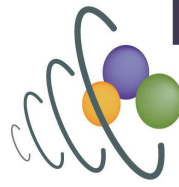


Hear It Is!

Oregon



**Hearing Loss
Association
of Oregon**

Winter 2013

Issue 52

Need ALD? HLA-OR May Have It

If you need assistive listening devices (ALD) for a public meeting or private party, you will soon be able to rent them from HLA-OR for a reasonable fee. HLA-OR has inherited a collection of devices which were originally obtained by the Oregon Lions Sight and Hearing Foundation through a grant. When the OLS&HF found maintenance to be too burdensome, they arranged for ODHHS to take custody. When the devices were found to be languishing unused and unserviced, HLA-OR arranged to take custody. Since then HLA-OR board members Wayne Seely and Duane Davis have been inventorying and cataloging the various items and determining which ones were still usable.

The next step was to make any necessary repairs. Currently they are photographing the items and preparing a rental fee schedule which will eventually be placed on HLA-OR's website at www.hearinglossOR.org. They include devices that are designed for group use such as room sized audio loop systems, FM systems, and infrared (IR) systems. See page 6 for an overview of how these systems work. In addition there are a few personal items such as neckloops.

Below is a list of the items that will soon be available. If you have any questions or desire further information, contact HLA-OR at info@hearinglossOR.org or Daune Davis at davisd838@gmail.com.

5 short range FM transmitters with carrying cases and 37 FM receivers
3 small mixers (home made) for short range transmitters, each for six mic's, each with a short cable.

20 microphones with 1/8" plug.
30 IR receivers
1 IR emitter
27 neck loops
17 Loop receivers
16 Microphones w/XTR connection
26 ear buds

26 head phones
2 large area FM transmitters
1 Small area Loop
2 Medium area Loop
1 Large area Loop
1 Portable PA with battery pack
1 Personal FM

From My Lips to Your Ears

Editorial by Chuck Vlcek

The big news for this issue is that it is now 20 pages long. If you are reading the printed version, you may notice that it is a little bulkier with just one new ad. We are inviting other sponsors to support us through their ads. Please contact Karen Swezey (info@hearinglossOR.org), our Business Editor, to discuss this opportunity.

With more room for articles, we borrowed shamelessly from the Hearing Loss Californian. One article actually originates with the 2012 HLAA Convention in Providence (Tech Topics, page 12) and the topics were sufficiently interesting to discuss it rather than merely direct the reader to the HLAA website. The other article did originate in California, and dealt with communications between spouses, one of whom had a hearing loss (see pages 11-12). We applaud the Californians for bringing up this important subject.

Assistive Listening Devices (ALDs) continue to be prominent in the news. As an example of hard of hearing people helping themselves, HLA-OR is about to make a variety of ALDs available for rent (front page). A refresher course in how ALDs work is offered on page 6.

Finally, it is becoming easier to find an ALD near you with the websites listed on page 8.

The 2013 HLAA convention in Portland is drawing closer. It is already too late to cash in on the early bird registration, but the upcoming symposium and workshop topics are intriguing enough to make the regular rates worthwhile. So if you missed the early bird you can still get in by shaking loose a few extra dollars.

Hearing Loss Association of Oregon

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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 info@hearinglossOR.org.

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

Deadline for Spring 2013 edition: March 31, 2013.



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HLA-OR Quarterly Meeting Dates

The next meeting will be held on March 16, 2013 at Albany General Hospital

(Reimer Building). In 2013 other meetings will be held on 6/15, 9/21, and 12/14.

To confirm, contact President Bob Russell at bhrussell@frontier.com or call him at (503) 614-9730. Guests are invited to attend but should first contact President Bob Russell.

Board Election and Annual Meeting Notice

A brief annual meeting will be held prior to the next regular board meeting on March 16, for the purpose of electing board members. Please note that board members are *required* to be members of the Hearing Loss Association of America. There are three candidates for seven open board positions. Positions remaining open may be filled by presidential appointment, subject to approval by the board. A member in good standing may vote at the annual meeting or by mail or e-mail. Please see page 15 for voting instructions and condensed bios of the three candidates on the ballot. Officers will be elected by the incoming board members.



