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
International Sign	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Mandarin	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Cantonese	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Vietnamese	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Arabic	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Punjabi	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Greek	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Language(s) not listed above (type below)	0.1%	0.0%	0.0%	0.0%	0.0%	3.0%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
I use gestures	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Not applicable - I do not go to university	0.1%	0.2%	0.0%	0.0%	0.0%	0.0%

Table 91 Language(s) used at university (n=104/846)

Q40.5 Deaf respondents currently studying at TAFE (n=118/846) were asked what language(s) they currently use at TAFE (Figure 30). More than one response to this question was possible. The most common responses were Auslan (5.9%), written English (3.8%), and spoken English (3.3%). Only 0.3% reported using other signed and/or spoken languages not listed here, such as American Sign Language, 0.2% reported using Tactile Auslan, and 0.2% reported using gestures (Table 92). One person reported also using Kurdish.

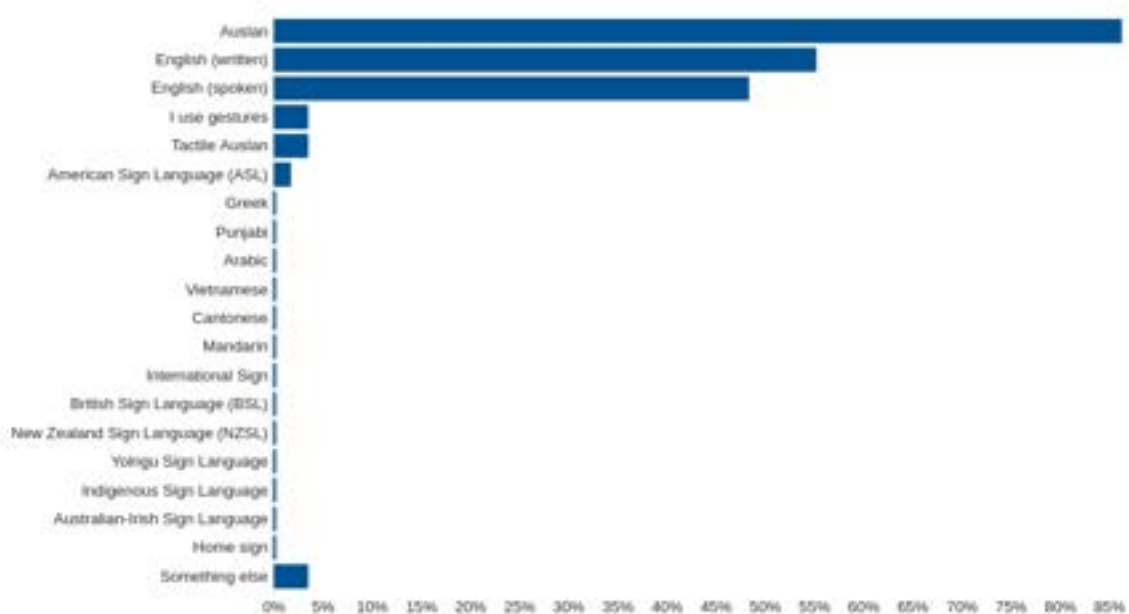


Figure 30 Language(s) used at TAFE (n=118/846)

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Auslan	5.9%	5.2%	5.6%	3.7%	8.8%	9.1%
Tactile Auslan	0.2%	0.2%	5.6%	0.0%	0.0%	0.0%
English (written)	3.8%	3.2%	11.1%	0.0%	5.1%	9.1%
English (spoken)	3.3%	1.9%	11.1%	0.0%	8.8%	6.1%
Home sign	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Australian-Irish Sign Language	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Indigenous Sign Language	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Yolngu Sign Language	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
New Zealand Sign Language (NZSL)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
American Sign Language (ASL)	0.1%	0.2%	0.0%	0.0%	0.0%	0.0%
British Sign Language (BSL)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
International Sign	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Mandarin	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Cantonese	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Vietnamese	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Arabic	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Punjabi	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Greek	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Language(s) not listed above (type below)	0.2%	0.2%	0.0%	0.0%	0.7%	0.0%
I use gestures	0.2%	0.3%	0.0%	0.0%	0.0%	0.0%
Not applicable - I do not go to TAFE	0.1%	0.2%	0.0%	0.0%	0.0%	0.0%

Table 92 Language(s) used at TAFE (n=118/846)

Q40.6 (n=2,579/1,215) All respondents were asked what language(s) they use when socialising with other Deaf, Deafblind, or hard of hearing people (Figure 31). More than one response to this question was possible. The most common responses were Auslan (93.7%), spoken English (33.8%) and written English (27.2%). 22.8% reported using other signed and/or spoken languages, such as International Sign, American Sign Language, British Sign Language, New Zealand Sign Language, Australian-Irish Sign Language, and Indigenous Sign Language. 16.7% reported using Tactile Auslan and 9.4% reported using gestures and 6.3% reported using home signs, especially Deaf and disabled people and people who describe it differently (Table 93 and Table 94).

Other languages reported include Swedish Sign Language, South African Sign Language, Non-Conventional Sign Language, Langues des Signes Française, Korean Sign Language, Japanese Sign Language, Chinese Sign Language, Finnish Sign Language, and Indigenous gestures. Others reported using signed systems such as Signed English and Key Word Sign, or written systems such as written English and Braille. Some people reported speaking in English, but receiving information in written English. People also reported using Japanese, Kurdish, Kungarakana, and English.

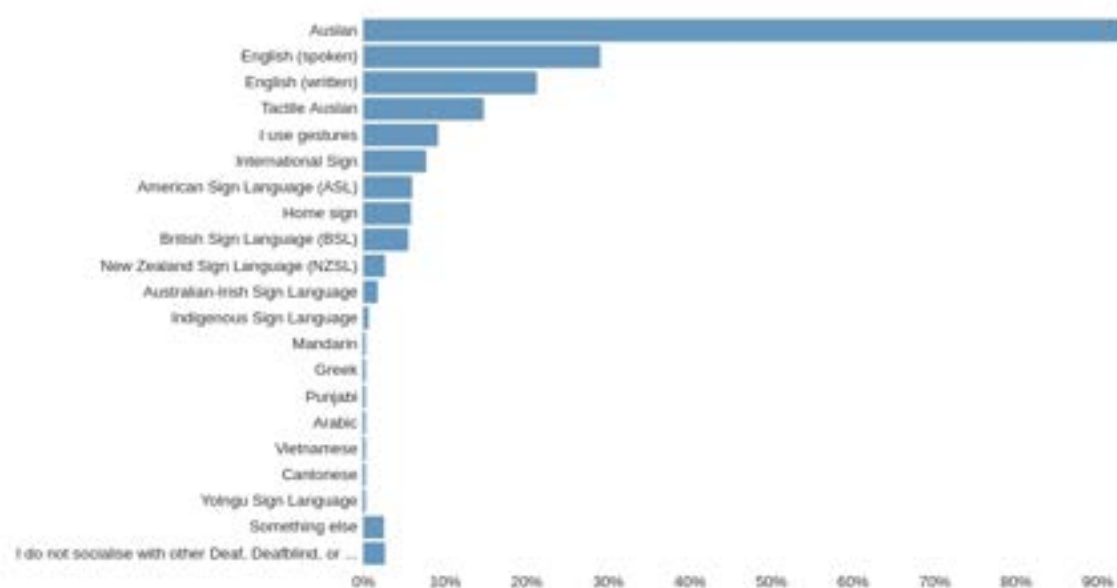


Figure 31 Language(s) used when socialising with Deaf, Deafblind and hard of hearing people (n=2579/1215)

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)	No, I am hearing
Auslan	93.7%	96.7%	83.3%	100.0%	74.3%	87.9%	96.2%
Tactile Auslan	16.7%	15.0%	50.0%	14.8%	5.9%	24.2%	21.4%
English (written)	27.2%	16.9%	22.2%	29.6%	34.6%	39.4%	41.2%
English (spoken)	33.8%	22.0%	38.9%	33.3%	54.4%	48.5%	45.0%
Home sign	6.3%	4.0%	5.6%	25.9%	8.8%	12.1%	7.6%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)	No, I am hearing
Australian-Irish Sign Language	1.3%	1.7%	11.1%	0.0%	0.7%	0.0%	0.5%
Indigenous Sign Language	0.7%	0.8%	0.0%	0.0%	0.0%	0.0%	1.1%
Yolngu Sign Language	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%	0.5%
New Zealand Sign Language (NZSL)	2.3%	3.2%	5.6%	0.0%	0.7%	0.0%	1.6%
American Sign Language (ASL)	5.5%	6.6%	22.2%	7.4%	0.7%	3.0%	4.6%
British Sign Language (BSL)	4.4%	5.9%	16.7%	7.4%	1.5%	6.1%	1.9%
International Sign	5.8%	9.2%	16.7%	0.0%	2.2%	3.0%	1.6%
Mandarin	0.1%	0.0%	0.0%	3.7%	0.0%	0.0%	0.0%
Cantonese	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Vietnamese	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Arabic	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.3%
Punjabi	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Greek	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)	No, I am hearing
Language(s) not listed above (type below)	2.4%	2.2%	0.0%	7.4%	2.2%	6.1%	2.2%
I use gestures	9.4%	7.0%	0.0%	22.2%	12.5%	30.3%	10.0%
Not applicable - I do not socialise with other Deaf, Deafblind, or hard of hearing people	2.3%	1.3%	0.0%	0.0%	9.6%	3.0%	1.6%

Table 93 Language(s) used when socialising with Deaf, Deafblind and hard of hearing people (n=2579/1215)

	Total	Deaf total	Hearing
Total Count (All)	1.215.0	846.0	369.0
Auslan	93.7%	92.6%	96.2%
Tactile Auslan	16.7%	14.7%	21.4%
English (written)	27.2%	21.2%	41.2%
English (spoken)	33.8%	29.0%	45.0%
Home sign	6.3%	5.8%	7.6%
Australian-Irish Sign Language	1.3%	1.7%	0.5%
Indigenous Sign Language	0.7%	0.6%	1.1%

	Total	Deaf total	Hearing
Yolngu Sign Language	0.2%	0.0%	0.5%
New Zealand Sign Language (NZSL)	2.3%	2.6%	1.6%
American Sign Language (ASL)	5.5%	5.9%	4.6%
British Sign Language (BSL)	4.4%	5.4%	1.9%
International Sign	5.8%	7.7%	1.6%
Mandarin	0.1%	0.1%	0.0%
Cantonese	0.0%	0.0%	0.0%
Vietnamese	0.0%	0.0%	0.0%
Arabic	0.1%	0.0%	0.3%
Punjabi	0.0%	0.0%	0.0%
Greek	0.0%	0.0%	0.0%
Language(s) not listed above (type below)	2.4%	2.5%	2.2%
I use gestures	9.4%	9.1%	10.0%
Not applicable - I do not socialise with other Deaf, Deafblind, or hard of hearing people	2.3%	2.6%	1.6%

Table 94 Language(s) used when socialising with Deaf, Deafblind and hard of hearing people (n=2579/1215)

Q40.7 (n=2,409/1,215) All respondents were asked what language(s) they use when socialising with hearing people (Figure 32). More than one response to this question was possible. The most common responses were spoken English (72.9%), written English (54.9%), Auslan (38.3%), and gestures (17.9%). 5.8% reported using other signed and/or spoken languages not listed here, such as American Sign Language, International Sign, New Zealand Sign Language, British Sign Language, Arabic and Greek. 1.5% reported using Tactile Auslan, including just 0.3% of hearing people. Only 0.2% of all respondents reported using gestures. (Table 95 and Table 96).

