



Summer 2009

Issue 38

Your Feelings Can Fool You

By Marc F. Zola, LPC MFT

Many of us have been taught from a young age that our feelings are normal or that it's okay to express what you feel. While as a therapist I agree that is undeniably true, I also know that sometimes we can all go too far with feeling our feelings. I know people might disagree with me on this point, but sometimes, our feelings deceive us. When we don't feel like going out or we feel afraid of what might happen if put in a stressful situation we often end up talking ourselves out of involvement and into avoidance.

In the past I've written about the value of avoiding avoidance. When it comes to hearing loss though, it bears repeating. People with hearing loss are at risk for increased avoidance and isolation, which in turn leads to more frustration and grief over the loss, thus contributing to more isolative choices. There is nothing wrong with feeling sad, lonely or feeling like staying at home. But feeling that way doesn't mean you have to follow through with it. In other words, just because you feel afraid doesn't mean you have to choose to act in a fearful manner.

I don't mean to sound Pollyannaish. Sometimes it's really hard to 'Feel the Fear and Do it Anyway' (a great book about overcoming fear by Susan Jeffers). But I imagine many people 'overreact' to fear and negative feelings as though they are destined to do so. When we look to our feelings to determine how to act (or not act) we limit our possibilities. You've heard the story about how Thomas Edison tried 2000 different materials until he found the perfect way to make a light bulb. This exemplifies the model of, 'Have doubt, but give it a try anyway'. It's unlikely you'll have to try 2000 different ways of going to restaurants or social events or talking to your grandkids about how to best communicate with you. But you <u>will</u> have to try.

The bottom line is that when it comes to hearing loss, sometimes your feelings give you good information, but sometimes they don't. Feelings of loneliness, anger and shame are perfectly normal but they do not determine your next step, only you do. Change happens in small steps, incrementally. Change happens by noticing your fear of going out with friends -- fearful that you won't hear them as well as you would like -- and going anyway. It also happens by noticing your anger and resentment at family members -- who turn away while talking -- and still deciding to gently remind them of how helpful it is when they turn towards you and speak clearly. Change happens. Sometimes it happens by resisting the advice of your feelings.

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

It is now high summer, and that brings with it a whole set of outdoor sounds: kids splashing in a pool, steaks sizzling on a grill, lawnmowers cutting grass and, in quieter moments, birds chirping. Having a hearing impairment alters the aural experience of summer. You miss the chirpy birds but you don't miss the sounds of lawnmowers and motorcycles (or perhaps you *can't* miss them!). With a properly fitted hearing aid or implant processor you should be able to hear most of the sounds that you need or want to hear. Perhaps the ultimate test of a perfect fit is being able to hear a mosquito before it bites you. For tips on selecting and using hearing aids, check out the articles on pages 8 and 10.

Members of the HLA-Oregon board of directors have not been idle. Significant board actions can be found on page 4, with special attention being given to the planned Walk4Hearing on page 6. We need all the help we can get, and this is your chance to volunteer if you have not totally succumbed to the hazy days of summer.

A new column is being started opposite CI Corner which will cover individual chapter activities. This will give readers an opportunity to see what other chapters and their members are doing without subscribing to every chapter newsletter. But the column is only as good as the inuput it gets, so readers and chapter leaders are strongly encouraged to send their stories to the editor. Perhaps such a story has already been written in the chapter newsletter. Which of these stories do chapter members feel is most worthy of inclusion in this newsletter? What do you want the whole state to know?

Finally, CI Corner salutes the first generation to grow up with a cochlear implant. They have unique opportunities and challenges, and it will be interesting to track them over the next few years. But cochlear implants work for old folks too, and board member Bob Williams will be getting his second implant on August 28. Watch this column for his experience in going bilateral in the fall issue of this newsletter.

Hearing Loss Association of Oregon

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President Bob Russell Vice President Cheryl Davis Recording Secretary Chuck Vlcek Treasurer Wayne Seely

Board members: Mark Foster, Karin Smith, Cindy Campbell, Stephen Sanders, Cathy Sanders, Bob Williams, Todd Landsberg, Kathryn Eckhart, Anthony Montoya, and Andy Evans

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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 <u>elist@hearinglossOR.org</u>.