CONVENTION HIGHLIGHTS: KEYNOTE SPEAKER Howard Weinstein will give an inspiring life story about how his life changed after the death of his 10-year-old daughter. This year's topic for the RESEARCH SYMPOSIUM will be "Latest Developments in Hearing Rehabilitation Research". WORKSHOPS AND PRESENTATIONS will be held covering such topics as "Diabetes and Hearing Loss," "Approaches to Tinnitus Management," "Approaches to Auditory Rehabilitation," and Group Auditory Rehabilitation." EDUCATIONAL WORKSHOPS will be on four tracks: Advocacy, Assistive & Other Technology, Hearing Aids & Cochlear Implants, and Relationships.

The EXHIBIT HALL will display the latest cutting edge technology and services for people with hearing loss. An ENCHANTED EVENING is planned for the Forestry Center on Friday Night. An AWARDS BANQUET will be held on Saturday night which will also be a farewell for the retiring National director, Brenda Battat.

Transportation between the Double Tree Hotel and the Convention Center will be free and round the clock, transportation to the Forest Center will be free, and all attendees will receive a free pass for Tri-Met for the duration of their stay.

Individual Membership in HLAA is \$35 for 1 year, \$95 for 3 years, or \$140 for 5 years.

One-year membership in HLAA is \$20 for student, \$45 for couple/family, \$50 for professional.

Membership includes the award-winning bi-monthly magazine, *Hearing Loss*. Write to HLAA, 7910 Woodmont Ave., Ste. 1200, Bethesda, MD 20814; 301-657-2248 (Voice); 301-657-224 (TTY); 301-913-9413 (Fax) or www.hearingloss.org.

PLEASE JOIN TODAY!

Large-Room Assistive Listening Device (ALD) Systems

By David Viers

Introduction: This article is about the major Large-Room ALD Systems available today. This discussion is meant to be a brief overview, not an in-depth analysis, of these systems. Each of these systems has positives and negatives – this means that for a given application or setting, one system may be the best choice. In a different setting/application, a different system might be chosen.

All of these systems work by essentially taking the signal (e.g. speaker's voice, music, sound track, etc.) and transmitting it wirelessly to the listener. This may aid in substantially eliminating or reducing the negative effects of distance, background noise and reverberation.

The three systems that will be discussed here are: FM, Infrared, and Loop.

FM: FM systems work by using radio broadcast frequencies (similar to those on FM radios) approved by the FCC. This requires a method to pick-up the sound source (e.g. a microphone), a transmitter to send out the signal, and a receiver to accept this signal. Each person wanting to avail himself of this technology must have a receiver. There are several ways that this received signal may find its way to the listener's ear: headphones or ear buds would be one possibility; a neckloop or silhouette inductor(s) would be another (preferred) method if the listener has hearing aids equipped with a T-switch (these methods also work with infrared receivers described below).

Transmission distance is generally excellent, with a radius of 100 to 150 feet and will travel through walls. One advantage to this is that a person can often leave the room (e.g. to visit the restroom) and never miss a word of a presentation. The FM transmitter and FM receiver must be on the same frequency. If multiple systems are in use, care must be taken that each system is on a different frequency. There is also the danger that if another near-by system (perhaps in an adjacent facility) is in use, there could be interference.

Infrared: The way infrared systems work are very similar to FM systems except that they use infrared light as its transmission medium – so, with this one exception, everything stated in the first paragraph of the FM section is also true of infrared. Since Infrared is light the receivers must be in line-of-sight of the transmitter. A person cannot leave the room and hear what is being said. This is both a pro and a con. The pro is that multiple systems can be set-up in adjacent rooms and there is no danger of interference between these systems. Also, this system is ideal for use in court rooms or other venues where confidentiality is important. The con is that, because sunlight also has infrared light, infrared systems will probably have problems in direct sunlight.

Loop: A Loop system is basically an amplifier and a (Loop of) wire strung around an area. The signal is fed into the amplifier (where the signal can be boosted in a controlled way) and then sent into the Loop. When the Amp is turned-on, an electromagnetic field is established in this area.