Other languages that were reported being used include Spanish, French, Slovene Croatian, German, Pitjantjatjara, Kurdish, Kungarakana, Kirundi, Italian, Danish, Scottish Gaelic, and English. Others reported using signed systems such as Signed English, Key Word Sign, and fingerspelling. Other strategies include writing pen and paper or typing on a mobile phone and lipreading. One person reported they are left out and bored.

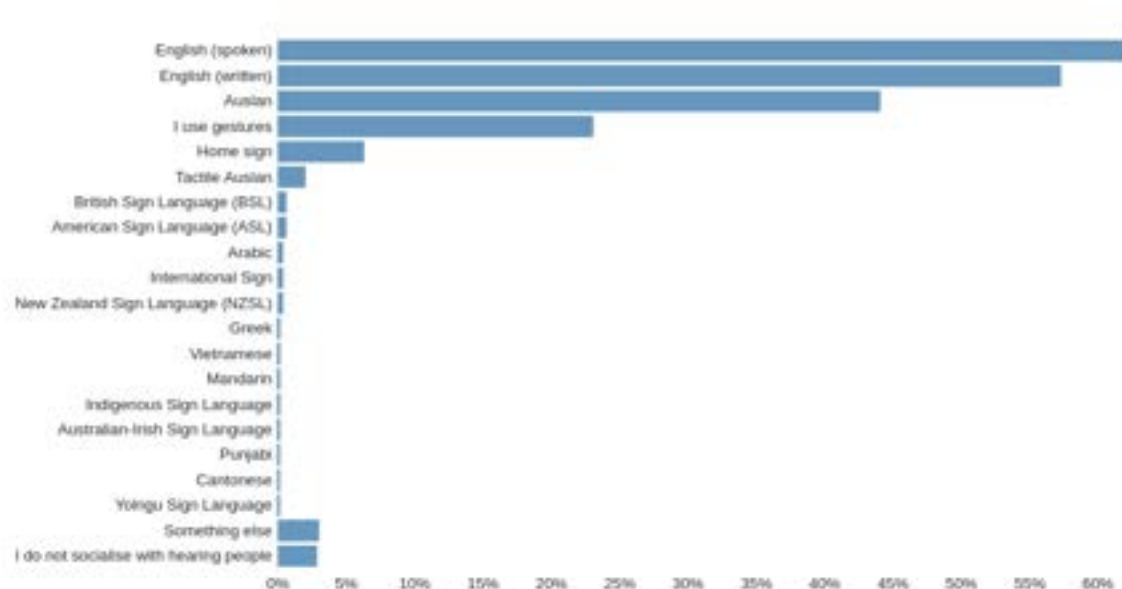


Figure 32 Language(s) used when socialising with hearing people (n=2409/1215)

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)	No, I am hearing
Auslan	38.3%	50.6%	44.4%	44.4%	13.2%	39.4%	25.5%
Tactile Auslan	1.5%	2.2%	11.1%	0.0%	0.0%	3.0%	0.3%
English (written)	54.9%	60.4%	61.1%	59.3%	38.2%	63.6%	50.1%
English (spoken)	72.9%	53.6%	55.6%	59.3%	92.6%	93.9%	98.6%
Home sign	4.9%	7.0%	0.0%	11.1%	2.9%	6.1%	1.9%
Australian-Irish Sign Language	0.1%	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%
Indigenous Sign Language	0.1%	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%
Yolngu Sign Language	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
New Zealand Sign Language (NZSL)	0.2%	0.5%	0.0%	0.0%	0.0%	0.0%	0.0%
American Sign Language (ASL)	0.4%	0.6%	0.0%	0.0%	0.0%	3.0%	0.0%
British Sign Language (BSL)	0.4%	0.6%	0.0%	0.0%	0.0%	3.0%	0.0%
International Sign	0.2%	0.5%	0.0%	0.0%	0.0%	0.0%	0.0%
Mandarin	0.2%	0.0%	0.0%	3.7%	0.0%	0.0%	0.3%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)	No, I am hearing
Cantonese	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.3%
Vietnamese	0.1%	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%
Arabic	0.4%	0.3%	0.0%	0.0%	0.7%	0.0%	0.5%
Punjabi	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Greek	0.2%	0.2%	0.0%	0.0%	0.0%	0.0%	0.5%
Language(s) not listed above (type below)	3.4%	2.4%	5.6%	11.1%	2.9%	6.1%	4.3%
I use gestures	17.9%	24.1%	11.1%	22.2%	16.2%	36.4%	6.5%
Not applicable - I do not socialise with hearing people	2.0%	3.0%	0.0%	7.4%	2.2%	0.0%	0.0%

Table 95 Language(s) used when socialising with hearing people (n=2409/1215)

	Total	Deaf total	Hearing
Total Count (All)	1.215.0	846.0	369.0
Auslan	38.3%	43.9%	25.5%
Tactile Auslan	1.5%	2.0%	0.3%
English (written)	54.9%	57.0%	50.1%

	Total	Deaf total	Hearing
English (spoken)	72.9%	61.7%	98.6%
Home sign	4.9%	6.3%	1.9%
Australian-Irish Sign Language	0.1%	0.1%	0.0%
Indigenous Sign Language	0.1%	0.1%	0.0%
Yolngu Sign Language	0.0%	0.0%	0.0%
New Zealand Sign Language (NZSL)	0.2%	0.4%	0.0%
American Sign Language (ASL)	0.4%	0.6%	0.0%
British Sign Language (BSL)	0.4%	0.6%	0.0%
International Sign	0.2%	0.4%	0.0%
Mandarin	0.2%	0.1%	0.3%
Cantonese	0.1%	0.0%	0.3%
Vietnamese	0.1%	0.1%	0.0%
Arabic	0.4%	0.4%	0.5%
Punjabi	0.0%	0.0%	0.0%
Greek	0.2%	0.1%	0.5%
Language(s) not listed above (type below)	3.4%	3.0%	4.3%

	Total	Deaf total	Hearing
I use gestures	17.9%	22.9%	6.5%
Not applicable - I do not socialise with hearing people	2.0%	2.8%	0.0%

Table 96 Language(s) used when socialising with hearing people (n=2409/1215)

Q40.8 (n=1,953/1,215) All respondents were asked what language(s) they use when shopping, such as buying groceries (Figure 33). More than one response to this question was possible. The most common responses were spoken English (68.7%), written English (45.1%), gestures (24%) and Auslan (17.4%). 2.9% use other signed and/or spoken languages, 1.4% use home signs, mainly Deaf people, while 0.9% use Tactile Auslan, especially Deafblind people (Table 97 and Table 98). Other languages that were reported being used include Danish, Kurdish, Danish, and Slovene Croatian. Respondents also reported using Support Workers or another person, or trying to use their speech, even though they are not always understood. Others used gestures, relied on lipreading or the transcribe app on phone or iPad. Several people reported they avoid communication while shopping as much as possible.

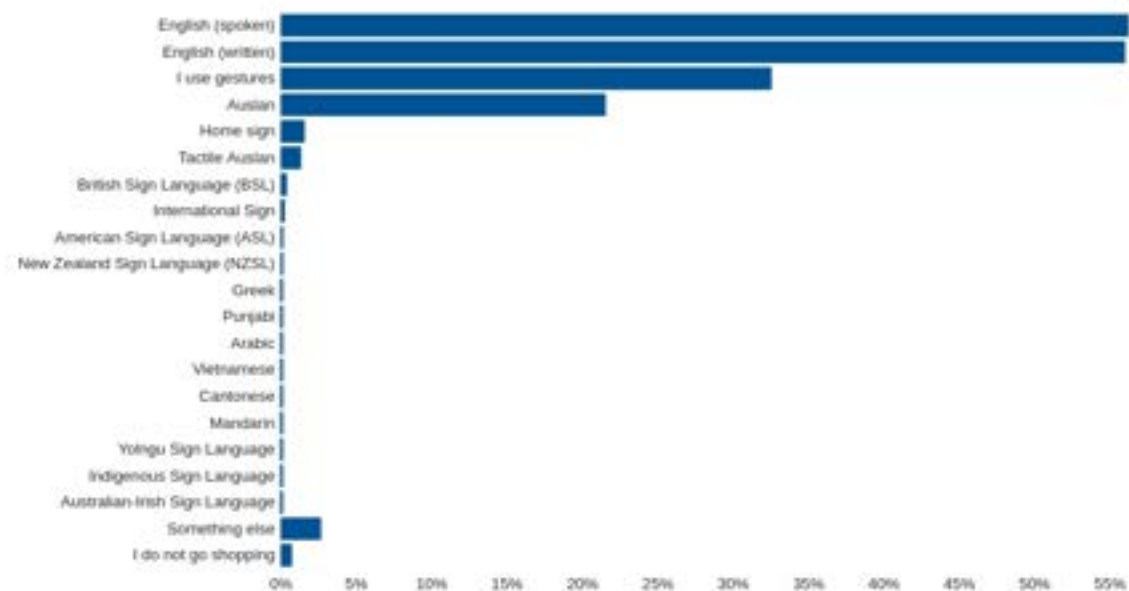


Figure 33 Language(s) used when shopping (n=1953/1215)

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)	No, I am hearing
Auslan	17.4%	23.7%	22.2%	22.2%	12.5%	9.1%	8.4%
Tactile Auslan	0.9%	1.3%	16.7%	0.0%	0.0%	0.0%	0.0%
English (written)	45.1%	61.7%	72.2%	59.3%	27.2%	36.4%	21.7%
English (spoken)	68.7%	46.7%	61.1%	40.7%	92.6%	81.8%	98.9%
Home sign	1.4%	1.9%	0.0%	0.0%	0.7%	0.0%	1.1%
Australian-Irish Sign Language	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Indigenous Sign Language	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Yolngu Sign Language	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
New Zealand Sign Language (NZSL)	0.1%	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%
American Sign Language (ASL)	0.2%	0.2%	0.0%	0.0%	0.0%	0.0%	0.3%
British Sign Language (BSL)	0.2%	0.3%	0.0%	3.7%	0.0%	0.0%	0.0%
International Sign	0.2%	0.3%	0.0%	0.0%	0.0%	0.0%	0.0%
Mandarin	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)	No, I am hearing
Cantonese	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Vietnamese	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Arabic	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.3%
Punjabi	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Greek	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.3%
Language(s) not listed above (type below)	2.0%	2.1%	0.0%	7.4%	2.2%	12.1%	0.5%
I use gestures	24.0%	35.3%	16.7%	33.3%	18.4%	36.4%	5.1%
Not applicable - I do not go shopping	0.5%	0.8%	0.0%	0.0%	0.7%	0.0%	0.0%

