

Fall 2010



My First CHHA Convention

Mandy Poon

My name is Mandy Poon and I am a graduate student at McGill in Public Relations. I joined CHIP in September 2009 in search of more working experience in communications and to bring back information to my hard of hearing mother. Today, I help out at CHIP however I can, whether it is contributing at executive meetings, or doing captioning at events. I was absolutely thrilled when CHIP asked me to be a delegate to the Canadian Hard of Hearing Association's conference in June 2010 in Sudbury. Joining me was Lou Brock, a veteran of many CHHA conventions, who introduced me to everyone and made sure I got the most out of my experience.

The theme at this year's CHHA convention was "Good Vibrations"; it focused on the enjoyment of music, even if you are hearing impaired. One of the workshops I attended, presented by Dr. Marshall Chasin, was about how your hearing aid, which works for speech, may not be useful for music. Most hearing aids are adjusted to pick up sound to a maximum of 96 dB (about 10 decibels louder than the loudest speech). However, music can easily reach over 100 dB, so it becomes distorted in your hearing aid. Dr. Chasin gave some very low tech tricks on how to help hearing aid wearers enjoy music more. First, he suggested to lower the volume of your stereo and increase the gain on your hearing aid. This way, sound can get into your hearing aid without distortion. If you're going to a concert, you can put pieces

of tape over the microphone of your hearing aid. The hearing aid will think that what is coming in is less loud than it really is – so what you hear from your hearing aid is a less distorted sound. You could also ask for the range of your hearing aid to be shifted up. For example, instead of having a hearing aid range of 0 to 96 dB, shift it up to 15 to 111 dB. This puts your hearing aid in an ideal range for enjoying music.

If you've ever wondered why modern hearing aids are so expensive, Dr. Andre Marcoux from the University of Ottawa gave a great explanation. There is an enormous process involved to get a hearing aid to you: research, development, training, dispensing, prescriptions, marketing – not to mention the rapid evolution of technology. Dr. Marcoux warned that many clinics are owned by hearing aid manufacturers, and will obviously claim that their products are superior – beware of this! He recommended that everyone ask the clinic they visit if it is owned by a manufacturer to be sure they will be getting the best individual options for hearing solutions.

Kim Scott and Myrtle Barrett gave a very emotional workshop on making the most of your cochlear implant activation. One thing was clear by the end: that everyone has a completely different experience, whether it starts off great or very badly, and that it is never too late to consider an implant.

We had a very inspirational speaker named Johan Hammarstrom from Sweden who managed to become a pilot after many years of being told he would never fly because of his hearing loss. Eventually, he headed a project called World Flight for Hearing, where he flew around the world in a small diesel aircraft, visiting countries along the way in an effort to de-stigmatize hearing loss. Johan inspired everyone in the audience with his uplifting story.

(Continued on page 3)



From the President

Doreen Cons

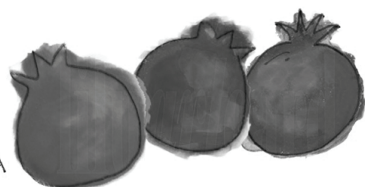
This fall, we will be heading into our 32nd year of providing service to the hearing impaired. Over many years, many things have changed, but the basic intention remains the same, to make life easier for the hearing impaired.

You can learn how to make the most of your hearing in a number of ways. You can attend sessions of the HEAR program. You can take speechreading classes at 3 levels, and I am pleased to point out that because of popular demand, we have increased the number of classes at the Advanced level. You can receive advice and try out a variety of assistive listening devices at our Lily Bernstein Resource and Technical Aids Centre. You can enjoy screenings of captioned films, as indicated in our film brochure. And you can attend special workshops, as indicated in this publication.

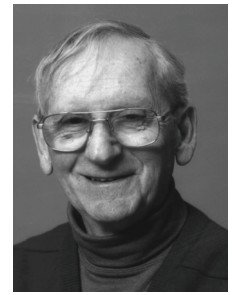
Thank you for returning Member information forms which gives us a better idea of your needs and guides us in creating programs accordingly. And don't forget to let us know of your change of address if you move.

I would like to take this opportunity to thank CHIP for honouring me at the Annual General Meeting in June with a special certificate and plaque and lovely orchid in recognition of my years of service to the organization. I was flattered and moved by this gesture.

I look forward to seeing you in the fall. And to those members who are of the Jewish faith, I wish you Shana Tova, Happy New Year.



SHANA TOVA



Executive Update

**Alvin Goldman
Executive Director**

In June of this year, CHIP held its second annual Open Meeting (Séance Publique), as required by our principal grantor, the Agence de la santé et des services sociaux de Montréal (Health and Social Services). For those of you unfamiliar with the concept, the objective of an open meeting is to encourage democratic participation of members, stimulate innovation, identify possible future leaders, and reach out to the community for input on how to improve services to the hearing-impaired.

Unlike last year's open meeting, which was a stand-alone event, this year's was held in conjunction with CHIP's Annual General Meeting. But once again, this year, invitations to everyone on CHIP's mailing lists included feedback forms so that attendees could put questions and comments into a drop-box at the entrance to the assembly room – anonymously if they so desired – or they could mail their forms to the office if they couldn't attend the meeting and make their voice heard in person.