A huge advantage of the Loop system is that a person with a T-switch equipped hearing aid needs no receiver; s/he can simply walk into a Looped area and turn on his/her T-switch - the signal will "magically" appear in that person's ears. This system is generally very cost-effective, especially when there are multiple hearing-impaired people using this system. If a person does not have hearing aids equipped with a T-switch, then an induction receiver (with headphones or ear buds) must be used. A negative to this system is that these systems cannot be set-up next to each other because one system's field will often "spill over" into an adjacent system – although there are Loops now being made that cancel this effect. In the last few years there has been a big push by many on the local and national levels to encourage the proliferation of this technology, which has enjoyed widespread use in Europe for decades.

T-switch: Telecoils are a feature that can be added to hearing aids and cochlear implant processors. They are highly recommended. As noted, it can be used with all of the ALD systems mentioned. It can also be used in a number of other ways (e.g. telephones, personal ALDs, etc.) that make these extremely advantageous to have. The author would not consider purchasing a hearing aid without a T-switch. He also highly recommends that the hearing aid have M, T and MT settings – this stands for Microphone, T-switch and Microphone/T-switch – he uses each of these settings, depending upon the occasion. Please note that some T-switches are better (stronger) than others. Try it out first before purchasing.



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Within Earshot: News You Need to Know

ALD Locator

A website called www.ALDLocator.com is a free web locating device to help people with hearing loss, find venues in their area that have assistive listening devices installed. It is in the beginning stages of this endeavor and the webmaster is trying to make this site as user friendly and accurate as possible. If you have lists of venues that have either FM, infrared or hearing loops and would like to have them available on this site please send them along.

Currently there are approximately 2100 venues listed on the ALDLocator. Churches, Civic Centers, Theaters, Universities, Town Halls make up the majority of the list, but as we get further along we have everything from New York Taxi cabs which have hearing loops to sports stadium ticket booths, US Botanical Garden Trams, to Retirement communities, hospitals meeting rooms and even the Galata Maritime Museum in Genova, Italy.

There are two other ALD locating websites:

www.loopamerica.com/loops.aspx and

www.hearinglosshelp.com/loopedbuildingsbystate.htm

You can help all of America *Get In the Hearing Loop*. If you are aware of any looped facilities in your community or elsewhere that should be on their lists, you would be doing the hard of hearing a great favor if you would visit their web sites and provide any missing information to the keepers of those lists.

Understanding Digital Captions

Getting providers to caption material is one thing, but decoding them is another. Steve Barber, a Trustee at HLA North Carolina has written a comprehensive article that explains the now complicated decoding process. Here is how he describes it:

“This article offers an introduction to captions in a digital world and points to other resources that can help you get the captions you need.

No longer can we just turn on the captions on our TV and expect it all to work. New features and power come with a price. Now we must learn where and how to turn on the captions, how to wire up our TVs to all the set-top boxes, converters, players and even computers and game machines. Often these external boxes are where the decoding must be done.

There's a lot to learn, and this is just a first step, but you've got to start somewhere if you want your captions.”

The full article is too long to reprint here but it may be accessed on the internet at:

http://www.ncheatingloss.org/article_digcap.htm

You can also try the presentation entitled *Transition to Digital TV, Captions* at:

<http://www.ncheatingloss.org/programs.htm>

You may also e-mail Steve Barber at:

steve.barber@earthlink.net

Tech Topics

2012 HLAA Research Symposium

The theme for the research symposium at the 2012 HLAA Convention in Providence, RI was “How the Brain Makes Sense of the World of Sound”. Four researchers from John Hopkins University explained the major properties of auditory processing by exploring research on the brain’s ability to encode stimuli from simple tones and to the elements of human speech and music. Two of the individual topics are discussed below, written by Mitzi Shpak for the current winter issue of The Hearing Loss Californian. Captioned videos and pdf documents on these topics can be found online in the HLAA 2012 Conference archives (Friday workshops).

