"Here," the cable installer said, handing me the high definition cable box's remote control. "See if you can figure it out."

The cable guy had just told me that for my 10 high definition (HD or high def.) channels, the closed captioning comes from the cable box, not the TV. But that was all he knew. He could turn captioning on and off, but he couldn't make adjustments. And I wanted adjustments. The captioning on high def. channel 104 (broadcast channel 4) was tiny, crowded, and dark.

The cable man’s lack of captioning expertise didn’t surprise me, although closed captioning has been around in one form or another for some 35 years. By law, TV tuners now must have a built-in "chip" to decode the captioning signal buried in Line 21 of an analog TV broadcast (and who knows where in high definition, which has a thousand or so lines on a screen).

Some TVs put a closed captioning (CC) button on the remote, but for most it’s tucked away in the menus, with little or no explanation and even less fanfare. That’s disappointing. Who, but us techie nerds, looks at TV menus? I wish more people knew about it. After hearing aids and assistive listening devices, closed captioning is my favorite hearing loss coping tool. With it turned on, I don't have to turn up the TV volume and blast friends and family out of the living room. And I can easily keep up with even whispered dialog. Before captioning, I regularly fell asleep in front of the TV—either worn out from trying to keep up, or bored out of my skull because I didn't understand what was going on.

Easy-to-read closed captioning is important to me. When I went shopping for a high def. TV, I asked the clerks to turn on each set's captioning. They did so (if they could figure out how to do it). Later, I realized I'd only seen analog captioning. My Sony HDTV's lovely, bold, analog captioning did NOT apply to the high def. channels.

For the crystal clear high definition channels, closed captioning came from the cable box. It was a different thing all together, and (to my surprise) adjustable to the max—with multiple options for size, color, borders, background and translucence. Selecting a captioning style reminded me of setting up a newsletter.

The cable man finished his wiring and left, but I continued to experiment with the high definition

(Continued on page 2)
You’re invited! 2nd annual SHHH family picnic

Where:
The Renton Lions Youth Camp, 21235 SE 184th St., Maple Valley (Maple Valley Rd. to Cedar Grove Rd. SE; First right at Byers Rd. SE; first left at SE 184th St; follow signs).

When:
Sunday, August 7, 3:00 pm to 8:00 pm (eating at 5:00 pm)

WASA provides:
BBQ grills, plates, napkins, cups, plastic ware, soft drinks, catsup, mustard, mayo, & WATER-MELON. Covered area available.

Please bring:
A potluck item to share (salad, dessert, etc.); Meat (and buns) if you plan to grill, chairs or blankets to sit on; family and friends

(Continued from page 1)

captioning, running through the different options, looking for a combination that reads easily on almost every HD channel. I finally went for traditional white on black background, although yellow on semi-translucent looked pretty good too. Just recently I switched to white on bright blue. The blue makes the captioning easier to find on the screen.

Since that first experience with high definition captioning, I’ve accumulated a few additional pieces of HD-TV captioning lore as I struggle along, the lone brave pioneering hard-of-hearing couch potato. So far, my biggest ongoing problem has been the HD captioning on KIRO channel 7 (that’s 107 on my Comcast high def. cable box). Captioning for their evening CBS programming has endless legibility problems. Some lines run off the top of the screen, and half the rest are missing altogether. It’s driving me nuts.

Since KIRO hasn’t responded to an e-mail complaint, I’m contemplating investing in some face time—for the greater good of the deaf and hard of hearing in the Seattle area, and of course my own viewing pleasure. You’re with me on this, right? Your next TV set probably will be high definition and you’ll face the same rigmarole with the cable box and lousy CBS captioning.

Everyone is going high definition, you know. It only makes sense, with the expanded capabilities of digital TV signals.

