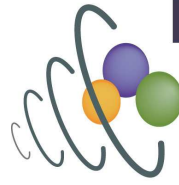


Hear It Is!

Oregon



Hearing Loss
Association
of Oregon

Winter 2009

Issue 36

Communication Styles: Which is Right for You?

By Marc F. Zola, LPC MFT

There are four general styles of communication: Passive, passive-aggressive, aggressive and assertive. Passive styles of communication involve going with the flow, even when the 'flow' is clearly not to your liking. People with passive communication tendencies often report feeling like 'a doormat' or 'a pushover'. Over time, a predominately passive style results in repressed feelings, limited associations with others, and a sense of futility and loss. Think of the act of pushing a beach ball underwater, and trying to constantly keep it from breaking the surface and you get the picture. Passive-aggressive styles involve a combination of giving into the requests of others while simultaneously communicating anger or disdain. Imagine someone asks you to share a cookie, you prefer not to, but you do it anyway and instead of handing it to the other person you throw it at him -- that's passive-aggressive. Passive-aggressive communication is plagued by mixed messages that undoubtedly result in strained relational communication. Aggressive communication is all about attempts at controlling the other person. Yelling, intimidation, physical and emotional abuse are all examples of aggressive behavior that may initially yield some results, but ultimately, an aggressive approach is socially, unsustainable. Assertive communication is basically about asking for what you want, but not demanding or insisting. Assertive communication involves making your desires known in a thoughtful, but direct fashion. An assertive style of communication is genuine, congruent with inner feelings and ultimately the most beneficial for mental health.

I want to be clear that no one is passive, passive-aggressive, aggressive or assertive ALL the time. Our communication with others involves frequent changes from one style to the next -- and rightly so. For instance, aggressive communication could be appropriate if your life or property is threatened and passive communication is probably a good choice if you're being lectured by a judge. But for people managing the emotional impact of hearing loss, there will be a tendency to tilt to the three non-assertive approaches. For this reason, increasing your use of assertive communication is probably a good idea.

Mark Ross, from the National Institute of Disability Rehabilitative Research says, "Assertiveness is the attempt by hearing-impaired people to modify the communication situation as realistically and as efficiently as they can in order to improve their ability to participate in it. Assertiveness means taking a personal responsibility to enhance one's comprehension in these situations, and not just blaming others for communication breakdowns and problems. It does not mean being aggressive." In my therapy practice with people with hearing-loss, I have heard many stories from individuals who were afraid to assert themselves for fear of: "Drawing extra, unwanted attention to their hearing loss", "Embarrassing themselves", "Learning that their friends/family were not as supportive as they hoped", "Finding out that they were no longer the (hearing) person they once were", and "Making people not want to spend time with them".

Unfortunately, these are all valid possibilities, but by leaning on passive, passive-aggressive and aggressive communication approaches, these clients were basically guaranteeing that these things WOULD happen. In other words, there is no guarantee that an assertive approach to your hearing loss will work, but there is a guarantee that the three alternatives will not. If you find yourself struggling to be more assertive, there is good news. The vast majority of people are assertive SOME of the time. Most everyone I have seen improve seemed to do so by first taking an inventory of the few times they were assertive. By noticing your own tendencies towards assertiveness, you can increase your comfort level with acting assertively and likely enhance your quality of life.

Marc Zola, MEd, LMFT & LPC is a Licensed Marriage & Family Therapist and Licensed Professional Counselor in private practice in Eugene Oregon. Much of Marc's practice is dedicated to helping clients manage the emotional impact of hearing loss. Marc may be reached via email at marczola@yahoo.com.

From My Lips to Your Ears

Editorial by Chuck Vlcek

Technology. It has given us more sophisticated hearing aids and the wonderful device called cochlear implants. It has also given us web pages and e-mail.

Thus this newsletter, which is in part about hearing aids and cochlear implants, is going high-tech, or at least medium tech. A pdf copy of this newsletter – in color -- is already available on our website, <http://www.hearinglossor.org/> We are now offering you the option of transferring your subscription to the online version. You would receive a notice by e-mail (bcc) that the current issue has been posted, along with a link to the web page. Your e-mail address will not be published or provided to a third party.

Why go online? Perhaps you like to curl up in a cozy chair with the printed version. You can still do that – either continue receiving the printed newsletter or download it and print it yourself. But if you read it online, you will save printing and mailing costs, ink, paper, and trees. You can store it on your computer in its own folder where it is easier to find (back issues can also be downloaded) and take up less space. Electronic clutter is neater than paper clutter. Also, the newsletter is posted online about two to three weeks before you would receive the printed copy in the mail. So drop us a line at our new e-mail address: elist@hearinglossOR.org.

