

Hear it is!

Self Help for Hard of Hearing People of Oregon

 Hearing Loss Association of America

Spring 2006

Issue 26

Annual Meeting and Board Elections

The Annual Meeting was held on March 18th with 110 attendees. The focus was on Relationships and the effect hearing loss can have on these. The vast majority of the evaluations on the various aspects of the all day event were in the very good to excellent range. Virtually all of the attendees seemed to have a very enjoyable time.



New Board members that were elected at this meeting: Peter Johnson, Wayne Seely and Karin Smith; Cindy Campbell automatically joined the Board as Oregon's new Chapter Coordinator.

Officer elections were held by the Board that day with the following results:

- | | |
|-------------------------|-----------------------|
| - President | Cathy Sanders |
| - Vice-President | Wayne Seely |
| - Treasurer | Bob Russell |
| - Secretary | Bonne Bandolas |

DHHART Road Tour and Signing

Recently, several organizations connected with hearing loss (SHHH-OR, Oregon Association of the Deaf, Oregon Deaf and Hard of Hearing Services, and others.) joined together to outreach to some of the more rural areas of Oregon to inform the residents there about these respective organizations and the services they can provide to people with hearing loss and their families/friends. This outreach was accomplished by representatives of most of these groups going on three different tours with heavy advertising to announce their coming. This event was called the Deaf and Hard of Hearing Access Road Tour (DHHART). The first trip was to the Coast (from Florence to Astoria); the second to Southern Oregon (from Salem to Medford); the third was to Central Oregon (from The Dalles to Bend). The trips were financed primarily by the Oregon

"DHHART Road Tour" continued on page 2

Welcome New Chapter Coordinator

We're happy to introduce you to Cindy Campbell, our new SHHH Chapter Coordinator for Oregon. Cindy's role is to encourage folks to join SHHH and to nurture existing chapters and help start new ones.

Cindy stays very busy with her SHHH related activities and several hobbies, as well as working as the Coastal CapTel Outreach Representative, as a medical social services provider, as Deaf and Hard of Hearing Access Road Trip (DHHART) project coordinator and also running her own business from home. She is also very active in several fraternal organizations that provide assistance to people with hearing loss and other disabilities.

As SHHH Chapter Coordinator, one of her projects this year will be to visit each existing chapter at least once during the year to get to meet everyone. Please contact Cindy to schedule a date for her to come to your meeting. Cindy traveled with the Deaf and Hard of Hearing Access Road Tour project throughout Oregon this spring (see more information in this newsletter); helping with the SHHH booth and meeting some of you.

Contact Cindy at hqnw@charter.net
Phone: 877-271-7620 (toll free) or
503-922-1961

Address: Ms. Cindy Campbell
4202 NE 43rd
Neotsu, OR 97364

"DHHART Road Trip" continued from page 1

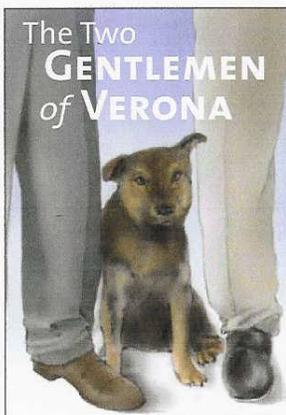
Public Utility Commission (which has several programs of potential interest – see related article) and Sprint (who has a contract to provide some of these services). Each trip took 4 days. In addition to the outreach desired, these trips also provided the opportunity for the recipients to network with each other, forming even closer ties than previously. David Viers went as the representative

of the Oregon state association of Hearing Loss Association of America (previously SHHH).

All of the other representatives that went had hearing losses that were profound and signed fluently. This allowed David the unique opportunity to really test and practice his sign language skills. While hard of hearing (HoH) people are more prone to use their residual hearing and technology, many have become very resourceful at using a variety of techniques (e.g. ALDs, coping strategies, Captioning, written communication) to overcome communication barriers. Sign language can be one of these techniques. While this is a skill that is not easy to learn and master, a number of HoH people have made the effort to acquire this skill to enhance their ability to more effectively communicate with other signers.