The response was gratifyingly positive, members citing their appreciation of CHIP's programs and services. Particularly touching, at the meeting, was a spontaneous personal testimonial by Irene Buffonge, a relatively new member who has found a second home and family at CHIP. (cont'd on pg 3)

Inside this issue:

President's Message	2
Executive Update	2
Conference News	4-6
Noisy Corner and Two-Way Street	6
CHIP Programs and Calendar	8-10
Two are Better than One	12
Hear Here	14

Some of the comments and suggestions received via feedback forms are potentially of significant benefit to CHIP and the hearing-impaired community. For example:

A retired professional who worked with the deaf and hearing-impaired and now serves as a volunteer asks, "Is there some way that CHIP, perhaps supported by the Mackay staff, can educate staff and volunteer workers in institutions for care of the elderly as to the proper insertion/removal of hearing aids, battery conservation at night, cleaning of aids, etc.?" She then suggests that we consider producing a small, illustrated flyer to be widely distributed to geriatric institutions, hospitals, nursing homes, etc. – a "How To" publication. (The correspondent's suggestions will be discussed at CHIP's next Executive meeting and at the next meeting of the CHIP-Mackay Liaison Committee.)

Another very interesting feedback form came from CHIP member Yvonne Millington who, in acknowledging CHIP's programs and services, refers to their "contribution to boosting our confidence to function 'normally', un-self-consciously." She points out how unfortunate it is that so many people who need CHIP don't know about us. She suggests distributing CHIP brochures and flyers for special events (such as next year's open meeting?) by setting up tables in shopping malls, medical institution lobbies and other locations. This could attract new members who would benefit accordingly. (To be discussed at CHIP's next executive meeting.)

There were some other significant suggestions; e.g., speechreading classes in the evening for those who need the classes but can't attend during the day. (I find this very interesting because in CHIP's early days, when our membership was generally younger and still in the work-force, most of our activities were held in the evening. But in catering to our aging membership, we have gradually lost sight of the younger hearing-impaired – who also need help – and could ensure the future of CHIP by becoming active in the organization.) To be discussed.

The atmosphere at the meeting was very pleasant; there was a feeling of "family": people with a significant bond getting together to consider ways of strengthening that bond by making our organization more responsive to their needs – and the needs of the hearing-impaired community at large.

The meeting was chaired by me with my customary and inimitable charm, wit, intelligence, sensitivity – and, of course, modesty. Excellent captioning was provided by Mandy Poon; assistive listening devices and technical support by Ken Tatebe and his assistants.

To all who participated in the open meeting this year, in person or by mail, thank you. To those who didn't do so this year, I hope you will next year. Your input is important. Make your voice heard. We're listening.



(Continued from page 1)

For those of you who feel that going to the cinema is difficult because of your hearing loss, Michael Karagosian spoke about the digital cinema revolution happening nowadays that should result in more accessibility for hard of hearing persons. Today, many film projectors are being replaced with digital projectors for the increasing number of 3D films – but they also support advanced closed captioning technologies. For example, captioning that is displayed on a wireless device mounted onto the seat's cup holder. There is also the possibility of captioning being displayed on provided eyewear. Also in development for wide distribution are headsets that are audio focused, so that the listener can focus on what is being said in the film without the interference of background noises.

The conference concluded with a lovely dinner where we had the pleasure of hearing Dr. Richard Pimentel speak. Dr. Pimentel is a disability rights activist who was involved in changing the Americans with Disabilities Act to give people with disabilities the right to employment. His life was actually made into a Hollywood motion-picture called *Music Within*. Dr. Pimentel's talk swung from brash, to silly, to tragic, to hilarious, to inspiring, as he recounted how he lost his hearing in the war, the way he was looked down upon when he came home disabled, and his life-changing friendship with a man with cerebral palsy. The entire audience was moved to tears (often because of laughter), and Dr. Pimentel received a standing ovation. It was an amazing way to end an educational and fun weekend at the CHHA conference.

News from CHHA

Lou Brock



In my many years attending conferences of the Canadian Hard of Hearing Association (CHHA) I have always been impressed with the number of delegates from the Sudbury branch – a vibrant and hard working group of people. This year, they hosted the CHHA Conference and their hard work and dedication really showed. The conference was a complete success – from speakers, to workshops, to great meals and entertainment.

I was accompanied by CHIP's newest executive member, Mandy Poon, who is full of energy, fun to be with, and a very interesting person. Between us, we were able to cover double the number of workshops and presentations so that we could give CHIP members and Communicaiders readers more information. Thanks, Mandy!

The opening ceremonies included welcoming speeches from the Premier of Ontario, the Mayor of Sudbury, the outgoing and incoming Presidents of CHHA, and the President of the Sudbury Branch. The plenary speakers ranged from a hearing impaired fiddle player to a hearing impaired pilot. Here are the highlights from the workshops I attended this year.

Ageing (Speaker: Joanne Ross Quesney) The brain shrinks slowly with age and the blood supply and ear chemistry change. Men are more likely than women to have decreased hearing. In many people, the left ear loses some ability to process auditory information. We can all try to be more understanding when an older person with hearing loss has trouble understanding speech.

Saving a Life Through Sports and Other Activities (Speaker: Ruth Warick) Being involved in any activity is important. Tell people about your hearing impairment so that you can contribute. Do not bluff – let others know your needs. If you are able to find one thing you are good at and do it, it will build up your self esteem.

The Effects of Hearing Loss on the Spouse (Speaker: J. P. Gagné) Hearing loss affects not only the person with the loss, but also the spouse or partner. Spouses need to constantly adapt to their partners, and female spouses are more likely to signal their distress than male spouses. The negative effects of hearing loss on communication between partners include the frustration of having to repeat things, having to make telephone calls, and the inability to whisper 'sweet nothings'. On the other hand, hearing loss can have some positive effects – in making partners more aware of each other and bringing them closer. It is important for hearing spouses to learn strategies (e.g., facing the person, speaking slowly) and to attend HOH meetings to help them understand the disability.