Central Auditory System Basics

Central Auditory System Basics and the Effects of Abnormal Auditory Input to the Brain was presented by Amanda Lauer, Ph.D., Assistant Professor of Otolaryngology. *The brain tells the ear what to do.* Going from the cochlear nucleus in the brain stem to the auditory centers in the higher brain cells are bushy, octopus, and multiplier neurons. Bushy neurons have lots of branched dendrites sending auditory information to the brain. A special strain of deaf cats have very few branches on these neurons, resulting in less information going to the brain. Research has shown that if these cats are fitted with cochlear implants early in life these bushy neurons have many more branches. Use it or lose it: *Unused pathways in the brain tend to deteriorate. Used pathways tend to grow and proliferate.*

Afferent nerves carry the impulses from the ear to the brain while *Efferent* nerves send instructions from the brain to the ear. The efferent nerves are bringing messages from the brain to the olivo-cochlear system telling it how to moderate and calibrate cochlear activity. It balances excitatory and inhibitory inputs. The olivo-cochlear system is the noise system suppressor. When it is damaged your sensitivity to noise is increased and can cause damage to the cochlear nucleus. This is what usually happens in age related hearing loss and *without the sound repressors working properly we are always listening in noise.*

Listening in Noise: Basic Mechanisms

Listening in Noise: Basic Mechanisms and Clinical Implications was presented by Brad May, Ph.D., Professor of Otolaryngology.

When the ear cannot function normally, the brain changes. We need to change our thinking to the concept of “brain deafness” instead of “ear deafness”.

We can hear sound (tinnitus) but lose the ability to understand the sound (speech). We lose lateral inhibition on loudness and frequency. The “noise” fills up our filters. The filter bandwidth is critical, since the noise masks the wanted sound, which causes the “ear filters” to narrow to preserve the sound. Then the outer cochlear hair cells increase the signal to increase the sensitivity of the inner cochlear hair cells and they amplify the signal to the brain. When the brain gets too much signal it sends the message back to lower the amplification because it is getting the message that the sound is too loud.

In progressive deafness the outer hair cells start failing first. They just lose their ability to amplify the signal so they send that message to the brain. Without that amplified message from the ear the brain does not send back the feedback instructions to tune out the noise and turn down the sound. What we lose is not sound but the brain function of inhibition. Noise is no longer filtered. The neurons in the brain are more sensitive to sound and there is less sound discrimination. We are not suffering from too little sound but from too much sound, especially annoying, unwanted, random sound.

In a noisy situation we go from “can’t hear sound” to “uncomfortably loud sound”. There is a very steep change as the sound gets amplified by the inner hair cells but the brain isn’t sending back the sound filtering messages. The result is brain hyperactivity which is thought to be the basis of tinnitus. What we need is not amplification but increased sound discrimination: *not louder, but clearer.*

Dr. May introduced the idea of *sound therapy* to maintain the auditory signals to the brain. We are not doing ourselves any favors by not wearing our hearing aids. Once again, we “use it or lose it”.

Chapter Capers

Salem Chapter: The OHSU Cochlear Implant team will be speaking at the March meeting.

Benton-Linn County Chapter: John Hood-Fysh is now the chapter leader.

Portland Chapter: The chapter is seeking volunteers for the HLAA convention. Contact Vicki March for more information.

Central Oregon Chapter: The chapter continues to meet monthly in Bend.

Lane County Chapter: This chapter will not be meeting in February because of a conflict with a Valentine's Day event.

Douglas County Chapter: This chapter continues to meet informally every other month. The next one is scheduled for February 11.

HLA-OR: Board member Karen Brockett resigned since she and her husband are retiring and will be traveling around the country. Board member Karen Swezey is allowing her term to expire but will remain active, especially as business editor of this newsletter. Chapter coordinator Cathy Sanders has just gotten a cochlear implant. We wish her success with her new ear.

What is your chapter doing? Send your story to the editor at cvlcek@centurytel.net

See pages 18-19 for contact information for these chapters and events.

CI Corner

Cochlear Implants and Hearing Aids: How They Work Together

If you are a cochlear implant user, are you using a hearing aid in your non-implanted ear? Research has shown that even some cochlear implant users who do not notice any benefit from use of a hearing aid in their non-implanted ear alone, may actually obtain benefit in the bimodal condition. Possible advantages you may obtain from using a hearing aid in your non-implanted ear in conjunction with your cochlear implant (bimodal hearing) include:

- Increased environmental awareness
- Improved ability to locate a sound
- A more natural sound quality for speech
- A more full/rich sound quality for music
- Improved speech understanding in a noisy environment

There has also been evidence that suggests people who receive a cochlear implant in an ear which has gone a long period of time without hearing aid use do not do as well. Over time, lack of sound information to your hearing nerve can cause these neural pathways to become dormant. In other words, "use it or lose it!". Providing your ear with sound information via a hearing aid, keeps the hearing pathway to the brain open. If you are considering a second cochlear implant in the future continued use of your hearing aid is a good idea.