2006 Sign Interpreted Events

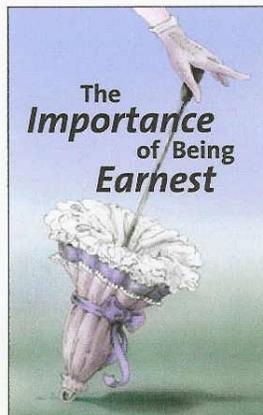


FRIDAY SEPTEMBER 22, 8:00 P.M.
The Two Gentlemen of Verona
Interpreted by:
Karee Wardrop and
Gretchen Savage

SIGN INTERPRETED EVENTS INCLUDE PROLOGUES (PLEASE SCHEDULE WITH ACCESS COORDINATOR) AND POST SHOW DISCUSSIONS (FOLLOWING MATINEE PERFORMANCE). TICKETS SOLD SEPARATELY FOR BACKSTAGE TOURS AND PREFACES.



Friday July 21, 8:30 p.m.
Cyrano de Bergerac
Interpreted by:
Gretchen Savage and
Jeff Wildenstein



Saturday September 23, 1:30 pm
The Importance of Being Earnest
Interpreted by:
Pam Parham and
Anne Del Vecchio



Karen Wardrop and Gretchen Savage

Assistive Listening Devices



Tickets are subject to availability. To reserve tickets or for more information please contact the Oregon Shakespeare Festival via Oregon Telecommunications Relay Service (OTRS)-For OTRS dial 711 (inside Oregon), 1-800-735-2900 (for users of TTY outside of Oregon), or 1-800-735-1235 (for voice outside of Oregon).

OSF Box Office (541) 482-4331
Access Coordinator (541) 482-2111 ext. 425
www.osfashland.org

Thanks – We Can't Do It Without Your Help!

We need your support to continue this newsletter. Please note: This is different and separate from any local chapter fee you may pay.

We thank the following folks who have sent donations since the last issue: Jane Anderson, Vivian Olheiser, Alice Tower, Jo D'Antonio, Camille Atherton, Thomas Morelli, David Viers, Ann Cushman, Alan Ruger, Laura Maeda, John Forkish, Dorothy Holbrook, Robert Edstrom, Tom Hanks, Eve Nickerson, Ma'Carry Cairo, Mary Butler, Carol Studenmund, Doris Clark, Victor Buenzle, Ruth Arndt, and 4 Anonymous Donors.

Mail your tax-deductible gift to SHHHOR PO Box 22501, Eugene, OR 97402 using the form on the back of the newsletter.

PUC Programs for Oregonians with Hearing Loss

(Article written by David Viers from interviews with Ms. Victoria McLean and staff members of the Oregon Public Utility Commission)

In 1987, the Oregon Public Utility Commission (OPUC) was given the task of administering three special assistance programs: TDAP, OTRS and OTAP. All of these programs are based upon the premise that telephone service has moved from the status of a luxury to one of an essential service. These programs are financed by a surcharge on all the phone lines in Oregon. Since this Newsletter is primarily for those with hearing loss, emphasis will be given to this aspect of the programs.