Table 97 Language(s) used when shopping (n=1953/1215)

	Total	Deaf total	Hearing
Total Count (All)	1.215.0	846.0	369.0
Auslan	17.4%	21.3%	8.4%
Tactile Auslan	0.9%	1.3%	0.0%
English (written)	45.1%	55.3%	21.7%

	Total	Deaf total	Hearing
English (spoken)	68.7%	55.6%	98.9%
Home sign	1.4%	1.5%	1.1%
Australian-Irish Sign Language	0.0%	0.0%	0.0%
Indigenous Sign Language	0.0%	0.0%	0.0%
Yolngu Sign Language	0.0%	0.0%	0.0%
New Zealand Sign Language (NZSL)	0.1%	0.1%	0.0%
American Sign Language (ASL)	0.2%	0.1%	0.3%
British Sign Language (BSL)	0.2%	0.4%	0.0%
International Sign	0.2%	0.2%	0.0%
Mandarin	0.0%	0.0%	0.0%
Cantonese	0.0%	0.0%	0.0%
Vietnamese	0.0%	0.0%	0.0%
Arabic	0.1%	0.0%	0.3%
Punjabi	0.0%	0.0%	0.0%
Greek	0.1%	0.0%	0.3%
Language(s) not listed above (type below)	2.0%	2.6%	0.5%

	Total	Deaf total	Hearing
I use gestures	24.0%	32.2%	5.1%
Not applicable - I do not go shopping	0.5%	0.7%	0.0%

Table 98 Language(s) used when shopping (n=1953/1215)

Q40.9 (n=1,953/1,215) All respondents were asked what language(s) they use when running errands in their local community, such as the bank or post office (Figure 34). More than one response to this question was possible. The most common responses were spoken English (67.7%), written English (49.1%), gestures (24%), and Auslan (16.1%). 2.2% use other signed and/or spoken languages and 1.2% use home signs, especially Deaf and disabled people (Table 99 and Table 100). Other languages that were reported include Kurdish and Spanish, as well as communication strategies such as gestures, pen and paper, VRI, Auslan interpreters, Support Workers, and transcribe apps on phone.

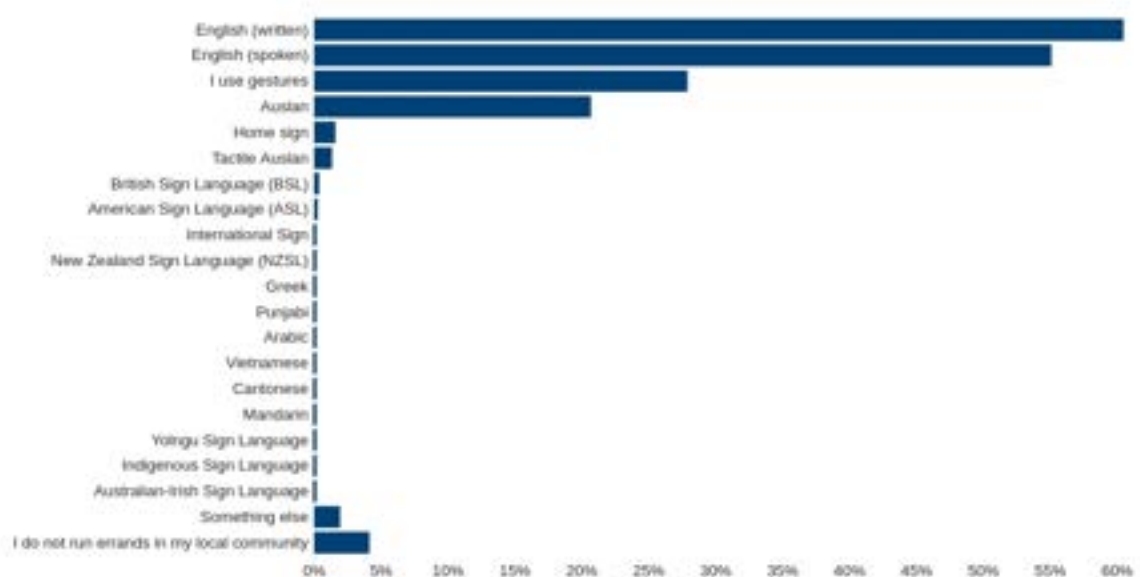


Figure 34 Language(s) used when running errands (n=1953/1215)

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)	No, I am hearing
Auslan	16.1%	23.7%	11.1%	14.8%	8.8%	12.1%	6.5%
Tactile Auslan	0.9%	1.3%	16.7%	0.0%	0.0%	0.0%	0.0%
English (written)	49.1%	65.5%	77.8%	66.7%	32.4%	39.4%	25.5%
English (spoken)	67.7%	44.8%	55.6%	48.1%	91.9%	81.8%	98.9%
Home sign	1.2%	1.7%	0.0%	3.7%	0.7%	0.0%	0.5%
Australian-Irish Sign Language	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Indigenous Sign Language	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Yolngu Sign Language	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
New Zealand Sign Language (NZSL)	0.1%	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%
American Sign Language (ASL)	0.2%	0.3%	0.0%	0.0%	0.0%	0.0%	0.3%
British Sign Language (BSL)	0.2%	0.3%	0.0%	3.7%	0.0%	0.0%	0.0%
International Sign	0.1%	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%
Mandarin	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)	No, I am hearing
Cantonese	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Vietnamese	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Arabic	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Punjabi	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Greek	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Language(s) not listed above (type below)	1.6%	1.7%	0.0%	0.0%	1.5%	9.1%	0.8%
I use gestures	20.6%	30.5%	22.2%	22.2%	12.5%	36.4%	4.9%
Not applicable - I do not run errands in my local community	2.8%	4.6%	0.0%	3.7%	2.9%	0.0%	0.0%

Table 99 Language(s) used when running errands (n=1953/1215)

	Total	Deaf total	Hearing
Total Count (All)	1.215.0	846.0	369.0
Auslan	16.1%	20.3%	6.5%
Tactile Auslan	0.9%	1.3%	0.0%
English (written)	49.1%	59.5%	25.5%

	Total	Deaf total	Hearing
English (spoken)	67.7%	54.1%	98.9%
Home sign	1.2%	1.5%	0.5%
Australian-Irish Sign Language	0.0%	0.0%	0.0%
Indigenous Sign Language	0.0%	0.0%	0.0%
Yolngu Sign Language	0.0%	0.0%	0.0%
New Zealand Sign Language (NZSL)	0.1%	0.1%	0.0%
American Sign Language (ASL)	0.2%	0.2%	0.3%
British Sign Language (BSL)	0.2%	0.4%	0.0%
International Sign	0.1%	0.1%	0.0%
Mandarin	0.0%	0.0%	0.0%
Cantonese	0.0%	0.0%	0.0%
Vietnamese	0.0%	0.0%	0.0%
Arabic	0.0%	0.0%	0.0%
Punjabi	0.0%	0.0%	0.0%
Greek	0.0%	0.0%	0.0%
Language(s) not listed above (type below)	1.6%	1.9%	0.8%

	Total	Deaf total	Hearing
I use gestures	20.6%	27.4%	4.9%
Not applicable - I do not run errands in my local community	2.8%	4.0%	0.0%

Table 100 Language(s) used when running errands (n=1953/1215)

Q40.10 (n=665/1,215) All respondents were asked what language(s) they use when attending religious services (Figure 35). More than one response to this question was possible. The most common responses were spoken English (16.4%), Auslan (14.3%), written English (7.2%) and gestures (2.6%). 1.6% use other signed and/or spoken languages and 0.8% use home signs (Table 101 and Table 102). Other languages that were reported being used include Hebrew, Kurdish, Signed English, and Tibetan.

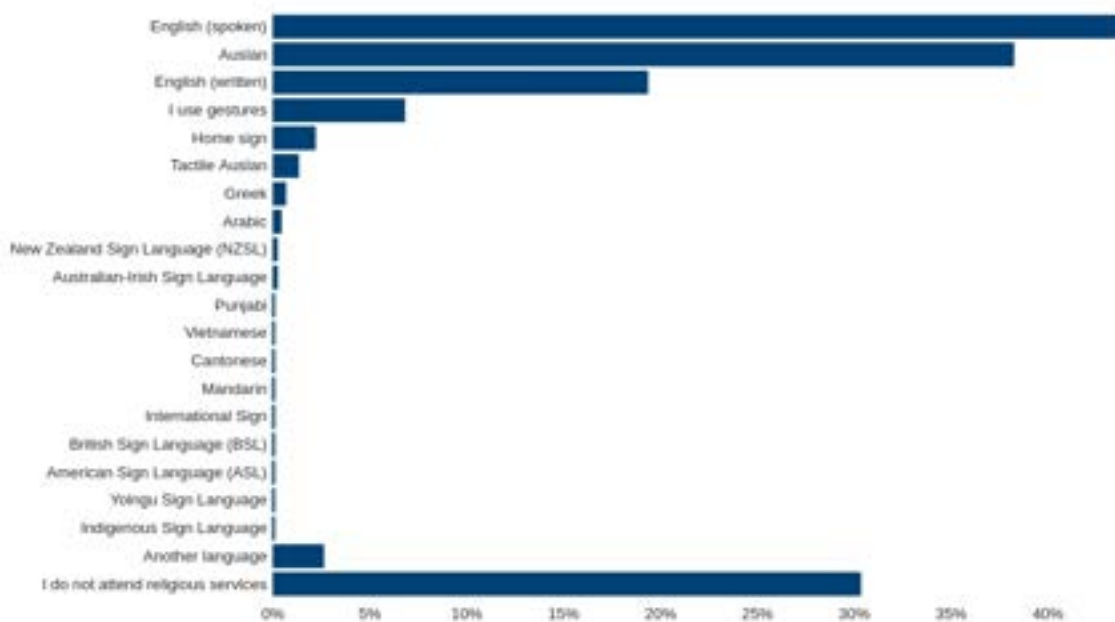


Figure 35 Language(s) used when attending religious services (n=665/1215)

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)	No, I am hearing
Auslan	14.3%	18.7%	22.2%	22.2%	8.1%	6.1%	8.9%
Tactile Auslan	0.5%	0.8%	5.6%	0.0%	0.0%	0.0%	0.0%
English (written)	7.2%	6.3%	11.1%	3.7%	9.6%	6.1%	8.1%
English (spoken)	16.4%	7.3%	16.7%	14.8%	29.4%	15.2%	27.4%
Home sign	0.8%	1.3%	0.0%	7.4%	0.0%	0.0%	0.0%
Australian-Irish Sign Language	0.1%	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%
Indigenous Sign Language	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Yolngu Sign Language	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
New Zealand Sign Language (NZSL)	0.1%	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%
American Sign Language (ASL)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
British Sign Language (BSL)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
International Sign	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Mandarin	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)	No, I am hearing
Cantonese	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Vietnamese	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Arabic	0.2%	0.2%	0.0%	0.0%	0.7%	0.0%	0.0%
Punjabi	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Greek	0.2%	0.0%	0.0%	0.0%	0.7%	0.0%	0.5%
Language(s) not listed above (type below)	1.0%	0.6%	0.0%	3.7%	2.9%	0.0%	0.8%
I use gestures	2.6%	3.8%	0.0%	3.7%	2.2%	0.0%	0.8%
Not applicable - I do not attend religious services	11.4%	14.2%	16.7%	14.8%	11.0%	15.2%	5.7%