The same address can be used if you want to e-mail us about other things. Perhaps you have an article to submit or a question about advertizing rates. The reader survey is still up and running. If you haven't contacted us in the last 18 months or so about continuing the subscription – either standard or online – please do so. We always welcome your feedback about the newsletter – what we are doing right and what needs improvement. If you do not have e-mail our snail address is still good.

Hearing Loss Association of Oregon

Officers and Board Members

President Cathy Sanders
Vice President Cheryl Davis
Recording Secretary Chuck Vlcek
Treasurer Bob Russell

Board members: Mark Foster, Stephen Sanders, Bob Williams, Peter Johnson, Todd Landsberg, Karin Smith, Wayne Seely, Cindy Campbell, and Andy Evans

We need more board members! Several terms are expiring soon. See page 13 for application form.

Hear it is! #36, Winter 2009. Published quarterly by the Hearing Loss Association of Oregon, PO Box 22501, Eugene, OR 97402. Chuck Vlcek, Editor; Karin Smith, Assistant Editor; Karen Swezey, Business Editor.

Hear it is! will regularly print your hearing loss-related stories – personal experiences, coping strategies, and evaluations of technology are welcomed. Maximum word count is 500 words. Article contributions should be made to the editor at elist@hearinglossOR.org.

For advertising information and rates, contact Karen Swezey at elist@hearinglossOR.org.

Deadline for Spring 2009 edition: March 15, 2009.

Relaytionships

Have a loved one, friend or co-worker
you want to call today?



You can, with Oregon Telecommunications Relay Service.
Making a call will never be difficult again!

TTY: 711 or 1.800.735.2900 ASCII: 1.800.735.0644
Voice: 711 or 1.800.735.1232 español: 1.800.735.3896
VCO: 1.800.735.3260 STS: 1.877.735.7525
900 Services: 1.900.568.3323 www.rspf.org

Customer Service in English: 1.800.676.3777
Servicio al cliente en español: 1.800.676.4290



For questions or comments, contact
the OTRS Account Manager:
damara.g.paris@sprint.com



Mark your calendar and come celebrate HLAA's 30th Birthday! We'll be shakin' things up at the Gaylord Opryland Resort and Convention Center in Nashville: new to the educational program will be a track of workshops especially for Young Adults; there will be a 30th Birthday celebration on Friday night; and, there will be an off-site event on Saturday night that is sure to knock your cowboy boots off! Here's a tentative schedule of major events:

Wednesday, June 17, 2009

- ✦ Registration Open (through Saturday)
- ✦ State Leaders Meeting, Part I

Thursday, June 18, 2009 – Official Opening

- ✦ Board of Trustees Meeting
- ✦ Annual Business meeting
- ✦ Three days of workshops begin in the afternoon
- ✦ State Leaders Meeting, Part II
- ✦ Opening Reception in the Exhibit Hall
- ✦ Opening Session featuring Vint Cerf, vice president and chief Internet evangelist for Google and widely known as one of the "Fathers of the Internet"

Friday, June 19, 2009

- ✦ Research Symposium sponsored by the Deafness Research Foundation
An Update on the Latest Hair Cell Regeneration Research
- ✦ HLAA 30th Birthday Celebration

Saturday, June 20, 2009

- ✦ Off-site trip to the Grand Ole Opry

Sunday, June 21, 2009

- ✦ Awards Breakfast

REGIONAL RESOURCE CENTER ON DEAFNESS

Professional Preparation Programs



American Sign Language/English Interpreting

Bachelor of Science • Bachelor of Arts

American Sign Language Studies

Bachelor of Science

Rehabilitation Counselor Education

Master of Science • Deaf and General Options

Teacher Preparation: Deaf Education

Master of Science

In-Service Training

Western Region Interpreter Education Center
Rehabilitation Counseling with
Deaf and Hard of Hearing Adults
PEPNet-West at WOU

Deaf and hard-of-hearing people and other members of traditionally underrepresented groups are strongly encouraged to apply. Contingent upon continued federal funding, tuition waivers and/or stipends are available.