Telecommunication Devices Access Program (TDAP) purchases and loans (at no cost to eligible recipients) special telecommunication devices to Oregonians who are hearing, vision and/or speech impaired, or who have other physical disabilities that would prevent (or hinder) their use of a telephone. Examples of these devices would be: TTY (text telephone), visual signal, captioned telephone (CapTel), loud ringers and amplified phones. These devices (and others) allow Oregonians to communicate more fully with family and friends,

as well as and to play a role in Neckloops silhouettes hearing aids switches, as cords for implant users provided. (See related article.)



businesses, more active society. and for users of with T-well as patch cochlear are also (See related

Oregon Telecommunications Relay Service (OTRS) was implemented to allow users of special telecommunication devices to communicate with the hearing public and vice versa. An example of the way this works is a person (hearing and/or speech impaired) using a TTY, calls an operator (who also has a TTY) to connect with a person who does not have a TTY. Then the operator voices what the TTY user types and types what the person on the other end of the line says. This process may be reversed so that someone without a TTY may call through the Relay to someone using one. Under the Americans with Disabilities Act (ADA) passed in 1990, all states must provide this service; Oregon, however, was a pioneer and had already put a system in place 3 years ahead of the ADA.

Oregon Telephone Assistance Program (OTAP) and Link-up America help to reduce the phone bill for qualified applicants. While this program is not specifically targeted at

people with disabilities, many people with disabilities are unemployed or underemployed which obviously may have an effect upon their income level. This program is directed at Oregonians whose income is at or below the current federal poverty level and are also on a state public assistance program. Qualified Oregonians can receive a reduction in their monthly phone bills for as long as they qualify.



There are two additional programs that the PUC administers that may be of interest:

- EMC (Emergency Medical Certificates). This requires telephone companies to work out a payment plan for those families where a member has a serious medical condition. This does not, however, mean that a family is prevented from losing phone service.

- DVC (Domestic Violence Certificates). This is modeled after the EMC and does essentially the same for those who can provide a copy of a restraining order issued by the court system that shows they may be at risk of violence.

For more information on these programs and how to apply, please contact PUC staff at 1-800-848-4442 or 503-373-7171 (in Salem); TTY users can call 1-800-648-3458 or 503-378-6962 (in Salem). Consumers may also apply online at www.rspf.com; correspondence may be sent to:

Oregon Public Utility Commission
P.O. Box 2148
Salem, OR 97308-2148

Assistive Device Accessories from TDAP

Did you know you can get some accessories from the Telecommunications Devices Access Program (TDAP), in addition to amplified phones, CapTel phones and TTY's?

Also available upon request are:

- Neckloops or silhouettes (which may give you stronger sound if you have telecoils in your hearing aid(s) and/or cochlear implant. They also allow you to listen with both ears if both have telecoil capabilities)
- Both the neckloop and silhouettes are also compatible with most all Assistive Listening Devices (e.g. PockeTalkers, FM, Infrared)
- Flashing light signaler - a visible light - which helps you know when the phone is ringing
- A loud ringer

In order to qualify for this adaptive equipment, you need to send a completed application to the TDAP office. You also need to have your Primary Care Doctor, Vocational Rehabilitation Counselor, or Audiologist certify your hearing loss to be severe or profound on that form. If you already have phone equipment from TDAP, but want to get an accessory, contact the TDAP office and make your request.