You do know that the entire US will be converting to digital TV signals in year or two, right? After the conversion, if you use an antenna you’ll need a signal converter; and if you use cable, the cable company will more than likely be popping by with a new black box. You didn’t know, huh? I’m not surprised. Congress has yet to set a really rock-solid deadline for the conversion. The most recent one I saw was December 2006. But you know Congress. Maybe, maybe not.

HAIL (Hearing Aid Insurance Legislation)

The 2005 legislative session is over, and we are gearing up for the 2006 session. As reported in the Spring edition of Sound Waves, the two bills we introduced (one for the Senate and one for the House) did not make it very far. However, we had hearings in both health care committees, garnered much-needed support, and created awareness about lack of insurance coverage for hearing aids.

This summer we are holding meetings with our legislators to educate them about our bills. Since we had more support in the House, we will make a concerted effort to meet with as many Senate members as possible.

What can you do? Between sessions (right now) your legislators are usually in their home town offices. Please try to meet with them or call them and let them know about HAIL. One of us on the committee will be happy to accompany you if you would like to set up a face-to-face meeting.

To be included in the latest HAIL information, please contact Penny Allen, HAIL Chair, at PAllen@wasa-shhh.org.
It’s tacky to say, “Huh?”

Having trouble getting the word out that you’re hard of hearing? You’ve often heard our members refer to their I-lip-read buttons. These buttons are a sure way to remind people of your hearing loss—whether you’re going to a restaurant, riding on an airplane, or schmoozing at those dreaded gatherings. We’ve had many requests for these buttons and finally decided to make our own. There are two styles available (see below).

We’ve also had requests for visor placards, in the event you’re stopped by a police car. (God forbid you should be speeding!) Simply pull the visor down, and the officer is instantly alerted that he or she is talking to someone with a hearing loss. We’re not claiming you won’t get that ticket. But it should give you peace of mind and might even elicit the desired effect. You could also use it in an office, to remind anyone approaching your desk that you have special communication needs. Think of the possibilities!

Suggested donations will cover our printing and mailing costs. Please send a check or money order to WASA-SHHH, PO Box 4025, Kent, WA 98089.

At a recent West Seattle SHHH chapter meeting, Beth Gray proudly recounted her successes from her trip to Joshua, Texas. She didn’t usually travel alone, but her husband, Doug, wasn’t interested in going this time and she didn’t want to miss it. Her younger sister, aged 76, was getting married for the second time, and Beth had been invited to be in the wedding.

Beth, a long-time SHHH member, is profoundly hard of hearing. Fifteen years ago, she and her husband helped found the West Seattle SHHH chapter, and she knows a lot about the coping skills needed in travel situations. So, wearing her FACE ME, I LIP READ button and asking for assistance, she found people were great. She notified the people at the ticket counter of her communication needs and asked to be part of the pre-boarding group. She mentioned to people around her, both in the terminal and on the plane, that she might miss announcements. They made sure she was aware of what was going on.

It was fun to see how pleased Beth was at getting along so well on the trip. The wedding was special, and she was very glad to be there. She was still wearing the wedding corsage, as she proudly told the group of her trip. But she doesn’t think she’ll go off and leave Doug for that long again—he doesn’t like to cook for himself.

It’s never too late to step out of your comfort zone

By Judi Carr, Seattle

At a recent West Seattle SHHH chapter meeting, Beth Gray proudly recounted her successes from her trip to Joshua, Texas. She didn’t usually travel alone, but her husband, Doug, wasn’t interested in going this time and she didn’t want to miss it. Her younger sister, aged 76, was getting married for the second time, and Beth had been invited to be in the wedding.

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I am hard of hearing. Please face me. Speak clearly.

I am hard of hearing. Please face me. Speak clearly.
I’m on my commute home on a Metro bus, loudly accelerating in the I-5 express lanes tunnel, when my son calls my cell phone. Upon arriving home, my wife wants to go out to dinner in a place with great food, hard floors and walls, and lots of loud, happy people. These are environments where people with normal hearing struggle and the hearing-impaired rest of us often just give up. Now imagine that these are not problems, that you can probably hear better in these situations than “normal hearing” people. For me, that’s the case, thanks to my “Smartlink SX,” a new eminently portable wireless FM system from Phonak.