Table 101 Language(s) used when attending religious services (n=665/1215)

	Total	Deaf total	Hearing
Total Count (All)	1.215.0	846.0	369.0
Auslan	14.3%	16.7%	8.9%
Tactile Auslan	0.5%	0.7%	0.0%
English (written)	7.2%	6.9%	8.1%

	Total	Deaf total	Hearing
English (spoken)	16.4%	11.6%	27.4%
Home sign	0.8%	1.2%	0.0%
Australian-Irish Sign Language	0.1%	0.1%	0.0%
Indigenous Sign Language	0.0%	0.0%	0.0%
Yolngu Sign Language	0.0%	0.0%	0.0%
New Zealand Sign Language (NZSL)	0.1%	0.1%	0.0%
American Sign Language (ASL)	0.0%	0.0%	0.0%
British Sign Language (BSL)	0.0%	0.0%	0.0%
International Sign	0.0%	0.0%	0.0%
Mandarin	0.0%	0.0%	0.0%
Cantonese	0.0%	0.0%	0.0%
Vietnamese	0.0%	0.0%	0.0%
Arabic	0.2%	0.2%	0.0%
Punjabi	0.0%	0.0%	0.0%
Greek	0.2%	0.1%	0.5%
Language(s) not listed above (type below)	1.0%	1.1%	0.8%

	Total	Deaf total	Hearing
I use gestures	2.6%	3.3%	0.8%
Not applicable - I do not attend religious services	11.4%	13.8%	5.7%

Table 102 Language(s) used when attending religious services (n=665/1215)

Q40.11 All respondents (n=1,215) were asked if there is anything else they want us to know about their language use. We received 192 responses describing additional information about the languages they use. These detailed information on a range of topics, including other languages and communication strategies important to deaf people; the importance of Deaf gain; the importance of Auslan for hearing non-verbal people; the challenges Deaf, Deafblind and hard of hearing people experience when using other languages; the importance of deaf awareness; the importance of the general public learning some basic Auslan; and barriers to learning Auslan.

In Australia, there is a tendency for deaf people's language use to be described as 'bilingual' and assumptions that this involves fluency in a signed language such as Auslan and a spoken and/or written language such as English. Yet many respondents provided details about other languages and communication strategies they use in various contexts. This illustrates how deaf people and communities are far more multilingual than typically assumed. For example, respondents often reported their home environments as involving a mix of languages. Respondents who use Auslan also reported using other spoken languages such as Mandarin, Cantonese, Greek with their families, or that they use other signed languages such as American Sign Language, New Zealand Sign Language, British Sign Language, Langue des Signes Française, Deutsche Gebärdensprache, and International Sign. Some respondents explained their language use depends on the person they are interacting with, or that they "code switch and match" whenever possible. Some respondents explained they may use other spoken language interpreters such as Spanish, Urdu, Arabic and Korean at work, depending on the needs of their clients. A few deaf respondents reported that Signed English should have been included explicitly in the list of languages used.

Respondents gave plenty of information about the other languages they use and the context within which they are used. They reported using Key Word Signs, SimCom (speaking English while signing), and Augmentative and Alternative Communication (AAC), especially when they are not using their assistive listening devices such as hearing aids, or when they are feeling unwell. One person relies on their mobile phone a lot, typing simple English to communicate. Hearing respondents reported using Auslan with their [hearing] disabled

clients, not just with deaf people. AAC was described as a “slow and unreliable method of communication in comparison to Auslan.” Respondents described using Auslan with other deaf people, and English in mainstream environments such as school. They reported that even if their hearing peers are interested in learning Auslan, there are not enough resources for them to do so. Others reported using mostly written and spoken English via lipreading, as well as knowledge of the context, but still struggling with communication. Even if they want to learn Auslan more fluently, their location makes it hard to find immersive environments. One interpreter reported using chuchotage (a simultaneous interpreting technique that involves interpreting what is heard more closely to the listener) with deaf or hard of hearing clients who are not yet proficient with Auslan.

Several respondents reported they consider Signed English to be their first language, especially for some age groups in some states, and that they would have liked to have seen this listed explicitly as a language option. In comparison, Auslan was described as “cultural” for them, rather than “a tool to deal with mainstream society.” One person complained they had wanted Signed English interpreters at university, but received subpar Auslan interpreters instead, with poor fingerspelling skills and time lags in the interactions. They said they “felt more stupid, compared to being at school, as it was obvious the interpreters were not capable, not keeping up with the pace, and dumbing everything down.”

This person then tried Total Communication as a compromise with different Auslan interpreters, including increased use of English fingerspelling and mouthings, to facilitate better access to the technical jargon, but they still would have preferred Signed English. The respondent also reported feeling like they are in the minority about preferring Signed English, and that they have been bullied by others in the Deaf community for using it. Along with witnessing other deaf people with CI being bullied, this has led this respondent to have ambivalent feelings about the unity of the Deaf community. Another person reported they prefer “close-mouthed Auslan” [with minimal or no English mouthing], but have to open their mouth [to mouth some English words] for other people to understand. Others reported enjoying closed captions, and enjoying streaming services and live shows with captions. They will often read the script of a theatre performance before attending so they can follow the performance while attending.

Many respondents emphasised the importance of basic Auslan in mainstream environments, such as in the shops, chemist, banks and other public spaces. The benefits of hearing people knowing some Auslan include fostering a sense of welcoming and belonging, as it “keeps relations positive and encouraging.” This was also described as both making communication easier and helping to save time. One hearing person reported they often continue to use Auslan, written English or gesture at the shops with a deaf person, to encourage the people around them to do the same. They will only use spoken English if the Deaf person specifically asks them to support. One deaf person reported refusing to use

speech or lipreading with random hearing people, because this so often leads to wrong assumptions about what they can hear, and means others no longer make an effort to speak clearly. This person reported, “I make them write things down to make it easier for me, not for them.” One deaf person with CI expressed the wish that more of their hearing friends knew how to sign, so they can sign with them when they are not wearing their CI. The general consensus is that it would be wonderful if more hearing people learned basic Auslan.

Several respondents highlighted the importance of Deaf gains that come with learning and using Auslan. For example, a hearing person reported being the first person in their family to learn Auslan to support their aunt. She then taught her own daughters, who are now able to use Auslan with their great-aunt and others in the community. This person also said there are 16 other family members who have not yet learned to sign, and that more awareness and exposure in the general community would encourage them to do so. Deaf people with CI reported enjoying using Auslan when they switch off their devices, and having the option to communicate in situations when previously they were very isolated, such as talking to their spouse before bed, while swimming, and so on. They reported a heightened sense of safety and wellbeing from knowing they can communicate even without their CI. One other person reported being better able to understand foreign accents on account of being used to Deaf accents growing up. Someone else said they feel hearing people can learn a lot from the Deaf community about communication, such as better turn-taking, eye contact, inclusivity, and body language.

We received many comments about the importance of awareness about Auslan. These centred on making Auslan available to everyone who needs it, especially within deaf intervention and education; that learning Auslan should be free for families and that the NDIS should better support Auslan for families. One respondent was highly critical of the NDIS, reporting that the NDIS does not understand the importance of Auslan for Deaf, Deafblind and hard of hearing people, even when clients have produced multiple reports and recommendations to support their requests for funding. One deaf person reported that the NDIS told them they are not entitled to Auslan support because they can “get by with spoken English and hearing aids.” This person explained, “They do not understand I cannot hear without aids when I choose not to wear aids, and I have the right of dignity to communicate with my family when my aids are off.”

Respondents also reported that awareness of Auslan could be improved via greater visibility in the media and on television, and recognition of Auslan as an official language. One respondent reported that visibility in the media and in advertisements and so on should be used to raise awareness in mainstream society and encourage workplaces to book Deaf Awareness Training. Deafblind respondents reported there is a need for more awareness about deaf blindness so that the Deaf community are more comfortable with using Tactile

Auslan. CODAs reported that figures about the number of Auslan users and need for information available in Auslan should also include CODAs as preferring information in Auslan.

Several respondents also commented on the importance of Auslan for hearing non-speaking neurodivergent people who may not be able to use their voice, as well as deaf people who have language processing difficulties such as global aphasia. These people reported extreme experiences of being shunned and shamed by Deaf community members and Auslan interpreting agencies when they have requested support. In one case, parents decided to homeschool their child instead. One person said, “My cohort seems to be non-existent in terms of any Auslan services I can access.” Auslan for non-speaking hearing people was described as being wonderful for neurodivergent teens to use instead of talking when they feel overwhelmed. Another person reported their iPad is a big help to them, as they use a talking board and pictures to help them communicate.

Respondents offered many comments about the challenges of using other languages, especially written English. They reported being pressured in hospital to write in English and being forced to give their consent for medication by reading forms in English, even though they do not understand what is written. As one person said, “My English is bad and I don’t know what they are saying.” Another deaf person described they do not feel comfortable using their voice in public, as they cannot understand others speaking and also worry their speech will be judged. Someone else reported they hate using spoken English, describing it as “exhausting and painful” and that hearing people cannot understand their speech anyway. Respondents with this experience reported avoiding situations where they might need to use spoken language, especially if they wish to avoid their children having to work as interpreters. Using gestures to communicate with non-signers was described as being more comfortable.

One deaf person described using speech with hard of hearing people who do not sign, but needing them to write in English if they could not lipread them well enough. Others described using SimCom in mixed deaf and hearing social environments, because the levels of Auslan vary greatly. Another person reported they usually use English in mainstream environments, but the prevalence of face masks means they have had to change to writing notes and using gestures. They described this as a “very frustrating, humbling, and emotional experience to have my usual strategies taken from me and have very few people understand the impact of this.” They said they felt Deaf in both a cultural and disabled sense of the word, and this changed everything for them. One respondent said there is not enough recognition of the dominance of English and the consequences for deaf people who do not speak, including social isolation and social stigma.

Finally, respondents reported many different barriers to learning Auslan as a LOTE. This includes Auslan not being recognised as a LOTE in home education environments, and having to fight for Auslan recognition each time they renewed their LOTE registration. Lack of resources about learning Auslan and the access that is available and how people use it in different contexts, such as work meetings. No Auslan courses available in rural or regional areas, or only available online, which means it takes a very long time to learn Auslan.