TDAP

PO Box 2148,

Salem, OR 97308

Phone: 1-800-848-4442 voice

or 1-800-648-3458 TTY

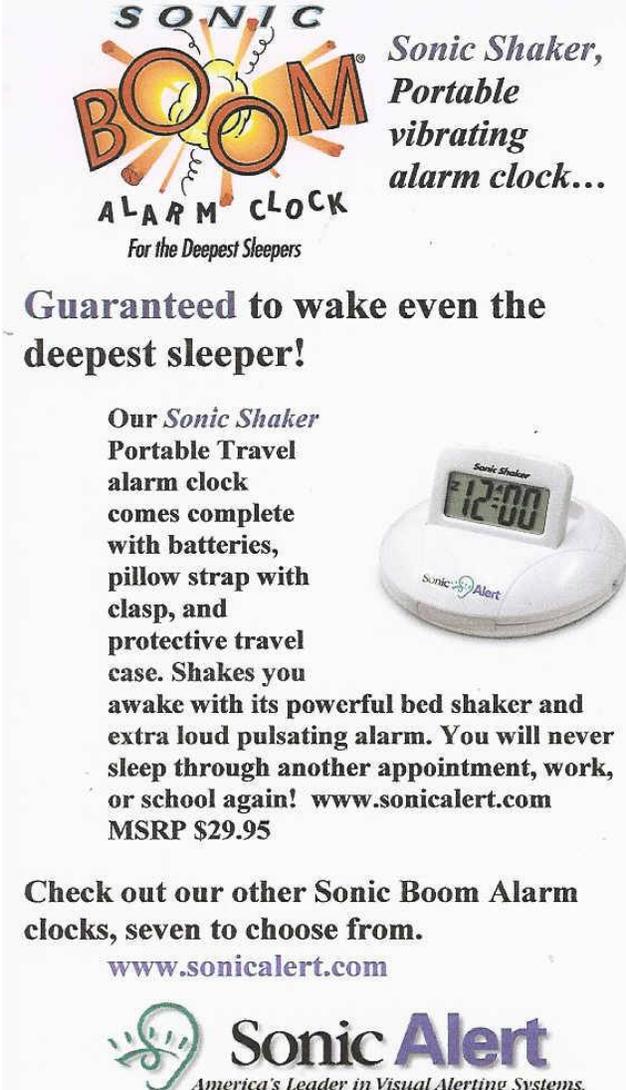
Website: www.puc.tdap@state.or.us

Changing Standards for Cochlear Implants

Editor's note: the following was written by noted Audiologist Ron Leavitt in response to an essay test question taken during his doctorate program regarding the changes in the FDA (Food and Drug Administration) criteria for cochlear implant users. It has been edited to fit the needs of this publication:

Having grown up as a child of a severely hard-of-hearing parent with 17 subsequent years of university sign-language teaching experience; and then having worked as a professor in the Regional Resource Center on Deafness at Western Oregon University as well as an audiologist in several medical, public-school, university and private-practice facilities; my professional and personal experience with these diverse groups has uniquely colored my opinions. As such, the discussion of CI candidacy (particularly as it relates to degree of

"Changing Standards" continued on page 7



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Signing 1 - Signing Used as Educational Tool

(Source: The Columbian Newspaper, January 8, 2006, by D.C. Jesse Burkhardt)

It started out as a topic for a college thesis: documenting the innovative use of American Sign Language, or ASL – the primary form of communication for people who are deaf in the United States – for young hearing students.

Kirsten Dennis, now a first-grade classroom teacher at Whiston Elementary School in White Salmon, produced the thesis while attending Pacific Oaks College in Seattle. The focus of her thesis was to describe how ASL could be used in classrooms with students who can hear and for children with special needs.

Dennis' thesis has now been turned into a book, "Sign To Learn", which was published last October.

"After finishing my thesis, I said 'OK, I'm done,' Dennis recalled. "But the professor said I should pursue publishing it. So there was another round of lots of work."

The book is essentially the thesis she wrote to obtain her master's degree in 2003.

"It's the thesis rewritten," she said, understating the amount of work required to turn the thesis into a book.

Dennis said the process of transforming her thesis into "Sign To Learn" took about 18 months.

But she stressed that it was worth all the time and effort to get the information publicized.

"It's exciting. I'm just happy it's out there and available to teachers," she said. It was written for educators, but it can certainly be used by parents interested in ASL."

According to the publisher, "Sign To Learn" is "the first complete introduction to appropriate sign language curriculum for hearing pre-schoolers ... it gives you the tools to learn how to integrate ASL into your classroom in order to enhance the academic, social, and emotional development of children, and to respectfully introduce children to deaf culture."

In one chapter of the book, for example, Dennis explained how the use of sign language helps in early childhood literacy programs. Among the benefits: Signing allows children to use multiple senses to learn new information; the signs "look" like the letters and words being taught; creating signs helps children connect concrete objects to abstract concepts; and signing increases children's confidence to learn new signs.