345 North Monmouth Avenue • Monmouth, Oregon 97361
503-838-8444 (V/TTY) • E-mail: RRCD@wou.edu
see www.wou.edu/rrcd for application deadlines

OREGON HEALTH & SCIENCE UNIVERSITY

Department of Otolaryngology/Head and Neck Surgery

HEARING SERVICES

- Cochlear Implants
- Hearing Aids
- Hearing Screening
- Baha Implants
- Vestibular Testing
- Assistive Listening Devices
- Research and Education
- Aural Rehabilitation

HEARING, VESTIBULAR, AND COCHLEAR IMPLANT SERVICES

503 494-5171

Sean O. McMenomey, MD, FACS

503 494-8135

Anh T. Nguyen Huyhn, MD, PhD

Cochlear Implant Staff

Audiology Staff

Donald S. Plapinger, EdD, CCCA

Amy L. Johnson, AuD, CCCA

Brooke E. Akright, AuD, CCCA

Jennifer J. Lane, AuD, CCCA

Jessica L. Hagan, MA, CCCA

Devon M. Baskett, MA, CCCA

V/TDD

cochlear@ohsu.edu
www.ohsu.edu/ent





OREGON PUBLIC UTILITY COMMISSION

OTAP * OREGON TELEPHONE ASSISTANCE PROGRAM
TDAP * TELECOMMUNICATION DEVICES ACCESS PROGRAM

NEED HELP PAYING YOUR MONTHLY PHONE BILL? CONTACT OTAP:
Oregonians who are on a qualifying assistance program may receive a reduction in their monthly bill for local residential telephone service.

E-mail: puc.otap@state.or.us

HAVING TROUBLE OR UNABLE TO COMMUNICATE BY TELEPHONE? CONTACT TDAP:
Loans adaptive telephone equipment at no cost and with no income restrictions to eligible Oregonians who are deaf, hearing, cognitive, vision, speech and mobility impaired.

E-mail: puc.tdap@state.or.us



MAILING:
P.O. Box 2148
Salem, OR 97308-2148

ADDRESS:
550 Capitol St NE, Suite 215
Salem, OR 97301-2551



PHONE:
(800) 848-4442 Voice
(800) 648-3458 TTY
(877) 567-1977 FAX
(503) 378-6211 Videophone
Monday - Friday 8 a.m. to 5 p.m.

Download or complete applications at www.rspf.org

READER SURVEY: WHAT DO YOU WANT?

Every good newsletter should have a reader survey of some kind. Here is yours.

While we plan to continue printing the newsletter, we also offer the option of notifying you by e-mail that it has been posted on the HLA-OR website and providing a link. The electronic version is in color. Would you be interested in receiving it this way rather than having a printed copy mailed to you?

What kind of articles would you like to see? About hearing aids? Cochlear implants? Accessories and assistive devices? How to shop for them? About technological developments? About coping strategies? About human interest stories? About hearing related legislation? About our chapters and board of directors? Other?

Your degree of hearing loss and hearing history probably influences your outlook and which topics interest you most. Is your hearing loss mild, moderate, severe, or profound? Is it progressive? Did it begin at birth, before age 6, before age 21, or later? Do you use a hearing aid or a cochlear implant? Are you a friend or relative of a hearing impaired person? If so, what is that person's degree of loss and history?

E-mail your response to elist@hearinglossOR.org or mail to HLA Oregon, P.O. Box 22501, Eugene, OR 97402

2008 OTICON FOCUS ON PEOPLE AWARDS HONOR DR. TODD LANDSBERG OF EUGENE, OR



Todd Landsberg (left) is a current board member of the Hearing Loss Association of Oregon. He is shown with Oticon CEO Peer Laritssen (right).

Todd Landsberg, AuD is among the outstanding hearing care professionals honored by the 2008 Oticon Focus on People Awards, a national competition that recognizes individuals who are helping to eliminate negative stereotypes of what it means to have a hearing loss. Todd's selection as a first place winner in the Practitioner Category was announced at the eleventh annual Oticon Focus on People Awards Ceremony in Denver. The Awards ceremony was attended by over 300 leading hearing care professionals from across the country. As part of his award, Dr. Landsberg has designated the American Tinnitus Association, Cascade Lions Club of Eugene and Volunteers of Medicine of Eugene as the recipients of a \$1,000 donation from Oticon, Inc.

At age five, Dr. Todd Landsberg was fitted with his first pair of hearing aids by a kind and caring hearing care professional and his career path was established. He has faced many challenges in his life in addition to his hearing loss, including a kidney transplant, but his struggles have made him stronger and more

determined to achieve his goals. When he is not caring for patients at the Eugene Speech and Hearing Center, Dr. Landsberg volunteers his time as an advocate for people with hearing loss with numerous local and national organizations including the Volunteers of Medicine Clinic. In his free time, he enjoys running and is an accomplished distance runner. For this dedicated and caring professional, "going the distance" for people with hearing loss is a way of life.