We would advise you to consult your audiologist to determine whether using a hearing aid in your non-implanted ear may be beneficial.

We hope you have found this information helpful. Please send any questions you may have regarding cochlear implants to cochlear@ohsu.edu.

- OHSU Cochlear Implant Team

MIXED COUPLES PANEL DISCUSSION

By Dr. Alison Freeman (from the Hearing Loss Californian, fall 2012)

It is common knowledge that the divorce rates among (mixed) hearing and hard of hearing couples are significantly higher than among hearing couples. Typical statistics about the divorce rate among mixed couples where one is hearing (H) and the other is hard of hearing (HOH) range from 66% to 95%. Upon closer inspection, however, many of these statistics are based on old studies made in the 1960's and 1970's. In those days, there wasn't the kind of awareness and acceptance of hearing loss that we see today. Technology now lets us traverse between the two worlds with much greater ease with the internet, text mobile devices, cochlear implants, and captioned movies. While this is not to say that mixed couples don't have unique challenges, the reality is that there is little difference, if both partners work together on making their relationship work.

In July 2012 the Los Angeles Chapter had their second panel of mixed couples sharing how hearing loss affects their relationship. There were five couples ranging in age from their twenties to their fifties with the shortest relationship being two years and the longest 23 years. I moderated the discussion with questions regarding their challenges, strengths, and how they handle a variety of social situations.

So what makes a successful relationship? The five factors in a “**CHACH**” successful relationship are: **C**ommunication, **H**onesty, **A**wareness and Sensitivity, **C**ompromise, and **H**umor.

Communication: Communication, communication, and communication. All couples talked about the importance of communication and the willingness to be honest with each other. Couples who are able to talk about how hearing loss affects their relationship are clearly more successful than those where feelings are not talked about.

Honesty: Sometimes, partners in relationships may think that it seems easier not to deal with problems in the relationship and “sweep them under the rug”. The reality is that it takes courage to be honest because we share our feelings, thoughts, and vulnerability. We might also worry that if we are honest, we might be hurtful to our partners or that we might be rejected or criticized.

Frustration is a common issue for both the hard of hearing and hearing partner. It is important to acknowledge and talk about those feelings, rather than let hidden resentments build up that later can erupt and be far more damaging.

Awareness: Awareness is a critical component of successful communication. Awareness explains the difference between “hearing” and “listening”. “Hearing” is the physical aspect of understanding what was said, but “listening” requires awareness, sensitivity, and at times clarification.

A hearing partner often will not know when the hard of hearing partner really “heard/listened” to what (s)he said or whether (s)he just gave lip service. Hard of hearing partners admitted that sometimes (myself included) we give lip service because we are too tired to ask for clarification or think it isn't important enough to repeat.

Sometimes the hearing partner talks too softly or tries to “fix it” or “take over”. For example he might order in a restaurant for both of them rather than take the time to clarify or let their partner fend for himself. In both of these situations, it helps immensely to be sensitive to each other's need and to give each other the freedom to take a “break”. In any case, all couples, regardless of their hearing status, experience these two aspects of communication, or lack thereof.

Compromise: All couples acknowledged that compromise was an essential part of dealing with challenges and there would be times when one would just have to accept that there will be no perfect solution. Often, there is a continuous challenge trying to figure out how to make each other happy. At times we question if we are doing too much or not enough for or with our partner. *(continued next page)*

One helpful strategy is to look at a 1/3, 1/3, 1/3 compromise formula where both are happy some of the time and it feels more equal. For example, socialize with deaf/HOH friends 1/3 of the time, hearing friends 1/3 of the time, and have a separate “boy’s / girl’s night out” 1/3 of the time.

Humor: The ability to laugh at ourselves is a wonderful skill in dealing with stress. When we can laugh at ourselves, not only is it often an “ice breaker” but it is also reflective of our self-acceptance and maturity. As one person said, “sometimes it is funny trying to fill in the gaps with words or consonants and then I end up fabricating a crazy story in my head that no one else is hearing”. Another partner described telling his wife, “put that in the sack” and she responds quizzically with “the girls are on crack?!”