Rising Stars A group of seniors presented five skits that dealt with the everyday life of HOH persons. The skits were comical and very enjoyable for the audience, but the main point was that groups like Rising Stars provide opportunities for hearing impaired seniors to engage in positive and enjoyable activities. (This group reminded me of a captioned film that CHIP screened last spring – Young@Heart, a film about a group of retired seniors who formed a choir and became quite famous.) There are a number of groups like this in Canada, and I have more information if anyone is interested in forming a group such as this. You can get in touch with me through CHIP.

Music and My Hearing Loss (Speaker: Jennifer Roland) Jennifer Roland is a 32 year old musician from Cape Breton who was born with a cleft palate that left her with a severe hearing loss. Her father was a fisherman and an accomplished musician. Jennifer began playing the piano at age 3 and dancing at age 5, which was a big issue because she couldn't always hear the music. She got her first hearing aid at the age of nine and began fiddling around with the fiddle. She became an accomplished fiddle player and eventually formed her own band. Jennifer and her band performed at the Convention – to many standing ovations.

My full report on the CHHA conference is available at the CHIP office. I also hope that you will join us at the workshop on October 19, when CHIP delegates will share what we learned at this year's conventions.

News from the Hearing Loss Association of America (HLAA)



Ken Tatebe, Director of CHIP Resource Centre

In June I attended the HLAA Convention in Milwaukee. As in previous conventions, the workshops were divided into different categories: Advocacy & Access, Hearing Technology, Medical Issues, Relationship & Communications, and Young Adults. As always, I concentrated on Hearing Technology.

Inductive Loop Systems

There seems to be a concerted effort in the United States to introduce loop systems for large and small venues. They are playing catch-up to Europe, UK, and to a certain extent, to Canada. In Europe and the UK, over 95% of hearing aids are equipped with telecoils (T-coil), thus increasing the demand for loop systems. However, in the United States less than 50% of hearing aids are equipped with T-coils, thus lowering the demand for this technology.

Cell Phones

Many cell phones today have the capability to text messages as well as speech. This may be a boon for many hearing impaired since they can communicate with written text rather than verbal communication. However, this method is not for everyone, especially seniors who are not familiar with typing alpha letters on a very small cell phone keypad. Therefore many manufacturers are coming out with full keyboards much like a computer keyboard, albeit of a much smaller size. Studies showed 45% do not text while 63% in 2008 utilized Multimedia Messages (MMS) and Instant Message (IM). There is an increase in social networking such as Facebook, Myspace, and Twitter.

Since 2005, cell phones have less interference with hearing aids and since 2007 more cell phones are compatible with T-coils. The minimum standard for interference is now M3/T3 as opposed to M2/T2 several years ago.

Hearing Aids

This year's Research Symposium was titled "Hearing Aid Research & Development: What it means for the consumer." Representatives from seven hearing aid manufacturers gave short presentations of their newest technology. They varied from frequency compression (moving high frequency sound to lower frequencies), improvement in directional microphones that allow hearing from different sides instead of only from the rear, the elimination of feedback (whistling), automatic adjustment of directional microphones according to where the noise is coming from, microphones that follow the conversation even in crowded noisy places.

One manufacturer joined with an alerting device company to monitor sounds such as doorbells or telephone rings directly into the hearing aid through a small hand-held remote. Another now has wireless technology that uses a special inductive technique without activating the T-coil. Others have produced a hearing aid that emits soft tones for relaxation to help with tinnitus management. There is now the tiniest hearing aid for mild

hearing loss inserted deep into the ear canal and completely invisible called IIC (Invisible-In-The-Canal).

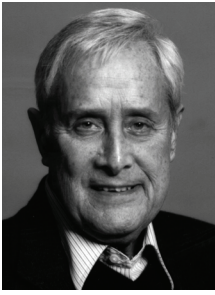
As interesting as these new technologies were, the multitude of questions from the audience were more interesting. Many expressed the view that manufacturers do not listen to user requirements and instead go ahead with research without their input. Others wanted to know why users are not allowed direct contact with manufacturers to input their requirements instead of being directed to audiologists or hearing aid dispensers. Others agreed that this wall is unnecessary and only creates more problems by reducing the focus on the needs of the user.

October 19, 2010

1:15 - 3:15 pm

Join us for a special afternoon of NEWS!

CHIP delegates to 2010 conferences will all be on hand to share what they learned and answer your questions.



More HLAA News

Reg Weiswall, Treasurer

Although I attended many seminars, one of the best was "Help the Healthcare Provider" (in Quebec, the provider is known as an audioprothesist – a professional who fits hearing aids). The provider has to have your cooperation in evaluating your hearing loss and your requirements. First, find a provider, one who is trustworthy, with your interest at heart, not just money. Schedule an appointment and take your latest Audiogram which will be requested by your ENT (ear, nose and throat) doctor and provided by an audiologist. So now you know the sequence...ENT, Audiologist, then the provider.