The Oticon Focus on People Awards program was created in 1997 by Oticon, Inc., one of the world's oldest and most respected hearing instrument manufacturers. By celebrating the accomplishments and contributions of individuals with hearing loss, Oticon, Inc. aims to call attention to common misconceptions about hearing loss and motivate people with hearing loss to take advantage of the help that is available to them. The company's goal is to reach out to the 80 percent of an estimated 28 million Americans who could benefit from hearing solutions, but who fail to seek professional help.

"We know that people with hearing loss make incredible contributions in all walks of life," states Peer Lauritsen, President of Oticon, Inc. "But for many, negative stereotypes persist. Through the Focus on People Awards program, we hope to motivate people to speak with hearing care professionals about the hearing solutions that can enable them to live the lives they want with the hearing they have."

For more information about the Oticon Focus on People Award and hearing health, log on to www.oticonusa.com.



www.oregoncaptel.com



www.sprintcaptel.com

*Difficulty hearing
over the phone?*

We have solutions for you!

CapTel[®]

*"At last, I can
LISTEN and READ."*

WebCapTel[®]

*"It's so good not to
miss a single word
again in my phone
conversations."*



CapTel and WebCapTel
are trademarks of Ultratec, Inc.

Within Earshot: News You Need to Know

CRS – It's Not Over Yet

Prenatal rubella was once the single leading cause of congenital hearing loss until a vaccine was developed following a major epidemic in the mid 1960's. Very few persons were unlucky enough to be born with Congenital Rubella Syndrome (CRS) after 1970. The syndrome consists of two or more of a constellation of physical defects associated with prenatal rubella, with hearing and vision loss and heart defects being the most common.

Over the past few years there has been growing evidence that additional manifestations of CRS can occur later in life. The most common late onset conditions are additional hearing and/or vision loss, thyroid problems, a type of diabetes, and some sclerosis of affected heart tissue.

The best single source of additional information can be found on the Helen Keller National Center website: <http://www.hknc.org/Rubella.htm>

It Works For Me

Recently I attended a memorial service for a friend. I called ahead to see if there were Assistive Listening Devices available at the church where the service was to be held. Without them, I wouldn't be able to follow the service. "No, we don't have any," I was told.

So I took along my own FM system and planned to tape my microphone to the PA microphone at the church. The problem with this plan was that there was going to be more than one mike in use. So I would miss a good part of what was being said. My solution to this dilemma was to lay my FM transmitter on top of a loudspeaker so the microphone could hang down in front of it. The microphone picked up everything that came through the speaker. I didn't miss a thing!

The Consumers Guide to Hearing Aids

You can order the newly published 24-page guide "The Consumers Guide to Hearing Aids" from our national office. The color booklet illustrates the different styles of hearing aids and comparing different models and features. It illustrates the technology pyramid and hearing aid pricing. This guide contains:

- Explanation of conventional Analog, Entry Level Digital, Basic Digital, Advanced Digital, and Premium Digital Hearing Aids and compares the differences.
- 27 Worldwide Brands Compared
- Why Open-Fit Hearing Aids are Winning Customer Satisfaction
- Smart Hearing Aids: Automatic Noise Suppression, Feedback Cancellation, Directional Microphones
- Explains why two hearing aids are better than one.
- 6 Questions to ask When Buying Digital
- FM Technology Hearing Devices
- Discusses Direction Mic Technology for Hearing In Noise
- Explains what you can expect from your hearing aids
- Provides a glossary and definitions so you understand hearing aid terminology.
- A must-have before you buy your next pair of hearing aids

Price: \$7.12 (which includes shipping and handling)
Send your check to:

Hearing Loss Association of America

7900 Woodmont Avenue Suite 1200

Bethesda, Maryland 20814

Ask Them to Turn It On

Many of us enjoy closed captioning in our homes, but miss what is on the TV when we are out in a public place. Because federal law requires that all televisions (13" or larger) have a closed captioning chip in them, captioning is an option nearly everywhere.

Most people have captioning and do not realize it. One time I joined some co-workers at a local restaurant after work. On the TV in the lounge area where we were sitting, an advertisement came up for the local news that caught our eye. You know the tease "shooting at an area plant, details at 5."

We asked for the sound to be turned up so that we could catch the story. I realized that I would not be able to understand it. I sat thinking how I would have to wait patiently until the whole story was over and then ask one of my co-workers what it was all about. I would get a very short version of the story, or worse, I would be told it was nothing.