Social Challenges: The most common challenge all couples had seemed to be facing was navigating social situations. This is a process which requires constant negotiation for each situation with few good answers. Despite the hearing partner’s patience and attempts to help, the hard of hearing partner learns to “accept” that they will have to be satisfied with grabbing what they can.

One effective coping strategy in dealing with challenging social situations includes having a game plan about what will happen before you go to a social event, i.e. how to hint to your partner you need interpreting, creating hand signals to let you know that you are talking too loud or softly or having an exit strategy when you have had enough.

Hearing partners have creative ways of “casually clueing or hinting to insensitive or unaware friends/acquaintances”. For example, a group is discussing a first rate movie that is out, but the captioned movie is not yet available in your area, and you say, “you know, we only go to captioned movies”. In a group where the HOH partner is being left out, say something such as “she is really good at that too” to make the other people aware that she is being left out.

Several couples have often used sign language to tell their partner what the conversation is about, or they use a great little 99 cent app called “Big Words” for mobile devices that allow you to write down a word and when you type it out, it shows up in big letters.

Personality versus hearing loss: An interesting question was asked of how much is due to one’s hearing loss versus personality differences. We all agreed that it was difficult to separate the two. For example, several of the hearing partners tended to be “take charge” people. As one partner explained, “I am a problem solver and I try to solve logistical problems such as where would be the best place for my girlfriend to sit (for lipreading/hearing). If my girlfriend wasn’t hard of hearing, I would just find something else to fix!”

Age vs Gender: Surprisingly, the HOH partner in all of the couples were female. It was pointed out that women tend to seek help more frequently and willingly than men despite the reality of fairly equal representation of hearing loss among both men and women. One factor might be due to “traditional” perspectives of a HOH man who as a provider might see himself as more “damaged” than a woman and as such, might have a harder time with dating.

As one hearing partner stated, “Communication is a shared responsibility and if someone doesn’t want to talk to you, it is their loss”. This is a wonderful ideal that these lucky couples ascribe to, but the reality is that we often encounter others who are simply not aware or who are insensitive. That is why HLAA exists and why we all need to continually educate others.

Something to think about ...

If you are reading the printed copy sent to you, the *color* version is available right now on www.hearinglossOR.org/news.htm

CHECK IT OUT! SEND A LINK TO A FRIEND OR RELATIVE!

Show time!!

Want to go to the movies? Did you know that both Cinemark and Regal theaters currently are showing captioned movies at most of their theaters, and will soon have even more choices available as they convert to digital equipment?

Did you know you can go to your local theater and ask them to give you their phone number so you can call and speak to a real live person at the theater to confirm which captioned moves are playing and what times they will play. That way you don't have to try to make sense out of the pre-recorded messages. (Sometimes the websites and newspaper listings are not reliable.) And you can plan ahead. Theaters often know several days in advance what movies will begin being shown later in the week. For example, in the Eugene/Springfield area, the theaters know on Tuesday evening what movies will begin being shown on the following Friday and what the show times will be.

Regal has partnered with Sony to introduce "access glasses" in order to bring closed captions, wherever you are sitting, into the movie theater. This is a new kind of technology that places the words directly in the viewer's field of vision so one does not have to constantly look at the bottom of the screen where closed-captioning is often found, as in television captioning. These glasses can show text in six different languages, and include features for people with vision loss which will provide extra audio detail about what is happening on the screen.

Cinemark has installed captioning in its theaters throughout the country using a different technology called CaptiView. Three lines of text are seen on the device which is placed in the viewer's cup holder; the words scroll as the actors speak.

We've waited a long time to be able to attend movies with our friends and families. A big **THANK YOU** goes to John Waldo and others who have opened the world of movie theaters to people with hearing loss.

Founder Rocky Stone wrote: "Even reasonably secure people seem to develop insecurity as a result of the onset of hearing loss. Somehow our world seems to have changed. We find ourselves standing on the shifting sands of doubt.