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

Deadline for Autumn 2009 edition: September 15, 2009.

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HLA-OR Board News: Goals and Activities

The Hearing Loss Association of Oregon board of directors has been reorganizing ever since they attended a leadership training session at Newport in April 2008. Part of the process was the determination of a set of goals and a list of activities that would meet those goals. Vice President Cheryl Davis chaired the Goals Committee which provided six major goals. These goals are: 1) Maintain a viable state organization. 2) Seek to increase membership at the chapter, state, and national level by 10% in 2009 and another 10% in 2010. (National Members in Oregon 194 on 1/09). 3) Conduct activities to raise money to support chapter and state functions. 4) Increase awareness of hearing loss issues and improve advocacy efforts throughout the state. 5) Support initiatives of the Hearing Loss Association of America. 6) Collaborate with statewide agencies and organizations on issues related to hearing loss.

At the April 2009 board meeting a prioritization vote was taken on activities (either existing or proposed) that would meet these goals. These activities are too numerous to list here but such a list can be provided on request. Suffice it to say that while some activities are well staffed, others do not yet have volunteers assigned for the task, even though they are deemed to be worthwhile. One simple reason is that there are more activities (and committees) than there are board members.

The board would like to remind readers that it is not necessary to be a board member to be on a committee or even to chair a committee. Much work can be accomplished in the comfort of home, especially if a computer is used with a connection to the internet. Contacts with other committee members can be done by e-mail, although a physical meeting may be necessary at times. Reports can also be sent by e-mail but attendance at a board meeting would be helpful, especially if some kind of board action is needed.

An ad-hoc committee has developed guidelines for e-mail communications. While primarily designed for board members and committee members, it is a useful document for anyone who wishes to communicate with the board or chapters by e-mail. It is available on request. *Documents can be requested by e-mailing HLA-OR* at elist@hearinglossOR.org or writing to HLA-OR, P.O. Box 22501, Eugene, OR 97402.

HLA-OR Board Meeting Dates

October 17, 2009 January 16, 2010 April 17, 2010 July 17, 2010

To confirm, contact President Bob Russell at <u>bhrussell@verizon.net</u> or call him at (503) 614-9730. Meetings will be held at Albany General Hospital.

HLA-OR board personnel changes

Board member Peter Johnson has resigned from the board. He will be missed. President Bob Russell appointed Cindy Campbell to replace him, and the appointment was approved by the board at the July 18 meeting. Cindy is a former board member whose term had just expired, and also was the Chapter Coordinator. We welcome her back into the fold.

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WALK4HEARING? BETTER GET IN SHAPE!

At the July 18 meeting the HLA-OR board of directors agreed to move forward with plans for a Walk4Hearing in Oregon. While more details have to be worked out, it was decided that the walk would be held in Portland sometime in September 2010.

Past president Cathy Sanders, who is also the current Chapter Coordinator, now chairs the Walk4Hearing committee. The committee also met on July 18 and worked out the preliminary details which were later approved by the board. Former chairman Mark Foster had already selected a possible site, the World Trade Center conference center, and that site was approved. It will provide a 3 mile walk from the Salmon Springs fountain with views of the Willamette River and Portland. There are restroom facilities, and portapotties may be added if needed. Refreshments should be available, possibly via catering.

Mark Foster will be the facilties liaison and Wayne Seely will be treasurer for this event.

Much work remains to be done, and readers are encouraged to join the planning committee or volunteer to serve in some capacity. The following is a list of personnel and things that need to be done. Although some items already have volunteers, it would still be good to have backup.

We need persons to serve on a steering committee which so far consists of Chuck Vlcek, Karen Swezey, Cathy Sanders, and Wayne Seely. We also need a team captain (recruiter/cheerleader), a chair of sponsorships, someone to handle publicity, and a Walkathon team nurse/doctor.

We need people to take care of signs, including kilometer markers, a refreshment chairperson, greeters, registration sign-in, walkathon setup, and clean-up crew. We especially need celebrity walkers.