Then I decided to ask the bartender to turn the captioning on. I received a perplexed stare. I continued with confidence, "I know this TV has closed captioning - can you switch it on for me? If you turn the TV up loud enough for me to hear it your other customers will leave." Now I received a worried look. "I don't know how," the bartender replied. "Bring the remote over here, I'll show you," I responded. I asked her to bring up the menu that sets the contrast and other controls. I instructed her to move through the options until "caption" appeared. I told her to set it to "CCI" instead of "off" and the captions appeared. I thanked her and watched the story as it came upon the news.

I spent most of the rest of the time explaining close captioning to the restaurant staff and customers. Now any place I go into that has a television set, I ask them to set the captioning on. Even if I wasn't that interested in it, I find that once I explain it to them, it will probably be on when I come in the next time. So speak up! Even people with good hearing appreciate the captioning in a noisy environment.

When you attend a meeting of some kind and the speaker is taking questions from the audience, if they don't repeat the question before giving the answer - Speak Up!

CI Corner

This is a new column which is dedicated to providing anecdotes and information relating to cochlear implants. Reader input is welcomed.

Good news for cochlear implant users! Medicare now covers both rechargeable and non-rechargeable batteries to power your implant. Medicare normally covers 80% and medi-gap policies often cover the other 20%.

Linda Day, who is the Western Region volunteer coordinator for Cochlear America, has been writing a weekly newsletter. Among other things, she has been soliciting "CI moments" which are anecdotes from CI users who are especially impressed by something they could not hear before.

Linda shared one such moment she had herself, when she put on her processor in the middle of the night so she could hear her 1 year old grandson if he started crying. She had flashers to alert her but kept waking up every 20 minutes, not fully trusting it. When she turned on her processor, she could hear birds chirping at 2:30 a.m. She had not realized that birds chirp at night, since (like most of us) her "ears" are turned off at bedtime.

For me the first "CI moment" came on the day of turn-on of my first CI. My sister's cat jumped off a chair and I could hear the sound of its paws striking the carpet. Being able to hear a bird's wings beating the air at takeoff 30 feet away was another such moment.

For this newsletter, hearing aid users are also invited to share special "hearing" moments shortly after acquiring a hearing aid or significant upgrade.

Hearing aid users, are you ready for a cochlear implant? If your hearing has decreased to the point that you have difficulty hearing or understanding even with the most powerful aid, you will probably qualify, and most health insurance companies now cover implants, even bilateral ones. The threshold for qualifying has dropped significantly over the last decade as the quality of implants improved. Check with your audiologist.

**If you hear a small still voice,
turn up your hearing aid!**

Telecoils in Plain Language

There has always been confusion regarding a hearing aid and cochlear implant option that can provide significant benefit to people with hearing loss. This option is often referred as a telephone switch, telecoil, t-coil or t-switch.

Below is a brief description of how a telecoil works and how it benefits a person with hearing loss. It is not a technical report, rather a resource for non-professionals who want to understand it and share the information in plain language.

What is a Telecoil? A telecoil is a special circuit inside the hearing aid or cochlear implant. It is simply a small coil of wire designed to pick up a magnetic signal. Telecoils can only fit in two styles of hearing aids: In-The-Ear and Behind-The-Ear aids – and in cochlear implants. The smaller hearing aids are not large enough to fit the telecoil.

How does a Telecoil Work? While the microphone on a hearing aid picks up all sounds, the telecoil will only pick up an electromagnetic signal. It turns off the hearing aid or cochlear implant microphone, picks up the signal and the hearing aid or cochlear implant converts it to sound. This magnetic signal is created from hearing aid/cochlear implant compatible telephones and assistive listening systems. The more technical term for this signal is an induction signal.

Why is a Telecoil Important for the Telephone? Many people report feedback (or squealing) when they place the handset of the telephone next to their hearing aid. The telecoil can eliminate this feedback because the hearing aid or cochlear implant microphone is turned off and the hearing aid or cochlear implant only amplifies the signal coming through the telecoil. Telephone handsets which are hearing aid compatible emit the magnetic signal from the ear-piece. When placed correctly near the telecoil, the sound should be transmitted clearly. You may need to place the ear-piece slightly behind your ear rather than directly over the ear.

What Else Can a Telecoil Be Used with? Assistive listening systems (FM systems, audio loops, etc) have a neckloop or silhouette as a listening option. The neckloop or silhouette transmits the induction signal for the hearing aid or cochlear implant telecoil. So you can turn off all background noise while only hearing the sound going from the FM system's microphone to your FM receiver and neckloop. Audio loop systems also emit the electromagnetic signal so you only have to switch to telecoil to pick up sound.