Based on the audiogram, the provider will make recommendations about hearing aids (and other devices to enable you to answer the telephone, watch television, etc.). He or she will tell you the cost estimate, and if it is paid by RAMQ or insurance, etc. An ear mold will be made, as this is a necessity for either miniature hearing aids or BTH (Behind the Ear) hearing aids. The provider can order the hearing aid on a trial basis so that you can try it out over a period of one month. If you are a new user, this is the only way, before spending sums of money. If you are a current hearing aid user, there may have been a change in your hearing – and the audiogram can tell the provider everything he or she needs to know. You can help yourself by giving the provider as much information as possible, not just saying "I need a hearing aid."

Cochlear Implants

Jack Schiess

At the HLAA convention I attended a seminar on cochlear implants. Many people say no to cochlear implants initially, but as hearing becomes harder and harder, they have second thoughts. In the US, 31 million people have some degree of hearing loss – which represents 10.5 percent of the total population. Of these, 14 percent are baby boomers and 7 percent are Generation X (the 29-40

year bracket). In addition 1 in 500 newborns is congenitally deaf. Hearing loss is amenable to medical and/or surgical therapy, with sensorineural auditory stimulation, or implantation of electrical stimulation by means of a cochlear implant (CI). It is believed that there are 120,000 implants worldwide that result in improved speech recognition and improved quality of life across all age groups.. The first implants were carried out in 1957, and in 1984 the first major approvals were given by the medical community. The development process involved many steps and evaluations (Audiological, Medical, Radiological, Psychological, and Pediatric) and many questions were asked: Would patients with moderate to severe hearing loss benefit from CI? What about patients who did not perform well with hearing aids unless they had great amplification?

Today, cochlear implants are highly successful, but they are not reversible, so a great deal of thought must take place before a patient says "Go ahead."

The Noisy Corner

joodi MacDonald



A few months ago, CTV was promoting a special report on noise. I watched. It lasted about 3 or 4 minutes and said, essentially, that noise isn't good. Not quite a damning indictment. Society is still wavering on the hazards of climate change and realistically, noise pollution is unlikely to get any attention in the foreseeable future. Here is just one more bit of info before turning this space over to the Two-Way Street. A report on a 45-year study of sawmill workers in BC, by Charlie Fidelman in the Montreal Gazette a while back, "shows a direct link between occupational noise measured at 85 decibels or higher, and heart disease". Further, similar effects have been noted "at 65 decibels or lower – levels that are considered safe – from a steady stream of noise at home or at work . . ." The article was titled "Noise can kill." My final comment on noise pollution is from a Seinfeld episode: "Tranquillity now!"

Two-Way Street

Communication is a two-way street. For the members of CHIP, The Communicaider is our connection to one another. For some time now, we have been asking for your input – and finally, traffic is beginning to flow both ways. In this issue we have important information from Dave Dorey and a question from Maria.

On the topic of [Travelling with FM Accessories](#), Dave Dorey writes:

A person who plans to travel with any FM hearing accessories in other regions of the world * such as Europe, Africa, Russia or the Middle-East (including Israel) should check with their hearing aid supplier beforehand. The frequency band used by FM hearing accessories in Canada and North & South America is not necessarily the same in other regions of the world. Due to interference, an FM accessory configured for use in Canada may not operate properly in another region where the assigned frequency band is different. (It would also be illegal to operate in the wrong frequency band.) You need to determine beforehand whether the areas you plan to visit use the same frequency band as Canada. If not, it may be possible that a plug-in frequency-determining module in the FM transmitter could be exchanged or that the transmitter could be reprogrammed to temporarily accommodate your travels. Consult your hearing aid supplier.

Some miniature FM receivers (such as Phonak's MicroMLxS) that plug into behind-the-ear hearing aid models synchronize their operating frequency to that of the FM transmitter and may be capable of operating without change when travelling.

*The three internationally recognized radio regulatory regions of the world are:

- Region 1: Europe, Middle East, Africa, former USSR, Mongolia and Siberia
- Region 2: North and South America (east of the International Dateline)
- Region 3: Asia, Australia, and Pacific Rim (west of the International Dateline)

[Who knew? besides Dave, that is. CHIP welcomes this useful information and thanks Dave for sharing it with all of us.]

Responding to negative remarks about hearing loss

In an email from last fall, Maria tells about remarks being passed about her hearing loss “. . . during a meeting with adults who presumably understand disability. I found myself in the same dark area that I used to be in when I was a teenager. . . what used to hurt at 16 is still very painful today. . . their ignorance still hurt (and) I decided to educate them.” Most of us, I am sure, understand Maria's feelings all too well. Her response was commendable and intelligent. Maria was specifically looking for information about the diversity of high pitch vs low pitch loss. After a long hunt through journals, books and the web, nothing really clear, concise and specific turned up. [This being a column of dialogue, your response to this problem would be welcome and would be printed in the Spring Communicaider.]

Perhaps educating such insensitive or ill-mannered people about the exact causes of one's hearing loss and its consequences is more difficult and less applicable than calling them on their unkindness. Whether the comments are about hearing loss, or race or religion or any disability, they are unkind. In a court of law, ignorance is not considered a defense. In everyday life, it is not possible to know about and understand the range of problems and obstacles that a person can face. That is why we have manners. Manners are the lubricant of the social machine. Disparaging remarks – even made jokingly – are not good manners. In this case, in a meeting, such comments are totally unacceptable. This is not my opinion, but the “word” according to Miss Manners – a columnist with The Washington Post and an author recognized across North America for her wisdom and expertise about good manners. Even if your manners are flawless, and as members of CHIP, no doubt they are, I recommend *Miss Manners' Guide to Excruciatingly Correct Behavior* by Judith Martin. Her style is arch and somehow conspiratorially confidential. If you have ever found yourself needing to respond to someone's bad manners, you may have been at a loss for words. Later a good comeback may occur to you or in discussion with someone, a ‘perfect response’ may come up. If you have ever thought to yourself, “Why didn't I think of that (then)?” Miss Manners will provide you with some useful insights and prepare you to respond more effectively to unkindness.