We have three photographers: Chuck Vlcek, Karin Smith, and Bonne Bandolas, but anyone with a decent camera and a good eye can contribute.

To volunteer to help with Walk4Hearing, you can contact Cathy Sanders at catsindallas@q.com or contact HLA-OR at elist@hearinglossOR.org.

Important Notice about our Website and Electronic Newsletter

Management of our website is still in transition. In the meantime those who have opted to read the electronic version rather than have a printed copy mailed to them will have the newsletter e-mailed to them as an attachment. When the website can be updated again they will get a notification by e-mail along with a link to the webpage the current issue is on. Those who have not yet made the change are still encouraged to do so by e-mailing your request to elist@hearinglossOR.org







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Within Earshot: News You Need to Know

Hearing Aid Advice for Consumers

The July 2009 issue of Consumer Reports has an excellent six page report on hearing aids, including insets on the types of hearing aids, features common to most hearing aids, and the need to avoid excessive noise. It includes comments by Brenda Battat, executive director of HLAA, and provides the web address of HLAA and other hearing support groups. Below are some highlights of that article:

There are five types of hearing aids: 1) behind the ear, open-fit, 2) behind the ear with earmold, 3) completely in the canal, 4) in the canal, and 5) in the ear. The pros and cons of each type are listed, along with the price range.

There are five basic steps to choosing a hearing aid: 1) select a good provider, 2) understand the product, 3) get a thorough evaluation, 4) be a smart buyer, and 5) practice and follow up (also see page 10). Details of these steps are provided in the A hearing aid dispenser may article. provide the evaulation, but the quality varies and it is better to have a trained audiologist do the evaluation. An interesting statistic is that 2/3 of the hearing aids are not fit properly, and even trained audiologists can make mistakes, so be prepared to take it back for a refit.

The article is available online. The full web address is very long, but try starting with <u>http://www.consumerreports.org/health</u> and navigate from there. Go to healthy-living, then home-medical-supplies, hearing-aids.

HLAA Convention is history, but...

If you missed the HLAA convention in Nashville be sure to go to <u>http://www.hearingloss.org/</u> and find the following:

- The daily <u>Convention Blog</u> written by HLAA New Jersey member, Abbie Cranmer, and sponsored by Gallaudet University.
- <u>Convention Exhibit & Program Guide</u> is a publication covering workshops, events, sponsors, and exhibitors. Find information on the exhibitors so you can contact them if there is something that interests you.
- HLAA took a and new green the Convention approach to Workbook. This year you will find speakers' presentations (including Symposium slides) at Research http://hlaa.omnibooksonline.com/. View them and print them if you'd like.
- The 2010 convention will be held June 17-20 in Milwaukee.



Chapter Capers

<u>Lane County chapter:</u> Editor Bette Sue Bischoff wrote an interview of member Bonnie Ledford. A slightly abridged version appears below.

Bonnie was born and raised in the state of Missouri. After coming to Oregon, she started work in 1977 for the Lane County Public Health Department as a nurse. Bonnie is married and has one son and one daughter. After retiring 20 years ago, she started volunteering in the library. That is when Bonnie first started noticing her hearing loss.

When asked about the hardest thing she ever had to do, she replied 'Descending Mt. Hood.' She had climbed it at age 50 on Mother's Day. After the climb she was so exhausted she made her descent by sliding downhill on her posterior.

Bonnie does various things for fun: plays piano, gardens, knits, and walks (not all at the same time). She and her husband's favorite vacation spot is in Northern Idaho near Bonner's Ferry.

<u>Douglas County Chapter</u>. The program for the July meeting was given by member Tasha Havens, who gave a powerpoint presentation describing her botox treatments for cerebral palsy in her lower legs. She had been born prematurely, weighing only two pounds. A brain hemorrhage had caused the palsy and also significant hearing loss.

Spasticity in her lower leg muscles is caused by an overproduction of acetocholine. The small amount of botox treats the symptoms by relaxing the muscles and blocking pain signals. She has four injections in one leg and three in the other. The relief lasts for three months, then the injections have to be repeated (for the rest of her life). The presentation included photos of her receiving the injections. Her legs are slowly straightening out and hopefully she will be able to walk without support.