Are There Any Problems With Using a Telecoil? The phone you are using must be compatible with telecoils or you get interference or no signal at all. There are other sources of electromagnetic signals that can interfere with the performance of the hearing aid or cochlear implant telecoil. Fluorescent lights, television screens, computer monitors and electrical panels can cause a 'humming' sound when you turn on your telecoil. The humming sound interferes with your ability to hear clearly. Sometimes you can move and the interference is lessened.

Sometimes it is not effective to have both hearing aids or cochlear implant telecoils turned on (as when using an FM system) because you may not be able to hear your own voice. You'll only hear what the speaker is saying. If you need to hear classroom discussion, etc., you have three choices. One is to have an M/T switch on your hearing aid that allows the microphone to stay on at the same time the telecoil is operating. Another option is to turn only one aid on telecoil so that you can monitor other

sounds in the room. A third option is to use an FM system with a built-in environmental microphone that will allow you to pick up sounds near you at the same time you are picking up the speaker's voice.

I've Been Told Telecoils Aren't Effective. Is that true? There are telecoils that are not strong. There are also people who don't notice a benefit when trying to use the phone because the phone does not emit a strong enough signal. There are ways to overcome a weak signal or weak telecoil and allow your hearing aid or cochlear implant to perform better. One way is to boost the signal strength by using an amplified telephone. Another way is to use the power of an assistive listening system.

If the volume on your hearing aid or cochlear implant seems to drop when you turn on the telecoil, increase the volume on your hearing aid or cochlear implant. This will help increase the signal strength. An amplified telephone that is hearing aid compatible also boosts the electromagnetic signal so that your telecoil can perform better.

Telecoils allow you an inconspicuous way to use assistive listening systems. They are helpful in noisy situations because the hearing aid microphone is turned off and you only pick up the signal you are trying to hear. Without telecoils, your only listening option for an assistive listening system is headphones or earphone.

Your listening needs will determine if telecoils will be beneficial to you.

Reprinted with permission from: Becky Morris, Beyond Hearing Aids, Inc., 463 Erlanger Rd., Ste. 1, Erlanger, KY 41018 www.BeyondHearingAids.com Copyright 2008 – All Rights reserved

HLA-OR Board News

You are invited to attend the next Annual Meeting which will be held at Albany General Hospital on April 18, 2009, beginning at 10:00 a.m. There will be no workshop associated with the annual meeting this year. The primary business of the Annual Meeting is to elect board members. Everyone who is a member in good standing of the Hearing Loss Association of America (HLAA) is automatically a member of the Hearing Loss Association of Oregon and is eligible to vote. You may vote by mail, e-mail, or in person at the Annual Meeting. To vote by mail, request your ballot from Peter Johnson via email (moggio85@gmail.com) or US mail (3075 SW Flower Terrace, Portland, OR 97239) before March 25th. The deadline to return your ballot by mail is 4/4/09. Ballots will be counted at the Annual Meeting. A short board meeting consisting of new and returning board members will follow the Annual Meeting to elect officers.

Inclement weather and other unforeseen circumstances have stalled planning sessions for a Walk4Hearing. The walk will not be held until this fall at the earliest.

HLA-OR Board Meeting Dates

January 17, 2009

April 18, 2009

July 18, 2009

October 17, 2009

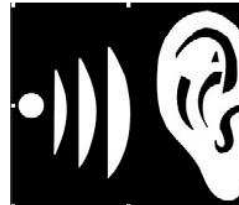
To confirm, contact President Cathy Sanders at catsindallas@q.com or call (cell) 541-623-4662. Meetings will be held at Albany General Hospital.

10 REASONS

1. Dr. Mehr is the most experienced doctoral-level audiologist in the Salem area.
2. Pacific Audiology Center is a state-of-the-art diagnostic audiological facility.
3. All of your hearing testing and fitting will be conducted personally by Dr. Mehr.
4. Our hearing aid prices are the same everyday. There are no special sales, "this week only" schemes, coupons or gimmicks.
5. The results of your comprehensive hearing evaluation will be explained in detail, and we will provide you with a complete printout of those results.
6. The benefits or lack of benefits of hearing aids for your personal hearing needs will be explained in detail.
7. Even if you are a candidate for hearing aids, you will never be told you have to purchase one. (Hearing aids are only of benefit if you are ready to use them)
8. We carry a complete array of assistive listening devices (i.e. bluetooth for cell phones, amplified phones, TV listing systems, etc.). Come see our new store.
9. Professional treatment, prompt care, personal attention and still hearing aid prices consistent with that offered by the Big Box outlets.
10. We offer a 12 month no interest and a 5 year low interest payment plan to qualified buyers.