One person commented about switching from Signed English, Cued Speech and oral education methods to Auslan. This person felt forced to use Auslan at university because lecturers did not want to make lipreading and materials accessible ahead of classes. Others described negative social experiences with other Auslan signers, including feeling judged that their Auslan is not good enough. One hard of hearing person reported they have not found the Deaf community welcoming and that they “struggle in the hearing world and do not connect with the Deaf community.” Another deaf person felt there is too much emphasis that when people say they are deaf, others automatically assume they are Auslan signers.

One hearing respondent reported that it should be mandatory for ToD to learn Auslan. They were shocked that there were hearing students in their ToD course who had never met a Deaf person. As this person later realised, “Most ToDs enter their courses with no understanding of Deaf culture, history, language or linguistics.” Another hearing respondent commented that while they understand and value the Deaf community’s reluctance for hearing people to work teaching Auslan, they are concerned how Auslan can be taught correctly across Australia. They commented that not everyone wants to be a teacher, and that deaf people have the right to career choices as do others, and suggested that hearing teachers who have completed Auslan to at least Cert 4 be able to teach Auslan to at least Year 8 in schools. They also commented there needs to be a Deaf LOTE teacher course for Deaf people to qualify and become a registered teacher to solve this issue too. Finally, one person commented that “Auslan is a language that needs to be revitalised, and some kind of acknowledgement that interpreters do not use the actual signs deaf people use in everyday Auslan.”

3.12 Language oppression

Q41.1 (n=2,977/846) Deaf respondents were asked if they have been forced to speak and/or write English rather than use Auslan in a range of places (Figure 36). More than one response to this question was possible. Overall, 74.7% reported they have been forced to speak and/or write English rather than use Auslan in at least one of the places listed (Table 82). Every single place listed received responses to this question. All groups of deaf respondents recorded high rates for each place, but Deaf and disabled respondents recorded the highest number (Table 103). We also received 35 free text responses listing

other places. These responses included work, TAFE, sports and recreational activities, cinemas, kindergarten, at home, at their child's school, at hearing family gatherings, at Centrelink, and almost everywhere except Deaf social events. Some people also detailed specific negative experiences, such as work colleagues refusing to remove their masks for lipreading, and then telling the person off for not participating in the conversation; or people refusing to write information down on paper; or only being able to communicate via a family member.

Others described specific reasons this occurs, such as parents being told not to use Auslan with their deaf child, or growing up and living in a small town as the only deaf person and the only person who signs. One person claimed the issue is more about oral deaf people being forced to use Auslan when socialising with other deaf people, while another person said they would use only Auslan everywhere if they could. Several people took umbrage with the phrasing of this question, reporting that the choice of word "forced" indicates bias that renders the survey responses questionable, or clarify that it is more about lack of choice and lack of other alternatives. They commented, "What is the choice when you always have to make a conscious decision to engage in language access, compared with when it is provided without extra thought/effort?" Future iterations of the Deaf Census could clarify or refine this question further by rephrasing or hedging this question, e.g., "feeling pressured".

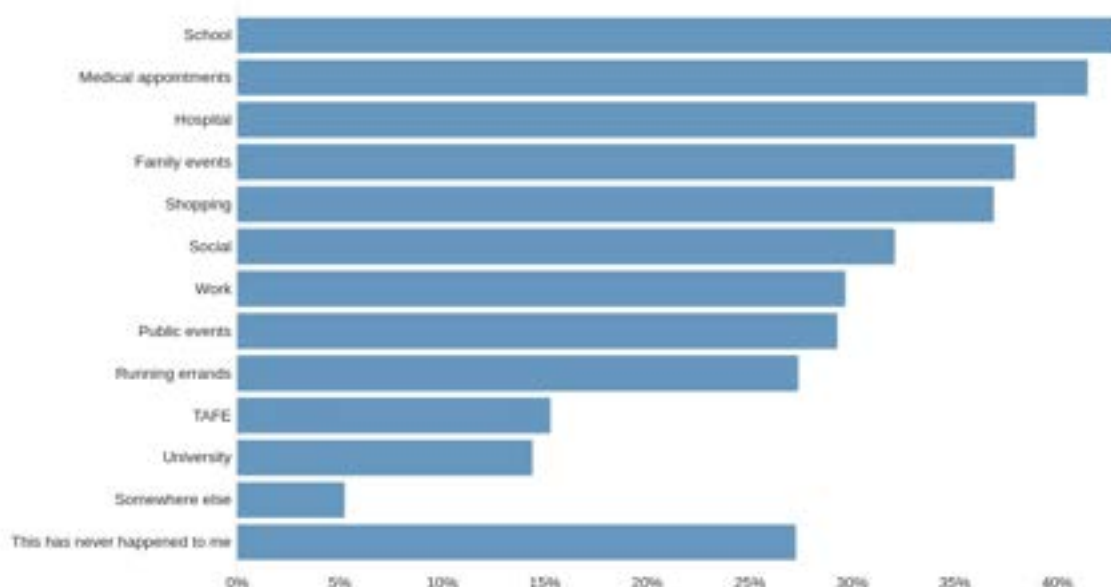


Figure 36 Sites of language oppression (n=2977/846)

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
School	40.1%	44.6%	33.3%	44.4%	22.8%	24.2%
TAFE	14.2%	13.8%	16.7%	18.5%	12.5%	24.2%
University	13.4%	12.5%	11.1%	22.2%	13.2%	24.2%
Work	27.5%	27.8%	27.8%	44.4%	22.8%	27.3%
Medical appointments	38.5%	40.2%	44.4%	48.1%	27.9%	39.4%
Hospital	36.2%	38.1%	44.4%	44.4%	25.0%	33.3%
Shopping	34.3%	36.1%	38.9%	55.6%	21.3%	33.3%
Running errands	25.4%	25.6%	27.8%	48.1%	19.1%	27.3%
Family events	35.2%	36.1%	50.0%	66.7%	24.3%	30.3%
Public events	27.2%	27.2%	22.2%	55.6%	21.3%	30.3%
Social	29.8%	28.6%	38.9%	55.6%	27.9%	33.3%
Somewhere else (type below)	4.8%	4.6%	5.6%	7.4%	2.9%	15.2%
I have never been forced to speak and/or write English rather than use Auslan	25.3%	22.0%	22.2%	22.2%	40.4%	30.3%

Table 103 Sites of language oppression (n=2977/846)

Q41.2 (n=2,977/846) Deaf respondents were asked if they wanted to add more information about being forced to speak and/or write instead of using Auslan. We received 169 responses describing additional information on these topics. These included experiences from school, home, work, and medical contexts. Respondents also reported on their experiences with interpreters and other professionals, including cases where they felt forced to use Auslan instead of English. Respondents offered general observations and rich insights on these experiences.

Several profoundly deaf people described extremely negative experiences with English at school, especially oral deaf schools. They described their difficulties of writing in English being met with anger by teachers and other educational professionals. Some of these students later learned Auslan as young adults, and this opened their minds and world. Others described teachers being more aware that lipreading English was too difficult, and therefore writing more often on the blackboard. These oppressive experiences were often combined with experiences of being forbidden to sign, and also being made to give oral (spoken English) presentations against their will. For example, one student shared their experience of having to give an oral presentation at university. They said, “I had an Auslan interpreter with me in the class. The teacher didn’t let me use Auslan for my presentation and told me to speak in English. She said it is part of assessment criteria to have oral presentation skills and I would fail in sign and she refused the interpreter to voice for me. The teacher didn’t make any adjustments for me on that day.”

Another person said, “I was unhappy that school forced me oral speak and not much education. Teacher refused using Auslan...Now I am poor very English and not good reading.” Another person said, “I should have gone to Auslan school not oral in 1960s. I don’t understand things because I can’t read and write properly. Hard to learn.” Others described having to overcome these educational experiences to get ahead in life. For example, one Deaf person wrote, “I recall being forced to speak at school and having to sit on my hands. I have been taught to view my deafness with shame and to apologise. I have now thrown this perspective out the window and embraced my deafness and sign language...I was born a proud Deaf woman and I stand tall now.”

Other respondents reported oppressive experiences at university, such as not being provided with captioning support and lecturers not being patient with writing things down, instead forcing deaf students to lipread. One person said they were excluded from one university for requesting interpreters or captions, and told “deaf people cannot become engineers and should find an unskilled job working for a deaf employer.” Another person shared that despite going to [a secondary school that has deaf signing students], they were “forced to speak and banned from learning Auslan so I would not become ‘dependent’ on it.”

These oppressive experiences often continued at home. Many respondents shared experiences of their parents being told not to use sign language or home sign by ToD and medical professionals alike, and not accepting their deafness or that deafness can be a cultural identity. One person said, “My parents didn’t like me signing and told my sister not to sign either. So I felt left out. Plus my family are [South-East Asian ethnicity] so they speak the language and exclude me because I don’t speak the language. My parents were guilty, ashamed, embarrassed that I’m Deaf and haven’t accepted my identity.” Another person said, “My dad was against signing so didn’t let me, my Deaf brother and Deaf niece sign at family events. We had to speak. Since his passing, the rest of the family don’t bother with us three anymore sadly.” Someone else said, “It’s very hard when family members don’t see you as deaf. They want you to talk because it’s easier for them and perhaps less embarrassing.”

Many people expressed their wish that their families would use Auslan, including deaf people with CI. Others explained their family members are too proud they can speak, and don’t understand how their deafness makes it so hard for them to lipread. Others said some family members believe they can always understand them and do not need an interpreter, while other family members will organise an interpreter for a special family event. Some people mentioned the NDIS does not fund enough for social and family events, especially when interpreters are required for weekends and for more than two hours. One person born deaf into a hearing family explained their two hearing sisters would interpret for them, but in their own ways: “Not ethically, misspeaking on our behalf, and for their own self-interest and self-gain.” Another reason given for being forced to speak English was not being given opportunities to learn Auslan. As one person said, “If no mum, I stuck.”

Respondents reported being bullied at work around their language choices. One deaf person said, “They forced me to use my deaf voice and the interpreter made to tell me when my voice was too loud or too soft. Very embarrassing and made me feel shame. Thankfully that boss left and now I do not use voice at work, rarely in public now.” Others explained feeling too scared to ask to use Auslan, even if they would prefer to use Auslan rather than English, but customers are more likely to speak to them if they do not need to communicate via an interpreter. Another person responded that hearing people need to be educated in using Convo Australia and other ways to communicate with Deaf people directly, especially to avoid situations where people who do not sign are telling hearing colleagues what to say to their deaf colleagues. As one person said, “I want them to use interpreters independently and talk to me directly.” This person works in deaf education as the only deaf person in the workplace.

Respondents experienced similar issues in medical and Government contexts, especially hospitals and with insufficient funding from the NDIS. As hospitals usually state they cannot or do not provide interpreters, deaf people are forced to lipread and/or write in English. As

one person explained, “They often say they already booked an interpreter, but are still waiting for someone to turn up, so can we just go ahead and communicate via writing English. I found out that they never submitted an interpreter request to an agency.”

Another person described wanting to call the Australian Tax Office (ATO) over the phone via a support person, but this was refused by the ATO both on the phone and in person at the office. One of the staff ridiculed this person because they were cognitively fatigued from concentrating and masking their autism.