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

CI Corner

At its June meeting the Douglas County chapter listened to Andrea Gingry, a young college student who received her cochlear implant when she was a small child. She had spoken at a chapter meeting several years ago when she was still in high school, and it was interesting to hear her update. She can hear well enough with her single implant while remaining deaf in her other ear, but has someone to take notes for her in class.

She represents a coming of age for the first generation of implantees to grow up with a cochlear implant and, in a sense, of the cochlear implant itself. This fact was brought home earlier this year at Cochlear Celebration, a convention planned by Cochlear Corp. for its customers and family members. There, five implanted students were awarded scholarships. They all had resumes that would be considered impressive for students without any hearing loss. Their acceptance speeches were full of confidence and hope for the future.

The hope that this generation brings is significant because of the poor employment prospects for people with major hearing loss, especially those whose loss was prelingual. It will be interesting to follow these people when they graduate and enter the job market, especially with the current economic downturn. The scholarship winners will probably do well, but what about the "average" implanted student? They will surely do better than their unimplanted predecessors who grew up deaf but how far will they remain behind normal hearing persons?

The advent of state-mandated screening of newborns for hearing loss and the reduced stigma of hearing loss has also contributed to the brightening future of those with significant pre-lingual loss. The main obstacle now is cost: cochlear implants are expensive, and not everyone has insurance. At least the insurance companies are now covering most of the cost for those who do have it. Even without insurance implants are cost-effective as the increased liftetime earning potential should easily exceed the cost of the implant.

Implants for seniors: Board member Bob Williams' story appeared in this column in the last issue. His second implant is scheduled for August 28, on an ear that has not been used for 12 years.

Learning to Use Your New Hearing Aids

Adjusting to a new hearing aid takes time, determination and patience. Different people react differently. Your age, the severity of your hearing loss and your acceptance of the need for a hearing aid may strongly influence your reaction to hearing with amplified sound.

There is no magic in adjusting satisfactorily. It requires practice and an application of common sense. Do not expect perfection. People often think they can put on the aids, walk out of the office, and hear perfectly again. The reality is that once you've gotten your aids, your work has just begun. <u>Here are some tips for adjusting (most apply to cochlear implant processors too)</u>:

1. Use the hearing aid first in your own home environment. Your hearing aid amplifies noise as well as it amplifies music or speech. You may be disturbed temporarily by background noise. Concentrate on listening for all the normal household sounds and try to identify each sound you hear. Once you can identify background noises, such as the hum of the refrigerator, the roar of an electric fan, the clinking of the dishes or the slamming of doors, these noises will tend to be less annoying and distracting to you.

2. Get used to manipulating your aids: inserting and removing them, changing the battery, adjusting the controls, etc. in the relaxing environment of your own home.

3. Accustom yourself to the use of the hearing aid by listening to just one or two other persons in a quiet setting. - friend, husband, wife, or neighbor. Talk about familiar topics; use common expressions, names or a series of numbers for practical purposes. Then try watching television and reading aloud to yourself.

4. *Don't strain to catch every word.* The importance of listening carefully and of concentrating on what is being said cannot be overemphasized, but do not worry if you miss an occasional word. Normal hearing people miss individual words or parts of sentences and unconsciously "fill-in" with the thought expressed... Keep your eyes on the face of the speaker. Speech reading can be a great help as a supplement to the hearing aid.

5. *Increase your tolerance for loud sounds.* At first, hearing aid wearers tend to set the volume control at a level too low for efficient listening. While watching TV or talking to one person, try turning up your aid's volume until the sound is very loud. When the loudness is uncomfortable, very slowly turn the volume down to a more comfortable level. After a period of practice, you'll find your comfort level has increased considerably.