The way out is knowledge of what has happened to us. We have simply lost some or all of our hearing. We have not lost our values, our capabilities (although we need to do some things differently); our capacity to love, show loyalty, have faith and friendships. We have not lost our insight or our ability to think, reason, and ultimately find our way to a somewhat different reality of life in the tactical sense. We remain unique human beings – worthy because we are."

From "An Invisible Condition, the Human Side of Hearing Loss" by Rocky Stone

Cochlear™ World leader in implantable hearing solutions



*Getting a cochlear implant
rebuilt my confidence
and enabled me to take
chances again!*

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Three Candidates Run for Re-election to HLA-OR Board of Directors

David Viers, Duane Davis, and Chuck Vleck are HLA-OR board members running for re-election this year. Their condensed bios are listed below. There are no new candidates. Any remaining open board positions may be filled by presidential appointment subject to approval by the board of directors.

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 can obtain a ballot and biographies at our website (www.hearinglossOR.org), via email (info@hearinglossOR.org), or in writing to PO Box 22501 Eugene, OR 97402. Ballots need to be returned by email or postal mail before March 13, 2013 so they can be counted at the Annual Meeting. Please note that although there are more open board positions than candidates on the ballot, write-in votes are not permitted.

David Viers grew up as a hearing person, but became severely hard of hearing in his early thirties. In the course of taking sign language classes at Portland Community College, he met a series of people that led him to start or become involved with a number of organizations related to hearing loss. For example, he is a founding member of both SHHH - Portland and SHHH - Oregon, now known as Hearing Loss Association of Portland and Hearing Loss Association of Oregon. He also earned a Master's degree in Rehabilitation Counseling: Deafness (RCD). As part of that program, he did an internship at the Self Help for Hard of Hearing People, Inc. (SHHH) national office in Bethesda, MD. He has also been involved with numerous other organizations connected to hearing loss.

Duane L. Davis resides in Lebanon, Oregon, is hard of hearing, and belongs to the Hearing Loss Association. In October 2012 he attended the HAT training in Denver Colorado. This training left him with a commitment to advocate for assistive listening devices being placed in as many facilities as possible. With the help of the Hearing Loss Association of Oregon together we can achieve this goal. A few years ago he experienced his first encounter with an Inductive loop listening system and immediately set his personal goal to spread the word about this wonderful tool for the hard of hearing population.

Chuck Vleck was born with a severe bilateral hearing loss due to prenatal Rubella. He went to Bruce Street School (for hearing impaired) in Newark, NJ his kindergarten and first grade years. He went to regular public schools after that, in Glide, Vernonia, and Coquille, Oregon, and at The Hill School in Pottstown, PA where he graduated in 1963. He graduated from the University of Washington in 1967 with a degree in Atmospheric Sciences. He pursued a career in meteorology at the National Severe Storms Laboratory in Norman, OK and at the National Center for Environmental Prediction near Washington, DC. While at DC he joined the Washington Area for the Group Hard of Hearing and served as president one year. He also presided over the now-defunct Consumer Organization for the Hearing Impaired. After retiring at the end of 1999 he moved back to Idleyld Park, OR and joined the Douglas County chapter based in Roseburg, now serving as president. He has been a HLA-OR board member, secretary, and newsletter editor for the past six years. After wearing hearing aids since early childhood he got two cochlear implants, the right ear in 2003 and the left ear in 2008.

HLA-OR Fall Workshop

Save the date: September 21, 2013. That is when HLA-OR will hold its first workshop in several years. It will be held at the Community Health Education Center in Salem. Planning is still in the preliminary stages, so details will have to wait until the spring issue of this newsletter. Contact Cathy Sanders at catsindallas@q.com if you have questions or wish to volunteer.

Dr. Allan S. Mehr
Board Certified Audiologist

Pacific Audiology Center

"I have referred patients of all ages to Dr. Mehr for audiologic services for years. When the time came that I personally needed an evaluation and hearing aids, I became a patient myself. I don't think I can give a higher recommendation".

Michael W. Kelber, MD, FAAFP
Salem Family Physician

Dr. Mehr has over 32 years experience working with individuals with hearing loss. He started his career as a teacher of deaf children. He taught at schools for the deaf in Oregon, Maine and New York.

After obtaining his doctorate degree in Audiology from Adelphi University, he worked at the New York League for the Hard of Hearing in Manhattan. He was then hired by the Oregon School for the Deaf to supervise their Evaluation Center. He then established Pacific Audiology Center.