(Continued on page 11)

CHIP Programs • Fall 2010

Here's the line-up of CHIP's fall programs and classes:



Creative Inspiration Workshop

Tuesday, September 14, from 1:15 to 3:15 pm

Tap into your creative spirit with painting and drawing. Bob Johnstone (a cochlear implant recipient himself) will reveal the symbolism and special meanings of your creative spirit. No painting or drawing skills required. Your free expression and creative process is emphasized in these fun and supportive workshops. Enhanced creativity can mean better problem-solving and coping skills. Use both sides of your brain – the logical side and the creative side. Free .



Conference Reports

Tuesday, October 19, from 1:15 to 3:15 pm

Come hear from the members of the CHIP Executive who attended this year's big Canadian and American Conferences on hearing loss. New research, new technology, and fresh ideas will be reported and you can ask questions, too. Free.



Speechreading (Lipreading)

Beginning the week of September 13th. See calendar for levels, dates, and times.

To accommodate the ever-growing numbers of students and more advanced levels of instruction, the speechreading program has made some changes. To ensure that you are working at a comfortable and helpful level for you, you must come Monday, September 13th between 12:30 and 3:30 for a placement evaluation. More levels mean smaller classes and more personalized material to maximize your skill development. Beginners will be working with Danelle Graham. Intermediates will be with Eva Basch, and Advanced levels I and II will be working with both Eva and her daughter, Chantal Basch-Tétreault – one hour with each. The same enjoyment and camaraderie will prevail.



HEAR Program (Hearing Education for Aural Rehabilitation)

Mondays from 10:15 am to 12:15 pm, beginning on September 13 (see calendar)

Coping with hearing loss does not come naturally, but fortunately the skills you need are easily learned. This program is a series of six two-hour units, one per week, and it is FREE. A family member or friend can participate along with you, learning together to communicate better.



Captioned Films

CHIP presents free screenings of captioned films on Wednesdays at 7 pm, beginning on September 15. You are welcome to bring a friend or family member. See the calendar for dates, and see the enclosed Film Program for reviews by Alvin Goldman of the films selected.



Resource Centre

Try out assistive listening devices that can help you enjoy life and function more independently (telephones, TV systems, alarms, etc.). We demonstrate equipment from a range of manufacturers but do not sell any products. Visits are FREE. Make an appointment today!

Please Register! By mail, fax, phone or in person at the CHIP office. Please Register!

CHIP Programs • Fall 2010

Monday	Tuesday	Wednesday	Thursday	Friday
SEPTEMBER 13 HEAR 1 – 10:15 to 12:15 Speechreading Registration and placement 12:30 to 3:30	14 Speechreading Beginner 10:15 to 12:15 Creative Inspiration Workshop 1:15 to 3:15 pm	15 Captioned Film 7pm	16 Speechreading Advanced I & II: 10:15 - 12:15 Intermediate 1:15 to 3:15 pm	17
20 HEAR 2 – 10:15 to 12:15	21 Speechreading Beginner 10:15 to 12:15	22 Captioned Film 7pm	23 Speechreading Advanced I & II: 10:15 - 12:15 Intermediate 1:15 to 3:15 pm	24
27 HEAR 3 – 10:15 to 12:15	28 Speechreading Beginner 10:15 to 12:15	29 Captioned Film 7pm	30 Speechreading Advanced I & II: 10:15 - 12:15 Intermediate 1:15 to 3:15 pm	1
OCTOBER 4 HEAR 4 – 10:15 to 12:15	5 Speechreading Beginner 10:15 to 12:15	6 Captioned Film 7 pm	7 Speechreading Advanced I & II: 10:15 - 12:15 Intermediate 1:15 to 3:15 pm	8
11 Thanksgiving	12 Speechreading Beginner 10:15 to 12:15	13 Captioned Film 7pm	14 Speechreading Advanced I & II: 10:15 - 12:15 Intermediate 1:15 to 3:15 pm	15
18 HEAR 5 – 10:15 to 12:15	19 Speechreading Beginner 10:15 to 12:15 Reports from Conferences 1:15 to 3:15 pm	20 Captioned Film 7pm	21 Speechreading Advanced I & II: 10:15 - 12:15 Intermediate 1:15 to 3:15 pm	22
25 HEAR 6 – 10:15 to 12:15	26 Speechreading Beginner 10:15 to 12:15	27 Captioned Film 7pm	28 Speechreading Advanced I & II: 10:15 - 12:15 Intermediate 1:15 to 3:15 pm	29

Please Register! By mail, fax, phone or in person at the CHIP office. Please Register!