6. Gradually increase the number of situations in which you use your hearing aids. After you have adjusted fairly well in your own home to background noise and to conversation with several people at once, you'll be ready to extend the use of your hearing aids to the supermarket, church, office or other public places. Turn the volume low to reduce the impact of unfamiliar background noise. Experiment with adjusting volume and, if your aid is a programmable one, try changing programs in different situations. [continued next page]

7. Use the aid's telecoil (t-switch) with the telephone and see if it helps you hear on the phone. You'll need to experiment with the position of the telephone handset on your ear, since the location of the telecoil varies from model to model. Getting used to the placement of the telephone and getting used to listening in this manner requires practice. Ask a friend of family member to practice with you. Some phones are not telecoil compatible. Ask your hearing aid dispenser to help you try a phone that is telecoil compatible. It can make a huge difference in your ability to perceive speech.

Being able to use the telecoil on the phone and with other Assistive Listening Devices is so important - and helpful. We strongly encourage you to ask your dispenser to spend extra time training you on the best way to use it.

8. *Keep a written record of your experiences* so you can tell the dispenser how you've done when you return for a follow up visit.

9. Sometimes ear molds or hearing aid cases can be irritating. If yours is go back to your hearing aid dispenser and ask to have the ear mold or tube adjusted. If you experience an allergic reaction to the mold or casing, ask for them to be re-made using hypoallergenic material.

10. *Have patience.* Your brain needs time to learn to interpret the new sounds it hears. You need time to become comfortable with the aids. Research shows it takes about 12 weeks of continuous wear to complete this adjustment.

"Commitment isn't something that happens to us. It's something that happens because of us, because of a decision we make. When we commit to a person, a task, and to God, we pledge to show up and do our part, no matter what. How will you demonstrate commitment today?" - Rev. Mary Manin Morrissey

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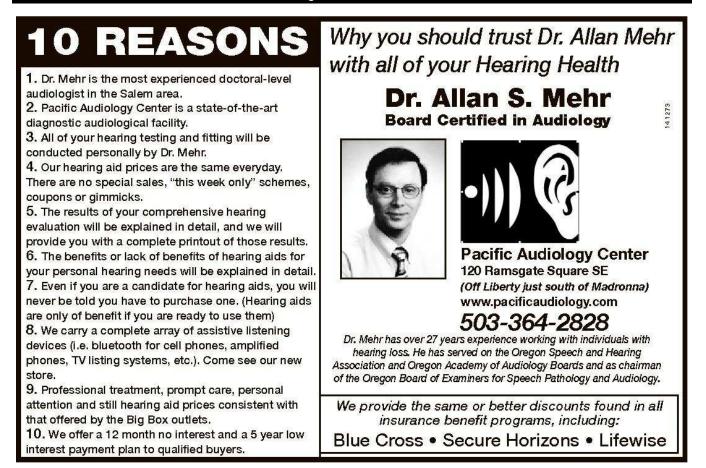
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We thank the following folks who have sent donations since the last issue:

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- Welcoming you to the practice listening activities and exercises in The Listening Room
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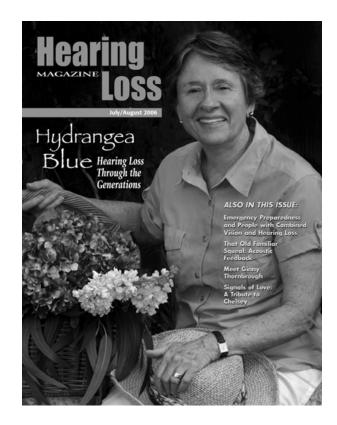
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Chapters in Oregon

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.

Hearing Loss Association of Central Oregon (HLACO meets on the 2^{nd} Wednesday of the month (except August) – 6:00PM at the St. Charles Medical Center, 2500 NE Neff Road, Bend, in Conference Room A (by the front entrance).

Contact: Lois Johnson 64682 Cook Ave. Box 84 Bend, OR 97701 e-mail: <u>HLACO@ykwc.net</u> (541) 388-6869

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

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

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

Here It Is! Oregon Summer 2009 Newsletter

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

Contact: Mark Foster e-mail: <u>hlaportland@gmail.com</u> (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 (except July and August) – 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:

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: tbarrient@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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