Perhaps the most intriguing aspect of ASL is its apparent impact on learning, and Dennis said the results are significant. "Kids who learn ASL score higher on IQ tests," Dennis said. "Studies show it helps with academic skills.

It's really interesting to them, and they want to learn it, too. It helps them academically, so I integrate it throughout the day."

Dennis said she first became interested in sign language while she was a kindergarten teacher on Vashon Island. The book's co-author, Tressa Azpiri, introduced ASL to the kindergarten students at the school there, and the kids appeared to be very curious about it.

"It struck me, because I had a difficult class that year. But during the ASL activity, they were quiet, focused, and interested," Dennis said. "I thought, 'Wow, this can be a really good learning tool.' Kids watch interpreters because they are pretty captivating. The kids picked up the signs quickly and really used them."

Although Dennis has no deaf children in her first grade class at Whitson, she finds ways to employ sign language as a path to benefit all of her students.

"I use it now as a classroom management tool, to sign directions to kids: Line up, sit down, come over here," she said. "The young children are really engaged. It holds their attention and gets them focused on you. You don't have to raise your voice to get them to 'hear' what you're saying."

Dennis pointed out that ASL is especially effective to kids learning English as a second language. "Most signs look like what you're talking about, so for kids learning English, it's a bridge between languages," she said.



"Sign To Learn" is published by Redleaf Press of St. Paul, Minn.



Oregon Telecommunications Relay Service (OTRS) provides a vital link between hearing people and those who are deaf, hard of hearing or speech disabled.

- Totally confidential
- Toll-free access, 24 hours a day, 365 days per year
- Voice Carry Over (VCO) allows the deaf or hard of hearing to use their own voice
- Hearing Carry Over (HCO) allows the speech disabled to use their own hearing

All you have to do is dial 711 or:

<i>(TTY)</i>	<i>1-800-735-2900</i>	<i>(Spanish)</i>	<i>1-800-735-3896</i>
<i>(VCO)</i>	<i>1-800-735-3260</i>	<i>(900 Services)</i>	<i>1-900-568-3323</i>
<i>(Voice)</i>	<i>1-800-735-1232</i>	<i>(Customer Service)</i>	<i>1-800-676-3777</i>
<i>(ASCII)</i>	<i>1-800-735-0644</i>		

To connect with Captioned Telephone (CapTel) users, dial 1-877-243-2843

For CapTel Customer Service dial 1-888-269-7477

Oregonians with a hearing, speech or mobility disability who are not able to use standard phones may qualify for a phone that meet their needs. Call Telecommunications Devices Access Program (TDAP) at 1-800-848-4442 Voice or 1-800-648-3458 TTY.

“Changing Standards” continued from page 4

hearing loss and benefit from amplification) interests me.

The first House clinic single-channel implant could only provide gross awareness of environmental sounds and function as an aid to speechreading. For these reasons, the initial FDA criteria whereby the patient had to have bilateral PTAs (Pure Tone Averages) equal to or greater than 110 dB hearing loss and receive insufficient information from a hearing aid to even identify one word on a monosyllabic word test or to identify modulated noise vs voicing or to get any aided speech audibility made sense. However, such is not the case with today’s cochlear implants.

Today’s cochlear implants allow many people (who I see on an ongoing personal basis) to talk on the phone, answer questions from the back of my classroom and communicate in ways they never could with 30+ years of hearing aid use. As such, the evolution of FDA criteria seems appropriate. Specifically, in the single channel CI days only the most deaf were viewed as CI candidates. With improved multi-channel CIs, individuals with as much as 30% open word recognition in sentence materials were considered for candidacy. Then finally with today’s CI technological possibilities, patients who score up to 50% on the HINT sentence test in the quiet condition in the ear to be implanted and up to 60% in the non-implanted better ear can be considered a potential CI candidate.

