Abstract: This paper examines American Sign Language interpreting in the field of mental health; specifically, the effects of vicarious trauma on the interpreter. Furthermore, this paper will analyze coping mechanisms that breech the Code of Profession Conduct (CPC) and effective ethical practices to maintain self-care. Historically, the Deaf community at large regarding mental health has been characterized by distrust. In examining the Deaf community’s culture and history of marginalization, research shows the mental health professional has been ill equipped to navigate between both Deaf and hearing culture. From the estimated twenty-one million Deaf individuals living in the United States, it is recorded that 80-90% with a severe and persisting mental illness are not being treated. In an effort to navigate the complexity of the triadic relationship, knowledge of the Deaf history in mental health can be considerably profitable. Those engaged in the profession of interpreting experience the effects of vicarious trauma at a considerable quantity. Specifically, in the field of mental health, the interpreter is faced with a variety of challenges regarding the demand of the situation and the control of the interpreter. Research has shown that interpersonal and environmental demands upon the interpreter with limited control may results in vicarious stress and trauma. Research shows, in an effort to attend to the symptoms of vicarious trauma, interpreters have demonstrated a variety of coping

\footnote{Deaf is capitalized to indicate those who have a hearing loss that are associated with the Deaf culture and community.}
mechanisms in direct conflict with the CPC. The Registry of Interpreters for the Deaf (RID) has established the CPC for the purpose of providing guidelines to make ethical decisions. Research demonstrates that briefing, psychological knowledge, self-efficacy and professional support are instrumental in reducing vicarious trauma. This paper further discusses ethical coping strategies an interpreter experiencing vicarious trauma may implement. According to the findings of this research, for the protection of all parties, mental health interpreters are to care for one’s physical, mental and emotional state while upholding the CPC.

**Christian worldview integration:** It is in Exodus 4:11 where the Lord boldly declares that it is he alone who have made the mouths of man. He has created them Deaf and mute, seeing or blind. Not only is the Lord declaring his creation of such perceived handicaps, he is boasting in them. My Christian worldview has impacted my passion for both the Deaf community and bridging communication across cultures and languages. Recognizing the image of God in all His creation has drawn me to the beauty of cultures, languages and individuals. Having loved ones suffer from a variety of mental illnesses, I have become sensitive to the field of mental health and its importance. Through study of Deaf culture and learning the marginalization and inequality of their history, I stumbled across such stigmas presented in the field of mental health. Furthermore, pursuing the field of interpreting has prompted me to examine the relationship between both the hearing and Deaf communities with regard to the interpreter’s role in mental health. I then discovered through research that the interpreter has historically compromised their ethical standards for self-benefit. I was then faced with the conflict of how one is to maintain the CPC while caring for one’s own physical, emotional and psychological health. This conflict discussed is what my paper is essentially analyzing. In regard to my worldview, such a compromise of ethics for selfishness prompted me to conduct such research. For the field of
interpreting, my research will provide strategies to maintain adherence to the Code of Professional conduct while still caring for oneself. In a spiritually dark profession such as American Sign Language interpreting, going against the majority and adhering strictly to a code of ethics is a bold testament to Christianity.