CHIP Programs • Fall 2010

Monday	Tuesday	Wednesday	Thursday	Friday
NOVEMBER 1	2 Speechreading Beginner 10:15 to 12:15	3	4 Speechreading Advanced I & II: 10:15 - 12:15 Intermediate 1:15 to 3:15 pm	5
8	9 Speechreading Beginner 10:15 to 12:15	10	11 Speechreading Advanced I & II: 10:15 - 12:15 Intermediate 1:15 to 3:15 pm	12
15	16 Speechreading Beginner 10:15 to 12:15	17	18 Speechreading Advanced I & II: 10:15 - 12:15 Intermediate 1:15 to 3:15 pm	19
22	23 Speechreading Beginner 10:15 to 12:15	24	25 Speechreading Advanced I & II: 10:15 - 12:15 Intermediate 1:15 to 3:15 pm	26
29	30 Speechreading Beginner 10:15 to 12:15	DECEMBER 1	2 Speechreading Advanced I & II: 10:15 - 12:15 Intermediate 1:15 to 3:15 pm	3
6	7 Speechreading Beginner 10:15 to 12:15	8	9 Speechreading Advanced I & II: 10:15 - 12:15 Intermediate 1:15 to 3:15 pm	10
13	14 Speechreading Beginner 10:15 to 12:15	15	16 Speechreading Advanced I & II: 10:15 - 12:15 Intermediate 1:15 to 3:15 pm	17

Please Register! By mail, fax, phone or in person at the CHIP office. Please Register!

(Continued from page 7)

Without knowing the exact remark(s) that Maria experienced at that meeting, there are some points that can be made about the variability of one's hearing. Comments such as "She only hears what she wants to hear" and the like, generally arise when one doesn't hear as well as usual. The reasons for this are several and one or more may be the cause. Fatigue (often the result of listening attentively for too long), stuffiness caused by a cold, allergies or poor air quality, background noise, how well one's hearing aids/implants/assistive devices are working, knowledge of the topic and related vocabulary, acoustics of the room and, of course, the speaker's efforts to speak slowly and clearly. One of these alone or more in combinations reduce one's hearing success, dramatically at times. I am sure you can think of reasons not mentioned here. What can we do? Some possibilities might be:

If you are dealing with someone who has a disability him/herself, you might say (smiling sweetly) "I am sure you know how hard it can be to function at your best when you are fatigued. It's been a busy (hectic, challenging, difficult) day today."

If you feel the remark was made out of ignorance you could try (with an open and sincere expression) "Hearing is tough for me at any time, but it is so much harder when (there is so much noise, I am so tired, my allergies stuff up my head . . . (pick one or offer your own).

If the same person often makes such remarks and you feel that person is being unkind, Shakespeare offers a response. He said that the only real human flaw is "an unkind heart". This can be said innocently or with eyes slitted and a definite tone of menace or somewhere in between the two.

Finally, knowledge is power. There are many good books that contain useful nuggets for just such occasions. Sometimes being "armed" for such situations really can shorten the exchange and restore a sense of control to the offended person.

You might carry with you a few copies of the following examples (or ones of your own devising) to hand to a person making ignorant or unkind remarks.

"Joan bhht-ah shhdhh at-thh hiistah-skiwhh-shh-tuddhh."

(The h stands for unstressed, indistinguishable sound) (Mackay, 1978) which a person with normal hearing would hear as,

"Joan bought a sweater at the White Stag skiwear sale today."

The example comes from *Missing Words: The family handbook on Adult Hearing Loss* (Gallaudet University Press, Washington, DC, 1993). [More about this book in the HEAR HERE Column.]

"Hearing is the deepest, most humanizing philosophical sense man possesses . . . the sound of the voice that brings us language, sets thought astir and helps us in the intellectual company of man."

- Helen Keller

as heard by someone with a severe hearing loss,

"He***** ** *e *eepe*t, ***t hu*****
|***c*| *e**e *** p***e**e* . . . *e **u** **
*e ***ce **t ***** u* |***u**e, *et* **u*ht
t *** help* u* ** *e **tellectu*|c**p**y **
***."

Hele* *elle*

contains only this much information. The listener must figure out the rest one way or another.

If the person responds with "What's this?" or the like, you can say, "This is what my hearing loss looks like. To me it is no joking matter, especially as I am doing my best. You could be a big help by speaking more slowly (or taking the cigar out of your mouth or facing me or not covering your mouth with your hand . . .)"

I am sure our readers have all encountered such hurtful situations and may well have even better ideas to share.

We all would love to hear from you. Look on the back of this issue of *The Communicaid* for our postal or email address. Include your contact info, too, so we can ensure your comments appear accurately.

Two are better than one – most of the time

Penny Gosselin, M.Cl.Sc.

Dale Bonnycastle, M.Sc.

MAB Mackay Rehabilitation Centre



Mother Nature had the design right the first time around with each of us intended to have two ears! According to Dr. Mark Ross (a former invited speaker to CHIP), it follows that “most people with hearing loss, in most situations, are going to hear better with two rather than one hearing aid”. Similarly, research has demonstrated superior performance when a cochlear implant and a hearing aid are worn together (also known as bimodal listening), compared to an implant alone.

With two hearing aids or an implant plus a hearing aid, not only is it easier to hear people on either side of you but it is also easier to locate where a sound is coming from. This means that above and beyond convenience in conversation it becomes a safety issue as well. It’s important to know which direction traffic is coming from or where your grandchildren are playing.

Many people will often say that it is easier to hear and understand or that listening takes less effort when wearing two devices rather than one. There is also a feeling of balance and a sense of fullness and space due to the advantage afforded by

“binaural redundancy”. When the brain receives similar information presented to both ears, the overall perception of two-ear listening is usually greater than listening through either ear separately.

And finally, when devices are fitted to both ears it keeps both ears active which can result in less hearing loss deterioration. Researchers have shown that when only one hearing aid is worn, the unaided ear tends to lose its ability to hear and understand due to auditory deprivation.