Without these CI options, there would be a whole lot of late deafened adults (some of whom you might meet at A.G. Bell conference) who primarily rely on pencil and paper for communication. The belief of the signing Deaf community that these people should just learn ASL (American Sign Language) or even SEE (Signing Exact English) is not realistic.

I have seen numerous adults over 30 years of age take 21 credits worth of ASL at Western Oregon University over a two year period with complete immersion in the language who develop no more than perfunctory skills. I have seen intelligent severely hard-of-hearing twenty and thirty year olds spend a year in my sign language classes and come away with almost no sign language ability. Finally, even if these late deafened and hard of hearing adults could/would learn ASL, they are (for the most part) interested in continuing to communicate with their normal-hearing, non-signing families, spouses, friends and employers. In short, cochlear implants offer hope for clinging to the hearing world.

Signing 2

(Source: USA Weekend, January 6-8, 2006 “15 Things You Must Do for your Baby” by Kelly DiNardo)

Tip: **Try Signing with Baby.** Even if your baby has perfect hearing, teaching him simple sign language has benefits. It can strengthen the parent-infant bond, increase the child’s interest in books, reduce his frustration with being unable to communicate and may help him begin talking earlier, say researchers Linda Acredolo and Susan Goodwyn. Signing’s benefits continue later in life: One study found children who signed as babies had, at age 8, average IQ scores that were 12 points higher than children who didn’t sign. Experts recommend using sign language with infants as young as 6 months, but don’t get frustrated if Baby doesn’t sign back until 16 months. “Individual differences are tremendous,” Acredolo says.

Tips for Signing with your Infant

- Always use the sign and the word together. The goal is for your child to learn to say the words. Make sure he hears the word that goes with the sign.
- Repetition, repetition, repetition. The more often Baby sees a sign, the more likely he will be to learn it.
- Relax. Avoid structured lessons, and make signing part of your daily interactions – or make it a game.

Thank You Sponsors!

We are so glad for the sponsors who support the work we do by not only telling their clients about SHHH, they also support us by purchasing ads in this newsletter.

Many THANKS to our sponsors!

Hair Cell Regeneration — Looking Beyond the Hype

(November 2004 by Neil Bauman, Ph.D.
Source: Edited Article from
www.hearinglosshelp.com/HairCellHype.htm
Footnote sources have been dropped to save space.

Question: Hair cell regeneration has been in the news for some time now. Will it soon restore hearing for the millions of hard of hearing people?

Answer: Investigation into hair cell regeneration has come a long ways from the late 1970s when researchers first discovered that sharks could produce hair cells throughout their lives.¹ However, it was not until 1986-87, when researchers discovered that birds could naturally regenerate hair cells to restore damaged hearing,² that scientists got excited and began to think, "If it works in birds, maybe we can make it work in humans too!"

Since then, research on hair cell regeneration has accelerated. In the past 3 or 4 years, researchers have made remarkable strides towards one day being able to regenerate hair cells in people with hearing loss.

Unfortunately, every time there is another discovery or breakthrough in this research, the media hype seems to indicate that hair cell regeneration is just around the corner—that in just a few years hearing loss is going to be a thing of the past. Hard of hearing people are getting their hopes up—thinking that in a few years, they will get their hearing back. Is this really going to happen, or are their hopes going to be dashed once again? Let's look at the facts.

First, hair cell regeneration will not help all people with hearing loss. For example, hair cell regeneration won't help deaf people who lost their hearing before they acquired speech. This is because brains wire for sound during the first 6 years of life. If a person doesn't hear any sounds during this time, their brains never develop the necessary

auditory capability to understand speech. Thus, even if their ears could grow new hair cells, these hair cells would be useless to them because their brains wouldn't know how to process these new sound signals. (However, if hair cells were regenerated in deaf children in the very first few years of their lives, the results could be fantastic.)