He has served on the board of the Oregon Speech and Hearing Association and the Oregon Academy of Audiology. He was appointed by Governor Kitzhaber to serve on the Oregon Board of Examiners for Speech Pathology and Audiology. He became chairman of that board.

120 Ramsgate Square SE
www.pacificaudiology.com
503 364-2828

Thanks for Your Support!

We are grateful for your commitment to support Hearing Loss Association of Oregon. With your help, we can continue to reach out and educate Oregonians about hearing loss and the many ways to cope with it. *Knowledge is power.* We love sharing helpful information.

If you have not contributed in the last 12 months and are able to do so, please use the form on the back of the newsletter, and mail your tax-deductible gift to:

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

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

Marlin Hammond Joni Rio Mary Ann Holser
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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.

HLA of Central Oregon (HLACO) meets on the 2nd Wednesday of the month from 6 to 8 PM at the St. Charles Medical Center, 2500 NE Neff Road, Bend, in Conference Room A (by the front entrance).

Contact: Cliff Tepper
1664 NE Redrose Court
Bend, OR 97701
(541) 390-2174

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The Regional Resource Center on Deafness offers degree programs to prepare professionals to meet the unique communication, rehabilitation, and education needs of individuals who are hard of hearing, deaf, late-deafened, and deaf blind.

Please visit our Web site: www.wou.edu/rccd or contact us at 503-838-8444 or e-mail: RRCD@wou.edu.

Applications are generally due mid-March each year.

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 OR Clark Anderson
Eugene, OR 97402 e-mail: clarkoa@msn.com

Hearing Loss Association of Salem meets the 2nd Wed. each month (except July and August) - 6:30 PM at the Salem Hospital, Building C, Room 1A, 2561 Center St. NE

Contact: Mary Fagan
e-mail: hlasalem@live.com
(503) 409-5491
3253 Dallas Hwy NW Salem, OR 97304-4222

HLA of Portland meets the 3rd Tuesday each month (except June, July and August) - 7 PM in the North-South 1st Floor Conference Room, Building #2 of Legacy Good Samaritan Medical Center, 1040 NW 22nd Ave., Portland 97210

Contact Anne McLaughlin (president)
e-mail: hlaportland@gmail.com
PO Box 2112
Portland, OR 97208-2112
www.hearinglossor.org/portland/

HLA of Douglas County meets the 2nd Monday of even-numbered months - 6 PM at the Mercy Hospital Community Education Room, 2459 Stewart Parkway, Roseburg (between Parkway Pharmacy & OfficeMax)

Contact: Chuck Vlcek OR Barb Stoner
e-mail: cvlcek@centurytel.net (541) 496-0060
(541) 496-4541
P.O. Box 175
Idleyld Park OR 97447

Hearing Loss Assoc. of Linn and Benton Counties meets the 3rd Thursday of each month (except July and August) – 6:30 PM at the Senior Center – 65 “B” Academy Square – Lebanon

Contact: John Hood-Fysh
e-mail: jhood-fysh@wwmore.com
(541) 791-3725 (H) (541)-220-8541 (cell)
818 Broadalbin St. SW
Albany, OR 97321

For an electronic version of this newsletter:

<http://www.hearinglossor.org/news.htm>

To subscribe, e-mail info@hearinglossOR.org and we will notify you with the above link when a new issue is available.

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

Cathy Sanders
Oregon Chapter Coordinator
e-mail: catsindallas@q.com
(503) 881-1642 (cell) or
(503) 623-4662 (home)
1131 SW Marietta Lane
Dallas, OR 97338

or

Chapter Coordinator
Hearing Loss Assoc. of America
(the National Office)
e-mail: elebarron@hearingloss.org
(301) 657-2248 - voice
(301) 657-2249 - TTY
(301) 913-9413 - FAX
7910 Woodmont Avenue Suite 1200
Bethesda, MD 20814

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

Hearing Loss Association of Oregon is a 501(c)(3) charity and depends on donations and grants. All personnel are volunteers. Please send your donation to support our efforts to ***Hearing Loss Association of Oregon*** PO Box Box 22501, Eugene, Oregon 97402.