Why you should trust Dr. Allan Mehr with all of your Hearing Health

Dr. Allan S. Mehr
Board Certified in Audiology



Pacific Audiology Center
120 Ramsgate Square SE
(Off Liberty just south of Madronna)
www.pacificaudiology.com

503-364-2828

Dr. Mehr has over 27 years experience working with individuals with hearing loss. He has served on the Oregon Speech and Hearing Association and Oregon Academy of Audiology Boards and as chairman of the Oregon Board of Examiners for Speech Pathology and Audiology.

We provide the same or better discounts found in all insurance benefit programs, including:
Blue Cross • Secure Horizons • Lifewise

141273

Thanks - We Can't Do It Without YOUR Help!

HLA-OR needs your financial support to continue this newsletter.
(Please note: This is different and separate from any local chapter fee you may pay.)
Using the form on the back of the newsletter, please mail your tax-deductible gift to:

HLA-Oregon
PO Box 22501
Eugene, OR 97402

We thank the following folks who have sent donations since the last issue:

15 Anonymous
Barbara Courter
Gary Garner
Ruth Spielman
Luann Enz
John Pierce
Beth Carter

Anna Cushman
Judy Barnes
Mildred Goe
Christina Leippe
Bill Hockinson
Merlene Ashbaugh
Anne McLaughlin

Lois Johnson
Jo D'Antonio
Al West
LB Lynch
Carol Lehto
John Peterson
Jocelyn Cox

Marcie Heald
George Johnson
HLA of Lane County
BL Helmer
Vicki Vandehey
Grace Tiesen

HLA-OR Board of Directors Application Form

HEARING LOSS ASSOCIATION OF OREGON IS SEEKING CANDIDATES TO SERVE ON THE BOARD OF DIRECTORS

WE NEED YOU: We are always looking for people to fill empty seats on the Board of Directors of the Hearing Loss Association of Oregon and its committees.

Who is eligible?

All members of Hearing Loss Association of America (HLAA) residing in Oregon or who are participants in a HLAA chapter in Oregon are eligible. A candidate's membership should be in good standing. We are looking for candidates of all interests and backgrounds. Candidates should express a desire to support Hearing Loss Association of Oregon's (HLA-OR) goals of providing support and education for those with hearing loss, increasing membership, networking and providing representation for those with hearing loss in the state Oregon.

What is involved?

Individuals serve on the Board for a period of three years beginning the date of their election. The Board meets four times annually. Three of the meetings are generally held on a Saturday in Albany as it is a centrally located venue. The fourth is held in conjunction with the HLA-OR Annual Meeting at a location which is determined each year. This year it will be held on the fourth floor conference room at Albany General Hospital on April 18.

What do board members do?

Board members staff several committees whose duties are to carry out the goals of HLA-OR. Business between meetings is generally conducted by email. At meetings Board members discuss ways to further the goals of HLA-OR, committee members report to the board and new ideas are floated (not to mention a great opportunity for lunch just to catch up with everyone, trade stories and take a break from business).

Interested individuals should complete this form, attach answers to the questions below and return both to Peter G. Johnson via email (moggio85@gmail.com) or US mail (3075 SW Flower Terrace, Portland, OR 97239) **BY February 23, 2009.** **Please feel free to contact Peter with any questions you may have.**

Name: _____

Address: _____

Email: _____ Phone: _____

(Please provide your answers on a separate sheet of paper)

Why do you wish to become a board member?

Please describe any personal interests or experiences with hearing loss.

Please describe any professional experiences you have had with individuals with hearing loss.

Have you ever served on a board of directors or in a similar capacity?

Is there other information that you believe is relevant to your application for Board membership you wish to provide?

Chapters in Oregon

Local chapter meetings are open to all. Family, friends, and professionals are encouraged to attend and become involved. Through chapter meetings and newsletters you'll find:

- *Insights into effectively living with hearing loss*
- *Support/Referrals/Information*
- *Information about the latest technology*
- *Coping strategies & tips*
- *An opportunity to make a difference*
- *Diminished feelings of isolation and aloneness*
- *Opportunities to share concerns and hear from others*



We believe in education - for those who hear well and those who cannot - so that both may understand the causes, challenges and possible remedies for hearing loss. At our meetings, you'll find a comfortable place where hearing loss is accepted and not a problem. Many people report that being a part of a Hearing Loss Assoc. group has made a major difference in their lives. Your participation benefits not only you, but others who attend as well. Following is a list of the current chapters and contact people in Oregon.

Bend Hearing Loss Association meets on the 2nd Wednesday of the month – 6:00PM at the St. Charles Medical Center - Rehabilitation Conference Room - Bend

Contact: Lois Johnson
e-mail: tomloisj@yahoo.com
(541) 388-6869

Central Oregon Coast Hearing Loss Assoc. Chapter is currently inactive. Interested people can contact Cindy Campbell for information and support as well as updates on meeting dates and times.