Furthermore, hair cell regeneration won't help people with conductive losses such as are caused by middle ear infections or otosclerosis, nor will it help people with auditory nerve conditions such as acoustic neuromas. Also, hair cell regeneration will not help people with hearing loss if their hearing loss is caused by the absence of certain genes that result in hearing loss even though adequate numbers of hair cells are present. That's the bad news.

The good news is that the majority of people with hearing loss have a sensorineural type of hearing loss that **may** benefit from hair cell regeneration.

Second, hair cell regeneration is still a long ways off—several decades at least. It is **not** just around the corner. As of 2004, the most **realistic** time frame is still 20 or more years in the future. Dr. Rubel, perhaps the leading researcher in the world today on hair cell regeneration, says, "My most hopeful prediction is 20 years, and that's being **very** optimistic."³ He further states, "Over 15 years of studies on hair cell regeneration in the inner ears of birds has taught us that a quick

Oregon Health & Science University Department of Otolaryngology/Head and Neck Surgery



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and easy cure for sensorineural hearing loss is **unrealistic**." He adds, "It will be a **long time** until we have anything **near a perfect cure** for hearing loss."⁵

Third, once hair cell regeneration is possible, the public has been lead to believe that treating hard of hearing people will result in them having normal hearing once more. However, if you carefully read the reports as they come out, you begin to realize that researchers are not talking about hard of hearing people receiving normal hearing through hair cell regeneration. They are talking about "growing enough hair cells where hearing aids could be used more effectively and provide much more acoustic information"⁶ than would otherwise be possible.

In fact, Dr. Rubel expects that hair cell regeneration, far from leading to the demise of hearing aids, will actually make them even more common and useful. He explains, "Hair cell regeneration will, if anything, **increase** the population of people who could **benefit from hearing aids**."⁷

This is because a normal human ear has between 16,000 and 30,000 hair cells, yet hair cell regeneration researchers are talking about only being able to grow a **few hundred** hair cells⁸—not the thousands upon thousands needed for normal hearing. Obviously, regenerating a few hundred hair cells is a drop in the bucket and will in no way restore hearing to normal—better hearing, yes, but not normal hearing.

Did you know that even in the animals that God designed to naturally regenerate hair cells, hearing does not return to normal? For example, researchers used loud noise and antibiotics to produce a 70 dB loss in chickens. When these chickens regenerated hair cells to replace the damaged ones, their hearing returned, but **not** to normal. They had a **permanent 23 dB hearing loss**.⁹ Most studies on birds have reported **mild permanent hearing losses** and **mild to moderate tuning (discrimination) impairments**.¹⁰

Thus, even though much hearing returns, the regenerated hair cells are not as "good" as the originals. Before and after photomicrographs of hair cells are revealing. Before noise damage, the hair cells are symmetrical and beautifully ordered. Later, pictures taken of regenerated hair cells show them as irregularly shaped and the stereocilia (the "hairs" of the hair cells) look like they were all hashed together—not beautifully arranged like before.¹¹

These are some of the facts. Therefore, at the present time (2004), hair cell regeneration is nowhere near ready to be applied to humans. However, if research into hair cell regeneration continues at the present pace, hair cell regeneration in humans will

very likely become a reality sometime in the next few decades. Even so, it won't be a cure for hearing loss. Rather, it will be another aid to better hearing, just like hearing aids are today.

New ODHHS Newsletter

The Oregon Deaf and Hard of Hearing Services (ODHHS) Program has come out with their first Newsletter. This Newsletter is, at this time, primarily an email Newsletter which will be published roughly every quarter. To get on the mailing list, please contact:

Oregon Deaf & Hard of Hearing Services Program

30 N. Webster, Suite A
Portland, Oregon 97217
(800) 358-3117 v/tty
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Who We Are

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SHHH of Oregon
PO Box 22501
Eugene, OR 97402
Phone 541-388-8103 (M-F, 8-5)
e-mail: cathys@coril.org

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Self-Help 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 SHHH 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 SHHH meets on the 2nd Wednesday of the month - 6 PM at the St. Charles Medical Center - Rehabilitation Conference Room.

