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MY TRAINING EXPERIENCE
IN SOCIAL WORK AT GALLAUDET COLLEGE
AND PRESENT EMPLOYMENT

By BARBARA WILLIGAN, Rehabilitation Technician, Saint Elizabeths Hospital

When the sociology and psychology departments participated in the new social work program established at Gallaudet College in the spring of 1970, some of us students took pre-professional field work in the Mental Health Program for the Deaf at Saint Elizabeths Hospital and others went to the Children’s Center at Laurel, Maryland.

The field experience at Saint Elizabeths Hospital provided basic training in making observations, collecting and organizing data, interviewing, reporting and evaluating impressions of individual deaf patients to whom we were assigned, both in written and oral form. We also had group discussions and lectures each week with a social worker and our supervisor who was a psycho-dramatist. Once a month, Mrs. Polakoff, Coordinator, of the Social Work Program at Gallaudet, conducted seminars with all student trainees and all staff members relative to our work at both places.

This experience taught me several things about myself as well as about mental illness itself. It also taught me how much the deaf patients needed us to communicate with them and to show them that people care about them.

I returned to the Mental Health Program for the Deaf in the fall as a volunteer. This was after most of the deaf patients had been moved to one unit. Other students eventually joined me in working with the deaf patients throughout the school year. We formed ourselves into a volunteer group and performed various services, such as talking with the deaf patients, playing games with them, taking them out for walks on the grounds, arranging picnics for them, and taking them out for dinner at the homes of some of the Gallaudet College faculty members.

I was assigned to Children’s Center for my other pre-professional field work experience. I worked with two deaf mentally retarded clients. I mainly taught them to communicate in sign language with simple vocabulary related to their daily needs. I also taught sign language to one of the teachers to help her establish communication with one of my clients. This experience enabled me to differentiate between mental illness and mental retardation.
I began my formal employment at the Mental Health Program for the Deaf as a part-time rehabilitation technician, and when I was graduated, I went on full time. My position is primarily to bridge communication and cultural gaps between the deaf patients and the hearing staff and to participate in various therapy groups. I am also a co-leader for two different small therapy groups of deaf patients. In addition, I (1) talk with patients in an attempt to establish relationships based on confidence and trust; (2) observe patient behavior in activities and record changes in behavior, responses, and unusual occurrences to the treatment team; (3) counsel patients on activities of daily living or on other problems, both individually and in groups; and (4) provide support and encouragement to the patients and generally attempt to motivate them to participate in therapeutic activities. From time to time I assist in the admission of new patients which includes interviewing relatives and obtaining information about patient social, psychological and medical history.

In the near future I hope to participate in professional training in group therapy at Saint Elizabeths Hospital and to enter a graduate school where I can complete my master's work in School Counseling or Social Work.