Despite the numerous advantages that listening with both ears can bring, not everyone who has bonafide hearing loss in each ear wears two devices. In the early days, given the size of the “body aid” (the precursor to the Behind-The-Ear or BTE style of hearing aid), it was physically impossible to wear two. However, over the years, the technology on the inside of hearing aids has allowed for the miniaturization of the internal components such that a variety of custom-made hearing aids are now available. Today, not only is it possible to wear two devices comfortably, but countless research articles have demonstrated clear advantages for the skeptics among us.

In a social context, there are at least two obstacles that stand in the way of binaural listening. The first involves a combination of stigma and denial. Given the prospect of wearing two devices, some people reject the idea outright by stating: “My hearing loss isn’t that bad!” Some people feel that wearing two devices doubles the stigma and the shame.

The second factor involves our provincial funding body, the Régie de l’assurance maladie Québec (RAMQ), and the cost of the devices themselves. According to the eligibility criteria of the RAMQ, the only people eligible to receive a second hearing aid are those who are:

- under the age of 19
- visually impaired, or
- 19 and over pursuing studies or holding paid employment or self-employment or “trainees developing employability skills”.

Perhaps the idea of this utilitarian program is to serve the greatest number with the greatest intent of good. After all, the RAMQ program is very generous relative to other provincial programs in that it provides a complete amplification device for at least

one ear for a large segment of the retirement community. However, the RAMQ emphasis on “one hearing device” sends a message that one hearing aid is “good enough” when nothing could be further from the truth in most cases.

Crossing the border into Ontario, you may be surprised to learn that coverage for two hearing aids for all ages is the norm rather than the exception with the Assistive Devices Program (ADP). This is a policy for which even Mother Nature would be proud! According to the ADP website, regardless of age “if you need hearing aids for both ears, the vendor will bill ADP for 75 percent up to a maximum of \$1,000 of the cost of two hearing aids, two earmolds, accessories listed with ADP, and two dispensing fees”. The consumer would then pay the balance or invoke whatever third party funding they had to cover the expense of a device of their choosing. With the ADP program, hearing aids can be replaced once every three years, unlike the six-year renewal policy here in Québec.

Interestingly, the ADP in Ontario wasn't always like this. After many years, enough consumers voiced their frustrations and concerns that discrimination on the basis of age to determine one's eligibility for devices was not appropriate. Through the involvement of many, eventually the Ontario provincial government decided to offer similar coverage to adults and children for hearing aids and even assistive listening devices (e.g., the FM system).

While the cost of the devices themselves remains an obstacle on the path to binaural hearing, the benefits speak for themselves. Dr. Ross advises any potential hearing aid candidate to “start with binaural devices first”. He cautions that “it may take a few weeks or months for the full benefit of binaural hearing to emerge”. Only in situations where a person functions worse with two hearing aids, should one hearing aid be considered. For more information, see the following websites:

www.hearingresearch.org

www.betterhearing.org

RAMQ – www.ramq.gouv.qc.ca/en/citoyens/assurancemaladie/serv_couv_queb/aides_auditives_pq.shtml

Ontario ADP – Adult Program:

www.health.gov.on.ca/english/public/pub/adp/hearaid.html



Centre de réadaptation **MAB-MACKAY** Rehabilitation Centre

Adult Services for Deaf and Hard-of-Hearing

Open daily from 8:30 am to 4 pm
Evening hours on Thursdays from 4:30 pm to 8:00 pm

Call for an appointment (514) 482-0500

Audiology (local 229)

Assistive Devices (local 237)

Counselling (local 318, TTY)

Social Service (local 341)

Programme Coordinator (local 419)

CHIP and the MAB-Mackay Cooperate to Provide Advice and Guidance on ALDs

Depending on your hearing loss, some assistive equipment may be covered by RAMQ (Quebec Medicare). If you are qualified to receive this type of assistance, CHIP will refer you to the Services for Assistive Technology (SAT) department at the MAB-Mackay. If you are not sure if you qualify, you should contact your audiologist.

To obtain equipment through RAMQ, you will need to provide three documents:

- a recent audiogram
- a recommendation from an audiologist, and
- a form from an Ear, Nose, and Throat (ENT) doctor certifying that you have a permanent hearing loss.

Hear Here

joodi MacDonald

Hear Here was delighted by the opportunities to 'Hear There' – specifically at the May Month Event and our AGM. It is always a pleasure to meet and chat with members and suggestions and comments are really very welcome. Two items in particular need following up. The Speechreading Program has grown immensely in the past year and a half, thanks to Eva, our excellent teacher and her devoted students. After many requests for an expanded program, some of Eva's students took it upon themselves to push the season into the fall and part of the winter. It was so successful that it is now the standard schedule. Class size has grown, too. A new level has been established to bring class size down and skill levels in line so everyone can learn more comfortably.

Additional requests for evening and Saturday Speechreading classes have been looked at carefully. It was thought we might be able to hold a trial beginners' series on Saturday mornings, but two problems are keeping us from this option right now. Access to the Mackay building is not workable on Saturdays as yet. The other problem is getting teachers. No one is really keen on the idea of teaching every Saturday morning. No teacher – no class. The growth in numbers also has been a problem as one person can only do so much. Eva has recruited two additional teachers and, being Eva's hand-picked choices, I know they will be excellent. Evening classes have been tried for those who work all day. What we found was that Speechreading classes, however much fun they may be, are very hard work. Those who have been working in the hearing world all day do not have the stamina left to really benefit from evening sessions. Previous series have disintegrated as students either stopped coming or fell asleep in class. This does not mean we are not still looking at ways to provide services to those who are not available during the day. One point however, if I may: If you think of Speechreading or Aural Rehab as you would physiotherapy after an injury or surgery, you will realize that it is a medical issue. If you would take time for physio, it is not unrealistic

to take time for classes that will help you live more effectively with your hearing loss.