Respondents had a lot more to say about interpreters and how they feel when there is no interpreter provided. Frustration is the main response, plus fatigue at having to use English in written form, even though lots of information will be missed or misunderstood. One person said this is happening more now, as there are never any interpreters available, while another person said this is happening less now because of Convo Australia. Yet even when using Convo Australia, non-signers still do not understand. One person said, “I’ve had people take away *my* device so *they* can look at the interpreter, rather than letting *me* look at *my own* device at the interpreter.” Another person responded they rely on both languages and can use both, yet while they prefer Auslan, they do not despair if written English is the only option. One person clarified that it is not so much they are forced to use English, but rather they feel that they must in order to stop waiting longer and knowing that they will not find an interpreter quickly enough. Poor internet quality was another pressure identified, as was the funding required to get interpreters to attend in person in regional or rural areas.

Interestingly, some respondents reported they have been forced to use Auslan at times, either from other Deaf people or from hearing people who want something different. Others reported being forced to switch from a preferred communication practice to one that is not preferred, due to the other person’s discomfort. As one deaf person said, “I’m not yet fluent in Auslan, but as an oral profoundly deaf person, sometimes a hearing person is so uncomfortable with me being deaf that they want to write and have me write, but refuse to accept what mode I want to use, which may be lipreading, so I can use visual cues or speaking.” Another Deaf person said they have had complaints from other Deaf community members at times for using English, even though they believe that people are entitled to see the language as it’s exactly used by hearing peers. They said, “The attitude within the Deaf community needs readjusting regarding inclusiveness...we need to look into our own backyard as well.” Someone else explained, “In the past, being told to sign only just created isolation...it feels disrespectful...it affects other deaf people who may want to comfortably speak to hearing people as a way of bonding.”

A key reason given for these experiences is that other people do not believe the person is deaf, or does not understand them and what it means to be deaf. Deaf people reported that speaking English leads to incorrect assumptions about what else they can say or hear. Many deaf and hearing people reported experiences of trying to explain, but not having this

believed. As one hearing person said, “They don’t believe I can’t speak as I am hearing. So I not only experience disbelief, discrimination and bullying, but also the emotional issues that are attached to that.” The use of face masks was reported as another major issue. Overall, the general consensus was that hearing people are socially conditioned to expect speech, lipreading, or writing English, and that deaf people’s efforts to do otherwise are stressful, time consuming, and pointless because they are not taken seriously.

Respondents offered some general comments about being forced to use English instead of Auslan. They talked about living in a majority hearing world, how this means Auslan is often not supported, and that this majority hearing world is exhausting to fit into. Deaf respondents reported feeling scared to speak, in case they are not understood or do not understand, and noticing that others often do not make efforts to adapt. Instead, non-signers are often quick to accuse deaf people of being rude or stupid.

These conditions lead many deaf people to avoid social situations where they may experience such views, such as staying home and not attending events where no-one signs. It also leads to understandable emotions such as anger, frustration, anxiety, and depression. Some people mentioned feeling embarrassed or ashamed of their poor English grammar and literacy, developing strategies to get around this. For example, one person is often told by doctors they need to read pages of instructions or notes regarding medical issues and medications assigned to their child. They said they never admit they cannot understand these instructions; they just take a photo and send it to their freelance interpreter to translate and return as a signed video. Respondents also mentioned the need for Auslan to be recognised as a deaf language or first language of deaf people, same as many other languages other than English. People living in small towns or rural areas face particular isolation and no choice to use Auslan. One Deafblind person reported they find it difficult to read menus or flight information, and would prefer large print on a tablet.

3.13 Assistive listening devices

Q42.1 (n=1,232/846) Deaf respondents were asked if they use any assistive listening devices (Figure 37). More than one response to this question was possible. The most common responses were hearing aids (52%) or that the respondent does not want any assistive listening devices (25.3%). This was followed by speech-to-text technology (18.4%), cochlear implants (18.1%), headphones (9.6%), FM system (8.5%), and/or ear pods/air pods (3.1%). Only 3% reported they did not have any assistive listening devices and that they wanted one. These were mostly hard of hearing, people who describe it differently, and Deafblind people. Overall, Deafblind and Deaf and disabled people were more likely to use or want to use assistive listening devices compared to Deaf people (Table 104).

We received 39 free text responses adding more information about assistive listening devices used by respondents. These include listening devices such as behind-the-ear and inner-ear hearing aids, bone-anchored hearing aids (BAHA), and CI, along with accompanying Telecoil and other CI accessories. Some respondents explained their CI is no longer working or they are otherwise unable to use their CI. Respondents also reported using Apple hardware such as iPhone, iPad, iPod and other hardware such as Jabra Headset. Respondents described using their mobile phone text, bluetooth and app functions. Specific apps used include Microsoft Translate, Group Transcribe, and Live Transcribe. Specific technologies used with hardware include Woojer Vest, Roger Pen, WaveCAST, Oticon device, TV, phone and computer streaming devices, which can also be used as microphones, to direct sound into hearing aids. Music Links, which are small hooks that sit on the ears and connect to hearing aids via T-switch. VRI, text to speech technology, and AAC devices were also mentioned, along with flashing and vibrating devices such as doorbells and alarm clocks.

We also received 21 responses describing assistive listening devices that respondents do not yet have, but want. The most common devices reported were hearing aids and speech to text technology. Respondents also reported wanting to try a screen reader, Roger pen or other microphone, video alarm, smoke alarm, neo sensory buzzer, iPad, and BAHA. Two people reported NDIS will not fund their requested devices. One request was for new hearing aids, rejected because the person had not had any for over twenty-five years. Another request was for new T-coil hearing aids. This person reported they cannot claim these on NDIS, who instead gave them a translator they cannot use and no hearing aids. No-one reported wanting to try CI.

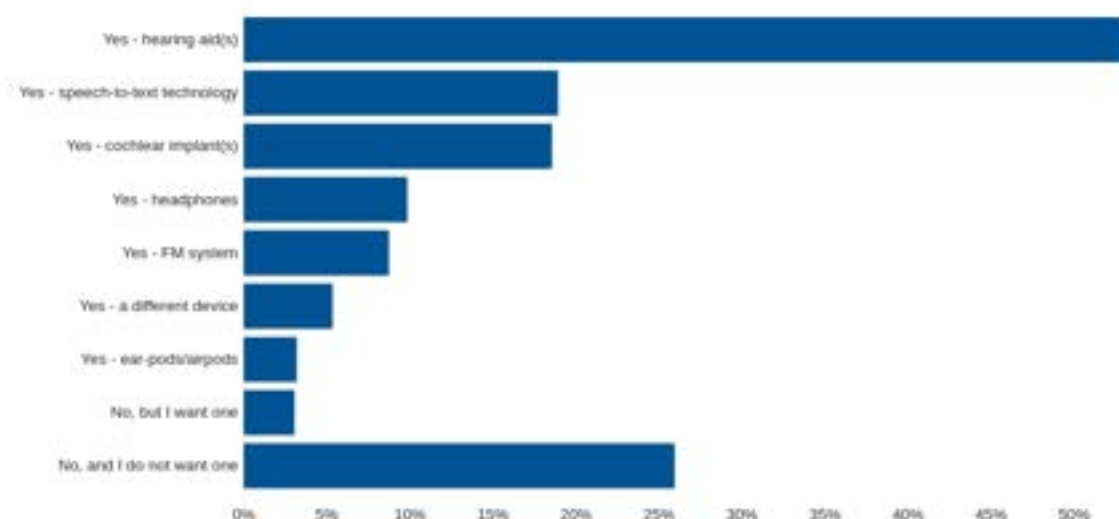


Figure 37 Assistive listening devices (n=1232/846)

	Total	Yes, I am Deaf	Yes, I am Deafblind	Yes, I am Deaf and disabled	Yes, I am hard of hearing	No, I describe it differently (type below)
Total Count (All)	846.0	632.0	18.0	27.0	136.0	33.0
Yes - hearing aid(s)	52.0%	47.0%	38.9%	55.6%	78.7%	42.4%
Yes - cochlear implant(s)	18.1%	19.0%	33.3%	14.8%	12.5%	18.2%
Yes - FM system	8.5%	6.3%	11.1%	3.7%	19.1%	9.1%
Yes - headphones	9.6%	4.9%	16.7%	22.2%	26.5%	15.2%
Yes - ear-pods/airpods	3.1%	0.9%	5.6%	7.4%	11.0%	6.1%
Yes - speech-to-text technology	18.4%	14.6%	38.9%	25.9%	32.4%	18.2%
Yes - device(s) not listed here (type below)	5.2%	3.5%	11.1%	7.4%	8.8%	18.2%
No, but I want one (type below)	3.0%	1.9%	5.6%	3.7%	6.6%	6.1%
No, and I do not want one	25.3%	29.9%	16.7%	22.2%	7.4%	18.2%
Prefer not to answer	2.5%	3.0%	0.0%	0.0%	0.0%	6.1%

Table 104 Assistive devices (n=1232/846)

3.14 Deaf Census additional information

Q43.1 As a final question in the 2022 Deaf Census, all respondents ($n=1,215$) were asked if there is anything else they want us to know. We received 144 free text responses providing additional information. These included information about Deafblind people's experiences and needs, hard of hearing people's experiences and needs, non-verbal hearing people's experiences and needs, hearing people who want to be involved with Deaf communities and learn Auslan, and hearing loss.

Deafblind respondents wanted to emphasise the lack of training opportunities in Deafblind communication methods for interpreters and others. Specifically, how to communicate via signing with a deafblind person who cannot see space, movement, or facial expression. They also expressed grave concerns about the lack of in-person interpreter availability, which is vitally important for Deafblind signers especially. Deafblind respondents reported there is too much dependence on VRI and that they feel pressured by others to use mobile phone apps instead, even though most apps are not suitable for Deafblind users. They reported that this is frustrating and dehumanising.

Hard of hearing respondents emphasised the need for more support groups in Sydney, especially for people who lose their hearing later in life, and Auslan classes for hard of hearing people in general. Current resources and courses about Auslan and the Deaf community do not usually cover this cohort, even though they would like to feel more included. This view was also shared by oral deaf people who feel they do not fit in either deaf or hearing spaces, even if they use Auslan. As one person said, "Even now I am fluent in Auslan, but I still struggle with listening fatigue and visual fatigue when using an interpreter as it is still my second language...because of my marginal identity, I sometimes feel isolated in this feeling, and wish the Deaf community spoke more about this."

More hearing people with complex communication needs are choosing Auslan as their preferred communication. Hearing people who are non-speaking wanted to emphasise the importance of signed languages such as Auslan for neurodivergent people who, even though they can hear speech, also live with specific audiological and sensory experiences that make it difficult to process speech. This can lead some hearing people to prefer communicating in Auslan or another signed language, especially parents with their autistic hearing children. Hearing respondents also reported they need more resources for those who want to be involved with Auslan, especially those who want to become interpreters. One hearing person reflected that it is sometimes hard to get acceptance from the Deaf community. One CODA said, "CODAs can be such fantastic allies to the Deaf community, but the support and education for CODAs has been lacking from Deaf organisations and Government funding."

