



CODA Identity, Wellbeing and Belonging

A non-pathologising framework for listening, identity, peer connection and proportionate wellbeing support.

INTENDED AUDIENCE

Education, youth work and social care

A practical professional resource to support respectful, individualised practice with Children of Deaf Adults and their families. CODA identity is not itself a diagnosis, deficit, safeguarding indicator or support need.

SCOPE AND STATUS

This is general professional guidance, not legal advice, a statutory procedure or a substitute for local safeguarding policies. Duties differ across England, Wales, Scotland, Northern Ireland and Ireland. Verify local requirements before applying this resource.

Identity is not a diagnosis

CODAs may experience strong community identity, multilingualism, pride and belonging. Others may describe feeling misunderstood or negotiating expectations between settings. Neither should be presumed. Wellbeing assessment should be individual, developmental, culturally sensitive and grounded in what the child says and does.

- Ask open questions about friends, school, family and what matters to the child.
- Avoid treating Deafness in the family as a symptom or a cause of distress.
- Respect whether the young person wants to explore CODA identity.

Belonging and peer connections

Children may benefit from meeting others with some shared experiences, but CODA spaces should complement rather than replace wider friendships. Avoid forcing a child to represent Deaf culture publicly or disclose family information.

Good practice creates real choice, privacy, positive role models and access to age-appropriate activities.

- Offer voluntary peer and community opportunities.
- Promote ordinary social participation and accessibility for parents.
- Challenge bullying and intrusive curiosity through school-wide practice.

Recognising stress and support needs

Look for changes in sleep, attendance, engagement, mood, relationships, functioning or expressed distress; these signs have many possible explanations. Explore whether services have placed inappropriate interpreting or care demands on the child.

The goal is not to pathologise family life, but to distinguish supportive family contributions from persistent, developmentally inappropriate burdens or significant distress.

- Explore frequency, complexity, consent and effect of responsibilities.
- Listen without leading questions or promises of absolute secrecy.
- Consider early support or specialist referral when indicated by assessment.

Conversations that protect autonomy

Begin with strengths and the child's agenda. Use clear, age-appropriate language and offer choices about how to speak, sign, draw or write. Explain confidentiality and its limits.

Be sensitive to the possibility that the child has been asked to speak on behalf of adults; reassure them that they do not have to manage professional communication.

- "Are there things about school or family life you wish grown-ups understood better?"
- "When do you feel most like yourself?"

- “Is anyone asking you to do a job that feels too big or stressful?”

ESCALATION

If a child describes immediate danger, self-harm risk or abuse, follow emergency and local safeguarding procedures promptly. Peer support is not a substitute for clinical or statutory intervention.

Planning supportive responses

A proportionate plan might include accessible adult appointments, reduced reliance on the child, pastoral support, bullying prevention and opportunities for community connection. Review outcomes with the child and parents where safe and appropriate.

- Set an observable objective rather than a vague label.
- Agree who will take each action and when to review.
- Check that the change improves the child’s day-to-day experience.

Professional references and further reading

UN Convention on the Rights of the Child —

<https://www.ohchr.org/en/instruments-mechanisms/instruments/convention-rights-child>

Department for Education, Keeping children safe in education 2026 (England) —

<https://www.gov.uk/government/publications/keeping-children-safe-in-education--2>

PUBLICATION REVIEW NOTE

For public publication, arrange review by suitably experienced Deaf community representatives, CODAs and the relevant education, clinical or safeguarding leads. Re-check current law, policy and organisational procedures at the time of use.