Contact Cathy Sanders
e-mail: cathys@coril.org
(541)388-8103
CORIL
PO Box 9425, Bend, OR 97708

SHHH - Central Oregon Coast meets the 4th Tuesday each month - 1:30 PM at the Newport Chamber of Commerce, 555 SW Coast Highway, Newport.

Contact Cindy Campbell	Bob Hall
e-mail: hqnw@charter.net	
503-922-1961 1-877-271-7620 toll free	(541)765-3342
4202 NE 43rd, Neotsu, OR 97364	1145 SW Walking Wood, Depoe Bay, OR 97341

Clackamas SHHH meets 2nd Tuesday each month - 2PM at the Adult Community Center, 505 G St. - Lake Oswego.

Contact: Michael Eury
e-mail: euryman@msn.com (preferred contact)
(503)534-2860 (6-9pm)
5060A Foothill Drive
Lake Oswego, OR 97034

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

Contact Leone Miller,	Andrea Cabral
e-mail: yngleone@msn.com	e-mail: angora@comcast.net
(541)744-2994	(541) 345-9432 voice/TTY
PO Box 22501, Eugene, OR 97402	

Portland SHHH meets the 3rd Tuesday each month - 7 PM at the Good Samaritan Hospital, Wistar-Morris Conference Room - NW 22nd and Marslall, Portland

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

Roseburg SHHH meets the 2nd Monday each month - 7 PM at the Mercy Hospital Community Education Room - 2459 Stewart Parkway, Roseburg. (Between Parkway Pharmacy & Office Max).

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

Salem SHHH meets the 2nd Wednesday each month - 6:30 PM at the Salem Hospital Auditorium (in the basement) - 665 Winter Street SE, Salem.

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

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
SHHH National Office
e-mail: national@SHHH.org
(301)657-2248 - voice
(301)657-2249 - TTY
(301)913-9413 - FAX
7910 Woodmont Avenue Suite 1200
Bethesda, MD 20814



Self Help for Hard of Hearing People of Oregon

People helping people have a better life through support and education.

<http://www.shhhor.org>

ANNOUNCEMENT: Amendments to the State Association Bylaws

At the May 6, 2006 Board meeting, 2 Amendments to the SHHH-Oregon State Association Bylaws were proposed. According to these same Bylaws, notification of the proposed Bylaws must be made public to allow for input from the general membership before the actual vote is taken at the next Board meeting (scheduled for July 8th). Please submit your comments to Board member David Viers at 17109 NE 7th Street, Vancouver, WA 98684 or Viers2001@juno.com by July 1st. Here are the 2 Amendments:

- The name of the organization shall be changed to Hearing Loss Association of Oregon.

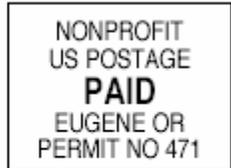
NOTE: This change is generated by the recent name change by the National SHHH to Hearing Loss Association of America. Throughout the U.S.A., all of the chapters and state associations affiliated with SHHH are changing their names as well.

- Article 6 b shall be changed to read: "No officer shall serve more than two (2) consecutive full terms in the same capacity without Board approval. Directors may be elected without limit."

NOTE: This was done because there may be particular individuals on the Board whose expertise should not be lost.



Self Help for Hard of Hearing People of Oregon
 PO Box 22501
 Eugene, OR 97402



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I wish to remain anonymous.

I cannot contribute but would like to receive the newsletter.

I want to join **SHHH** National. Please enroll me as a member. I'm including my \$25 membership fee. Or you can sign up online at www.shhhor.org (Click membership, click application).

Donations to support **SHHH** outreach efforts in Oregon should be made payable to **SHHH** Oregon and mailed to P.O. Box 22501, Eugene, OR 97402.