Several deaf respondents complained about the process for being tested for CI. One person reported that Ear Sciences determined a BAHA would be better than a CI for them, and had reports from their ENT and Ear Sciences explaining they are not eligible for CI. Regardless, the hospital insisted that BAHA is an old technology that is not funded by NDIS or Government, and that CI would be better. It then took seven times explaining to the hospital to stop booking the client for CI appointments. As the person explained, "This is unacceptable and concerning what might have happened, if I had not been knowledgeable about my rights and what I needed...I may have ended up with unnecessary and irreversible surgery that wouldn't have worked...CI should only be given to those who have a good chance of success, and are able to decide for themselves. It is not a paper-pusher's place to overrule a specialist medical professional's report." This person requested that the NDIS stop overruling the opinions of Ear Sciences and other ENT specialists. Several other respondents detailed nasty experiences of being offered CI, and having their refusals ignored and disrespected.

One Deaf person who migrated to Australia as an adult explained their visa was originally rejected as the Immigration felt they were trying to get a CI and would cost the public money. They wrote a letter explaining they did not want CI and never would. This person now has Permanent Residency. Some respondents also complained about using hearing aids and other assistive listening devices. These are described as often painful to use. One person said, "People have always made me wear hearing aids as a child. I also used to have to wear headphones. I hated sound and used to hide my devices or break them deliberately."

Many deaf respondents requested that the Government cease contracts with specific interpreting agencies that monopolise Auslan interpreter access in hospital and other contexts. As one person explained, "Deaf people need to make their own choices and control which interpreting agency and/or interpreters they use for appointments with Government agencies such as hospitals, police, legal aid and so on." This person proposed that services are instead paid from NDIS or other funding. They explained, "I am sick and tired of losing control of choosing which agency I want to book my preferred interpreters from. The agencies have full control over me which needs to stop."

A major reason for making one's own booking is to be confident that an interpreter has been booked and will attend their appointment. This is because interpreting agencies do not offer deaf people the courtesy of letting them know who has been booked, or when there is no interpreter available. This practice means deaf people are often left in the lurch and resort to writing information on paper or missing information altogether. One deaf person said, "I really do hope Deaf Australia will do something about it to abolish contracts between the Government and Deaf Societies." Another person responded they are using all

their funding for their own freelance interpreter to attend hospital for their sick child, because they do not trust the hospital can provide the same level of service.

Respondents also reported on the desperate need for more interpreters, translators and support carers in the mental health sector. Mental health education and support was reported as extremely important for all Deaf, Deafblind and hard of hearing people. One person emphasised the right for deaf people to have an interpreter, even if they do not have NDIS funding, while another highlighted the risks of not providing interpreters, including that communication breakdowns in hospital environments often cause post-traumatic stress disorder (PTSD) for deaf people. Overall, everyone should have the right to privacy and not be forced to use family or friends for their interpreting needs.

Respondents expressed concerns about insufficient training of interpreters and lack of Auslan interpreters or Deaf interpreters on television news and social media in general. They also commented on the need for greater opportunities in regional areas for people who become deaf due to illness or injury, including their families who want to support them. In most regional and rural areas it is very difficult to learn Auslan or find Auslan interpreters. For example, one person in Tasmania is considering moving to Victoria to find their way in the Deaf community and develop their Auslan skills. Many respondents also said that closed captions should be mandatory in Australian broadcasting and films, in addition to producing more television shows with Auslan. This would especially help people who feel anxious to use Auslan publicly. Several people also requested that businesses and services should communicate via SMS or email when requested, and stop calling mobile phones or telephones.

Respondents also shared information about early childhood and school experiences. They requested more support for hearing parents and families with deaf children, including Deaf mentors from birth. There is a need for more Auslan-based early learning centres and schools, including VCE Auslan as LOTE, as well as more Deaf ToDs. Initiatives such as these would ensure deaf children have access to Auslan and a strong and healthy Deaf identity, as well as for hearing children of deaf parents. One person said there needs to be more Government funding to teach Auslan in schools, including for the benefit of hearing communities as well as deaf, but without appropriating or taking anything away from the Deaf community to whom the language belongs. This person said, "It is a unique Australian language that all Australians should celebrate as part of our national identity."

Many hearing parents expressed regret that they did not learn Auslan when their deaf children were young. Others commented on the need to understand and support the different communication choices of Deaf, Deafblind and hard of hearing people. One person proposed a legal adjustment supporting deaf people in choosing their preferred communication, rather than businesses and services thinking they can provide whatever

they think is best. This includes the recognition of Auslan as an official Australian language. An older Deaf person also commented on the need for younger deaf people to show respect to older deaf people with lower education who want to share rich knowledge and memories, and who are very proud of young deaf people's better education experiences and confidence.

Regarding the NDIS, some deaf respondents reported the NDIS is great in facilitating Deaf people to support Deaf businesses, with the hope that many will be able to address current service gaps. However, severe deficiencies of the NDIS remain, such as one high school students' lack of NDIS support for upgrades prior to doing their VCE. Another person commented that NDIS Planners do not understand why deafness is considered by life requirements and needs. This person has two daughters who both use Auslan, one with CI and one without CI, and yet the NDIS refuse to fund Auslan for both of them, and also not for children under seven years. They expressed confusion about how NDIS expects their children to develop without language deprivation or be able to access services or communicate with non-signing people. Their children need Auslan now, not just when they are older. Another person responded that deaf babies have the right to learn language naturally from the moment they are born, as denying them access to sign language can lead to severe language deprivation and lifelong disadvantage. They said, "All babies born with hearing loss should be encouraged to become bilingual."

Deaf people over 65 often miss out on interpreters as they can only use the one agency, and My Aged Care is also not accessible face-to-face. One person questioned why the Government provides NDIS to refugees when they did not pay tax or work, while Australian citizens do pay tax and work. They said it is not fair on the deaf people who move to Australia and cannot get access for interpreters, but instead have to apply for Permanent Residency or Citizenship to get NDIS for interpreters. This comment could be interpreted as yet another way current NDIS practices are fostering division within Australian society.

Respondents also offered plenty of feedback on how to improve the next Deaf Census. These centred on additional questions which could be asked in future, such as how people lost their hearing and their age of diagnosis, who did the diagnosis, how the person acquired Auslan, what proportion of education was focused on learning to speak, to what extent the person relies on hearing aids and CI, how hearing parents are learning Auslan for their deaf child, their motivations for doing so, and how easy it is to find a way to learn Auslan. It was also recommended to include more explanations about why specific questions were asked.

Other respondents emphasised that the Auslan translations of each question need to unpack formal words and new concepts, and include the meaning of all possible answers. They were concerned that not all the Deaf community would understand the questions or answers. Another person said the question about parents coming as refugees or asylum

seekers was very limiting, unless that was the purpose. For example, there are also migrants, international students, people born here or arrived later, and some parents born overseas. One CODA reported that there is an important distinction between hearing and CODA that needs to be clarified. Deafblind respondents said there were too many pages and information at the start of the survey, and that they really needed to go through with a CommGuide to be clear about the questions and/or use a video magnifier. Other people said they had a Support Worker help them answer the questions, as they did not understand all the questions.

One person said they felt the 2022 Deaf Census was too long, but understood it will help Deaf Australia. They reported they had witnessed other Deaf people saying, “what for” and “waste of time.” This person reported, “I had to encourage and explain the purpose of this wonderful Deaf Census. Well done Deaf Australia.” They also asked for future censuses to include more plain English information. For example, “intersex” could be signed as “boy and girl” and “neurodivergent” as “autism.” Another person reported that the questions about sexuality were too intrusive, stating “I think some of your questions are a bit out of hand asking people if they are straight or gay as that is really none of your business to do with the census, or you are making them feel uncomfortable.” This comment speaks to the challenge of asking some questions that may make some respondents feel uncomfortable, which is not our intention, and the need to ask specific questions to collect data about people who experience other oppressions in addition to deafness. This is why all questions have the option ‘prefer not to say.’

4. Conclusion

The 2022 Deaf Census was a national survey developed by Deaf Australia to collect data on multiple aspects of the lived experiences of Deaf, Deafblind and hard of hearing people in Australia, as well as other people who use Auslan. The focus of the 2022 Deaf Census was access and inclusion, both in mainstream society and across Deaf communities. The findings listed in this report are stark and compelling. In particular, it quantifies the importance of various communication options, notably Auslan, amongst a sizable sample of deaf people in Australia. Regardless of the precise number of profoundly deaf Auslan signers or the number of people who use Auslan at home, the 2022 Deaf Census data demonstrates that Auslan is essential for a wide range of people in Australia. This includes Deaf, Deafblind and hard of hearing Auslan signers. It also includes non-deaf Auslan signers such as non-speaking hearing people, hearing families with deaf children, Auslan students, and trainee interpreters.

The results of the 2022 Deaf Census are also damning in how much systemic discrimination persists across all areas of society, especially relating to education, employment, healthcare, and language choices (or lack thereof). This report both quantifies and qualifies the diversity

among Deaf, Deafblind and hard of hearing people in Australia, particularly regarding appropriate support mechanisms and communication possibilities that are used and preferred by many different people. As the Deaf Census results highlight, while Auslan is very central to the experiences and culture of Deaf communities in Australia, there are also deaf people who do not sign, or who use other sign languages, and who experience similar struggles.

It is clear that Auslan signers are multicultural and multilingual peoples drawing on a wide range of other signed, spoken and/or written languages in their everyday lives. This invites further consideration of what it means to be a Deaf, Deafblind or hard of hearing person in the twenty-first century, and what it means to participate within Culturally and Linguistically Diverse communities in Australia. Auslan is a vitally important language for many deaf people, yet it is not as widespread or well supported by mainstream society and Government as it should be, given its importance for the human rights and wellbeing of so many people. Although considerable improvements have been made about understanding the importance of access to Auslan, the diversity of deaf people, and the need for broader community awareness, these advances do not always keep pace with social changes driven by policies such as the NDIS, the expansion of certain educational or medical services, or large events such as the COVID-19 pandemic. Analysis of the 2022 Deaf Census data strongly supports the need for Deaf, Deafblind, Deaf disabled, hard of hearing and other individuals to have greater agency in how their preferred support is tailored. For example, by allowing fuller control over how NDIS funding is spent, rather than deploying mandated scripts and ideologies that dehumanise and control more often than not.

While there are many limitations to the 2022 Deaf Census, it was the first time we have tried something on this scale. This data represents a strong step forward in better advocacy and strategic planning for Deaf, Deafblind and hard of hearing people in Australia, but it is not the final word. One valuable aspect is that it renders more visible the multidimensional aspects of deaf, deafblind and hard of hearing lives, illuminating more precisely the kinds of representation and advocacy that is required for different Auslan signers. It is vital that the unique experiences of different signing people across the country are recognised and respected, so that we better understand what unites and divides us.