Contacts:
Cindy Campbell, Chapter co-ordinator
e-mail: hgnw@charter.net
(503) 922-1961 or
1 (877) 271-7620 toll free
4202 NE 43rd
Neotsu, OR 97364

Hearing Loss Assoc. of Lane County meets 2nd Thursday each month - 7 PM at the Hilyard Community Center, 2580 Hilyard Street - Eugene.

Contacts: Andrea Cabral
e-mail: angora@comcast.net
(541) 345-9432 voice
PO Box 22501
Eugene, OR 97402

Hearing Loss Assoc. of Salem the 2nd Wednesday each month - 6:30 PM at the Salem Rehabilitation Hospital – Room 2A 2561 (2nd floor) 2561 Center St. NE

Contact: Kathy Ladd
e-mail: SHHHSalem@aol.com
(503) 394-3863
38427 Shelburn Dr.
Scio, OR 97374

Hearing Loss Assoc. of Portland meets the 3rd Tuesday each month - 7 PM at the Good Samaritan Hospital in the Wistar-Morris Conference Room - NW 22nd & Marshall – Portland

Contact: Mark Foster
e-mail: hlaportland@gmail.com
(503) 413-7348 - voice or TTY
PO Box 2112
Portland, OR 97208
www.hearinglossor.org/portland/

Hearing Loss Assoc. of Douglas County meets the 2nd Monday each month - 7 PM at the Mercy Hospital Community Education Room - 2459 Stewart Parkway -Roseburg (between Parkway Pharmacy & OfficeMax)

Contact: Lorene Russell
e-mail: rlrussell@mcsi.net
(541) 679-9655
732 Mulberry Lane
Roseburg, OR 97470

Hearing Loss Assoc. of Lebanon meets the 3rd Thursday of each month – 6:30 PM at the Senior Center – 65 “B” Academy Square – Lebanon

Contact: Bob Williams
e-mail: robertiw@comcast.net
(541) 258-5818
2020 South 12th #111
Lebanon, OR 97355

Change will not come if we wait for
some other person or some other time.
We are the ones we've been waiting for.
We are the change that we seek.

Barack Obama

If you are interested in starting a chapter in your area, contact:

Cindy Campbell,
Oregon Chapter Coordinator
e-mail: hqnw@charter.net
(877) 271-7620 Toll free or
(503) 922-1961
4202 NE 43rd
Neotsu, OR 97364
or
Chapter Coordinator
Hearing Loss Assoc. of America
(the National Office)
e-mail: tbarrient@hearingloss.org
(301) 657-2248 - voice
(301) 657-2249 - TTY
(301) 913-9413 - FAX
7910 Woodmont Avenue Suite 1200
Bethesda, MD 20814

DISCLAIMER

Opinions expressed in this newsletter are those of the individual author and are not necessarily those of HLA-OR. Mention of products and services does not mean endorsement, nor should exclusion indicate disapproval. Personal experiences and diverse opinions related to hearing loss are welcome for publication, and should be mailed to HLA Oregon at the address listed below. Unless otherwise noted, readers interested in duplicating or distributing any or all material found in the “Hear It Is!” have our permission to do so. Please credit the source when using such material.

**Hearing Loss Association of Oregon
PO Box 22501
Eugene, OR 97402**

e-mail: elist@hearinglossOR.org



**Hearing Loss
Association**
of Oregon

PO Box 22501
Eugene, OR 97402

NONPROFIT
US POSTAGE
PAID
EUGENE OR
PERMIT NO 471

ADDRESS SERVICE REQUESTED

Here It Is! Oregon Winter 2009 Newsletter

I would like to receive (or continue to receive) this newsletter.

Name _____

Phone _____

Organization Name _____

Address _____

City _____ State _____ Zip _____

E-Mail _____

I learned about the newsletter from: _____

- Enclosed is my contribution of \$_____ to support the **Hearing Loss Association** outreach programs in Oregon. Contributions will be acknowledged in the next issue.
- I wish to remain anonymous.
- I cannot contribute but would like to receive the newsletter.
- I want to join **Hearing Loss Association of America**, the National Organization. Please enroll me as a member. I'm including my \$35 membership fee.

Or you can sign up online at www.hearinglossOR.org (click membership, then click application)

Donations to support **Hearing Loss Association** outreach efforts should be made payable to **Hearing Loss Association of Oregon** and mailed to P.O. Box 22501, Eugene, OR 97402.