From time to time, people have asked if CHIP might set up a library of relevant books, tapes and such that members could borrow. CHIP does have a small collection right now and is adding to it regularly. The real problem is arranging for the borrowing and returning of materials. If you belong to a library you know it has regular operating hours and staff. CHIP's current complement of volunteers is already taxed to the max. We need a librarian or two. This is not a task to be taken lightly since it means regular office hours. If you went to your usual library and found the doors locked because staff had not shown up, you would not be amused. Given the effort of traveling back and forth and the lack of available parking, a CHIP lending library must have utterly reliable volunteers to make it a success. That being said, for the moment, if you are in for the HEAR program or come in on Mondays between 10 AM and 1 PM, (during September and October) I will endeavor to make materials available to you. A list of books and materials currently on our shelves should be available to pick up at the CHIP office in September.

Two excellent suggestions are:

HEAR: Solutions, Skills and Sources for People with Hearing Loss by Ann Pope. (Dorling Kindersley, New York, 1997.) The technical information is out of date*, but it is especially recommended for its interviews with individuals who have suffered hearing loss. Insight into how others see and deal with the problem can be very helpful.

Kay Thomsett and Eve Nickerson's book, *Missing Words: The Family Handbook on Adult Hearing Loss* (Gallaudet University Press, Washington, DC, 1993) is a favourite of mine. It was written by a mother with hearing loss and her daughter whose background is in linguistics. It covers the gamut from the personal and family aspects of hearing loss to the scientific understanding of how the brain works with the structures of language to make sense of speech. Again, the technical information is out of date.*

*For the latest technical info, come to the "Reports from the Conferences" workshop, Tuesday, October 19th from 1:15 to 3:15 pm.

One more place to go for books, journals and such is the Michael Reid Resource Centre, Room 219 at the MAB-Mackay. If you receive services from MAB-Mackay (devices, audiograms, etc.) you are a client. The following info comes directly from the MAB-Mackay website (www.mabmackay.ca):

The Michael Reid Resource Centre offers clients, employees and volunteers of the MAB-Mackay Rehabilitation Centre information and literature pertaining to motor, language, auditory and visual impairments. The Michael Reid Resource Centre features a collection of books, magazines, reference works, periodicals and audiovisual documents that can be consulted on site or loaned out. Monday to Friday: 9 am -12 pm and 1 pm - 4 pm in room 219. For more info: Please contact Admissions at: 514-482-0500, ext. 284.

HELP!

There have been some resignations from CHIP's executive committees recently – with the consequence that those who have been carrying a heavy load of responsibility now find the load even heavier.

Ideally, since some of our executive members are elderly, their load should be getting lighter, not heavier.

Please consider volunteering to help. You can contact me, or any other Executive member, at info@hearhear.org or at 514-482-0500, local 215.

We will gladly arrange for you to attend Executive meetings as an observer so that you can learn more about what we do and how you can contribute.

Thank you.

Alvin Goldman
Executive Director



Late-Deafened Support Group

Dale Bonnycastle and Marc Gervais, both professionals in the field of deafness, offer a support group for late-deafened and hard-of-hearing people. There is no cost and real-time captioning (similar to TV closed captioning) is provided to assist in communication.

When: Wednesdays from 10:00 am to noon from October 6 to November 24, 2010.

Where: Room 284, MAB-Mackay Rehabilitation Center, 3500 Decarie

For whom: Participants must have a significant hearing loss. Hearing spouses or family members are welcome and encouraged to attend.

Learn more about: Coping and communication strategies, resources and technology available for the hard of hearing.

The group will be a place where people can share feelings, strategies and ideas.

RSVP: For more information, or if you would like to join, please contact:

Audiologist Dale Bonnycastle

Tel: (514) 482-0500 ext. 253

Email: dale.bonnycastle.mackay@ssss.gouv.qc.ca

Counselor Marc Gervais

Tel: (514) 482-0487, ext 318 (TTY only)

Email: mgervais.mackay@ssss.gouv.qc.ca



- I can learn how to cope with my hearing loss at CHIP's 6-session HEAR program
- I can increase my understanding by taking speechreading classes
- I can make my life more enjoyable by meeting other people with hearing loss at CHIP workshops and captioned films
- I can try out assistive devices at the CHIP Resource Centre that can help me hear better with and without my hearing aid
- I can make a difference in my own life and in the lives of others who are hearing impaired – by becoming a member of CHIP, by working with other volunteers at CHIP, by making a donation to CHIP .

At CHIP we make the most of the hearing we have – and you can too!

**CHIP membership is only \$10 a year.
Donations to CHIP are tax deductible
and receipts will be issued.**

CHIP

3500 Boulevard Decarie
Montreal, Quebec H4A 3J5

Phone: (514) 482-0500, ext 215
Fax: (514) 482-4536 [attention: CHIP]

Email: info@hearhear.org
Website: www.hearhear.org

Publications Mail Permit 40593073

The Communicaider is published twice yearly, in the spring and fall. Your contributions and suggestions are welcome and may be submitted in writing, by mail, email, or fax. The opinions expressed in articles appearing in The Communicaider are those of the authors.

Editor: Carroll Salomon