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Author Contributions

Gabrielle Hodge and Jen Blyth conceptualised the study. Gabrielle Hodge, Lee Murray, Darlene Thornton and Jen Blyth developed the 2022 Deaf Census. Lee Murray built the Deaf Census survey in Qualtrics, and Darlene Thornton led the translation of all English text into Auslan. Deaf Australia promoted the 2022 Deaf Census online and in person, with assistance from Deaf community stakeholders. Lee Murray processed the quantitative census data and created the figures. Gabrielle Hodge processed the qualitative census data, analysed all data, and wrote the report.

Appendix 1

Original questions from Jen Blyth used to design the ICL2 project from January 2022:

Social data analysis based on these questions:

- How Auslan Deaf users are being supported in the broad community?
- How are they identified as deaf in the broad community?
- What are challenges experienced by Auslan Deaf users?
- Experiences with accessing to services and products from:
 - Public sector: Government departments (NDIS, etc), Emergency services. Health (Medicare, services, equipment, assessment, etc), Education Services (NABS, etc)
 - Private sector: Service providers, Individuals, Organisations, and more
- Experiences with asking for accessibility to services and products
- Experiences with assessing on services and products for inclusion
- Experiences with gaining inclusion with services and products
- Issues with access and inclusion in education, health, employment, language
- Type of advocacy they have done and what were achieved or not achieved
- Attitudes and misconceptions of the broad community and government
- Type of informal education done to the broad community and government services
- Type of community involvements and type of experiences gained from those
- How were they consulted by both the broad community and government about the access and inclusion for all members of Australian deaf community:
 - Local (councils, organisations and individuals)
 - State (government departments, service providers, individuals)
 - National (public and private sectors)
- Wishes and goals of Auslan Deaf users and members of Australian deaf community

- Services and products
- Changes to systems
- Improvements on specific sectors
- Any other
- Experiences of Australian First Nations Deaf Peoples
- Experiences of Auslan Deaf users with additional disabilities
- Deafblind
- Neurodivergent
- Any more?

Appendix 2

Indicative survey questions presented to ANU Ethics Committee:

1. Are you deaf, deafblind, or hard of hearing? (Answer options: yes, I am deaf; yes, I am deafblind; yes, I am hard of hearing; no, I am hearing; no, I describe it differently [free text])
2. What is the postcode of the place where you were born? (Answer options: postcode; I was born outside Australia [free text])
3. What is your year of birth / how old are you?
4. How do you describe your sexual orientation? (Answer options: straight (heterosexual); gay or lesbian; bisexual; I use a different term [free text]; don't know; prefer not to answer)
5. Do you have any of the following conditions? (Note to the committee: please see discussion in the main application. Our list will include mental health conditions such as depression or anxiety as well as physical conditions such as fibromyalgia or diabetes)
6. Which language(s) did you learn or use at school?
7. Do you receive a payment from Centrelink? If so, which payment(s) do you receive? (Answer options: dropdown based on Centrelink options)
8. What language(s) do your parents or caregivers use? Answer for all your known parents or caregivers in this question. (Answer options for each language include: fluent; I can have a simple conversation but not more; I know a little bit)
9. What language(s) do your grandparents use? Answer for all your known grandparents in this question. (Answer options for each language include: fluent; I can have a simple conversation but not more; I know a little bit)
10. Which language(s) do you use? (Answer options for each entry include: fluent; I can have a simple conversation but not more; I know a little bit)
11. How do you describe your gender? (Answer options: woman or female; man or male; non-binary; I use a different term [free text]; Prefer not to say)
12. Do you prefer an Auslan interpreter for healthcare appointments and information, e.g., visiting your GP?
13. Do you prefer an Auslan interpreter for your employment activities, e.g., work meetings?

14. Do you prefer an Auslan interpreter for talking to police or for any legal processes, e.g., court proceedings?
15. Have you experienced a medical professional who did not understand how to communicate effectively with you?
16. Have you experienced an employer who did not understand how to communicate effectively with you?
17. Have you experienced a police officer or legal person such as a lawyer who did not understand how to communicate effectively with you?
18. What is your current employment status? (Answer options: full time; part time; self-employed; casual; not working but looking for work; not working and not looking for work; retired)
19. Are you Aboriginal and/or Torres Strait Islander? (Answer options: yes; option to specify Country / Community name [free text]; no)
20. Did you migrate to Australia from another country as a child / teenager / adult?
21. Do you have a cochlear implant / hearing aid / other assistive listening device? Complete list of Deaf Census questions and possible responses (multiple choice, free text, etc)

Appendix 3

Complete list of questions in the Deaf Census 2022:

Q2.1 Are you Deaf, Deafblind, or hard of hearing?

Q3.1 Are you the only Deaf, Deafblind, or hard of hearing person in your immediate family (parents, guardians, siblings, spouse/partner, children)?

Q4.1 Who in your immediate family is/was Deaf, Deafblind, or hard of hearing?

Q4.2 Who else in your family is/was Deaf, Deafblind, or hard of hearing?

Q5.1 Do you identify as a culturally Deaf or Deafblind person?

Q5.2 Do you identify as a disabled person or a person with disability?

Q5.3 Do you want to add more information about identifying as a culturally Deaf or Deafblind person and/or a person with disability?

Q6.1 Do you use Tactile Auslan?

Q7.1 How do you prefer to communicate?

Q8.1 What is your connection to the Deaf community?

Q9.1 What is your age?

Q9.2 How do you describe your gender?

Q9.3 How do you describe your sexual identity?

Q9.4 At birth, you were recorded as:

Q9.5 Were you born with a variation of sex characteristics (sometimes called 'intersex')?

Q10.1 Do you identify as Aboriginal, Torres Strait Islander, or South Sea Islander?

Q11.1 What Country(ies) are you connected to?

Q12.1 Where do you currently live?

Q13.1 What is your ancestry?

Q14.1 What country were you born in?

Q15.1 Where in Australia were you born?

Q16.1 How old were you when you came to Australia?

Q17.1 Did you come to Australia as an asylum seeker or refugee?

Q18.1 Did one or more of your parents come to Australia as an asylum seeker or refugee?

Q18.2 Did one or more of your grandparents come to Australia as an asylum seeker or refugee?

Q19.1 Do you identify as neurodivergent?

Q20.1 Are you a member of a religious community?

Q21.1 What is your religion?

Q21.2 Do you receive the supports and services you need to participate in your religious community?

Q21.3 Are you part of a Deaf group in your religious community?

Q21.4 Do you want to add more information about accessing your religion?

Q22.1 What is your current employment status?

Q23.1 What is the main industry that you work in?

Q23.2 Is your workplace accessible to you? For example, are you properly supported to do your job?

Q23.3 What access does your workplace provide?

Q23.4 Do you have EAF (Employment Assistance Fund)?

Q23.5 Do you want to add more information about access at your workplace?

Q24.1 Do you receive any payments from Centrelink?

Q25.1 How positive are your interactions with Centrelink?

Q25.2 Do you want to add more information about your interactions with Centrelink?

Q26.1 Are you eligible for NDIS (National Insurance Disability Scheme) funding?

Q27.1 Do you have an NDIS plan?

Q27.2 Are you happy with your NDIS plan?

Q27.3 Do you know how to change your NDIS plan?

Q27.4 Does your NDIS plan provide enough funding for Auslan interpreters?

Q28.1 Do you have an authorised person for any of these services?

Q29.1 What is the highest level of education you have completed (or its equivalent)?

Q30.1 Are you currently studying?

Q31.1 What access was available to you in primary school?

Q31.2 What access is/was available to you in secondary school?

Q31.3 What access is/was available to you at TAFE?

Q31.4 What access is/was available to you at university?

Q32.1 Have you been diagnosed with any physical health conditions?

Q32.2 Were you provided with access to physical health support and care as a Deaf, Deafblind, or hard of hearing person who uses Auslan?

Q33.1 Do you have any undiagnosed physical health conditions?

Q33.2 Why have you not been diagnosed yet?

Q34.1 Have you been diagnosed with any mental health conditions?

Q34.2 Were you provided with access to mental health support and care as a Deaf, Deafblind or hard of hearing person who uses Auslan?

Q35.1 Do you have any undiagnosed mental health conditions?

Q35.2 Why have you not been diagnosed yet?

Q36.1 In the last 12 months, how many times have you been to a GP?

Q36.2 How easy is it for you to book an appointment with your GP when you need one?

Q36.3 How do you communicate with your GP?

Q36.4 In the last 12 months, how many times have you been to specialist doctor(s)?

Q36.5 How easy is it for you to book an appointment with your specialist doctor(s) when you need one?

Q36.6 How do you communicate with your specialist doctor(s)?

Q36.7 Do you want to add more information about visiting your GP or specialist doctor(s)?

Q37.1 In the last 12 months, how many times have you been to hospital?

Q37.2 How do you communicate with your medical staff in the hospital?

Q38.1 In the last 12 months, have you been to an allied health professional?

Q38.2 How easy is it for you to book an appointment with an allied health professional when you need one?

Q38.3 How do you communicate with allied health professionals?

Q38.4 Do you want to add more information about visiting allied health professionals?

Q39.1 How often do you use Auslan interpreters?

Q39.2 How often do you use Deaf interpreters?

Q39.3 Where do you use Auslan interpreters?

Q39.4 Where do you use Deaf interpreters?

Q39.5 Can you access Auslan interpreters when you need them?

Q39.6 Can you access Deaf interpreters when you need them?

Q39.7 How far in advance do you usually need to book an Auslan interpreter?

Q39.8 How far in advance do you usually need to book a Deaf interpreter?

Q39.9 Why have you not been able to access an Auslan interpreter or Deaf interpreter when you needed one?

Q39.10 Which Auslan interpreting agencies are easy for you to book?

Q39.11 Do you want to add more information about accessing Auslan interpreters or Deaf interpreters?

Q40.1 What language(s) do you use at home?

Q40.2 What language(s) do you use at work?

Q40.3 What language(s) do you use at school?

Q40.4 What language(s) do you use at university?

Q40.5 What language(s) do you use at TAFE?

Q40.6 What language(s) do you use when you socialise with other Deaf, Deafblind, or hard of hearing people?

Q40.7 What language(s) do you use when you socialise with hearing people?

Q40.8 What language(s) do you use when you are shopping (e.g., buying groceries)?

Q40.9 What language(s) do you use when you are running errands in your local community (e.g., bank, post office)?

Q40.10 What language(s) do you use when you attend religious services?

Q40.11 Is there anything else that you want us to know about the language(s) you use?

Q41.1 Have you been forced to speak and/or write English rather than use Auslan in any of these places?

Q41.2 Do you want to add more information about being forced to speak and/or write instead of using Auslan?

Q42.1 Do you use any assistive listening devices?

Q43.1 Is there anything else that you want us to know?

Q43.2 I want to give my feedback in Auslan.

Q43.3 Video-record your feedback in Auslan and upload it here.

Q44.1 You are almost finished! Please click the 'Submit' button to submit your answers.

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