Smartlink is a clever little device, less than half the size of a cell phone, weighing less than 2 ounces, and packing some incredible capabilities. With an antenna hidden in a lavaliere cord (necklace), it has a wireless range of around 100 feet. Without the cord antenna, its range is less than 10 feet—but it hides in a shirt pocket or purse. It also serves as a remote control for Phonak hearing aids. Its real power, however, comes from its “smarts” and its “links.”

The “smarts” refer to its powerful signal processing. My Phonak Perseo BTE aids have the usual omni directional and directional modes. Smartlink has these and adds a third, a more focused directional mode with spectacularly effective noise cancellation processing. How spectacular? I heard clearly every word my son spoke in that cell phone call. I’ve stood next to the Alaskan Way viaduct, listening easily to a colleague speaking softly into the Smartlink microphone—while I shouted back at him. I fear no restaurant! Smart? It even does a marvelous job of cleaning up the Polycom conference phones that bless too many of my meetings.

Smartlink’s origin is as a wireless microphone, which you give to your dinner partner or discretely point at whomever is speaking. But it adds “links,” most importantly a wireless connection to a Bluetooth-equipped cell phone. Telephones have always been a challenge for me and cell phones nearly impossible, but my Bluetooth phone and Smartlink together turn my hearing aids into a hands-free wireless headset and make cell phone usage effortless and superior to landlines. It also links to an external microphone, and for more fun, to your favorite audio source or your TV.

It’s not perfect. It isn’t completely discrete. Its functions chew power, which is why they aren’t built into our hearing aids. Probably most of the weight of Smartlink is battery, and its full-on battery life is less than ten hours. I haven’t yet exhausted it in a day, but I have to recharge it every night. As far as I can tell, Smartlink doesn’t link to a landline phone, which would be effective. These are minor inconveniences, compared to the revolutionary changes Smartlink has made for me. And I haven’t even told you how it helps me sing in a choir….

(Truth in advertising—I have no connections with Phonak, financial or otherwise, other than that they have happily received my payments for their devices.)

Editor: You can contact John at johnglewis@comcast.net.

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**Smartlink demo**

On June 17 and 18, Helmut Ermann of Phonak will be on-site with Chris Borders, M.A., CCC-A at Eastside Audiology in Issaquah to provide Smartlink FM system demonstrations. For those who benefit, a 30-day free trial period with the Smartlink will be available. Call Chris: 425-391-3343 V/TTY or e-mail cborders@eastsideaudiology.com before June 10 to reserve your spot. Smartlink is compatible with several hearing aid brands and with both analog-programmable and digital technologies. It replaces the TX-3 transmitter.

**Telecommunications equipment**

If you live in Washington State and have a hearing loss, you are eligible for an amplified phone, Voice Carry-over phone, TTY, and/or telephone signaling device. A contract trainer will deliver the equipment. Cost is based upon income. Contact Kelly Robison, Program Manager: 1-800-422-7930/ V; 1-800-422-7941/TTY; write to Telecommunications Equipment Distribution, PO Box 45301, Olympia, WA 98504; or e-mail Robiskd@dshs.wa.gov.

**Hearing aids for low income people**

Lions Clubs work with dispensers to provide free refurbished hearing aids to anyone who is low income. Contact your local Lions Club or dispenser to apply.

If your annual income is $23,500 or below (single wage earner), you qualify for new high-quality, low-cost hearing aids through the Lions Audient program. More information: 1-877-283-4368 or see http://www.audientalliance.org.
Chapters in Washington

Meeting times and days sometimes change, and most chapters take a vacation break. See our website for program listings.

BELLEVUE—note new time/day: 2nd Sat. 1:00 pm; Lake Sammamish Four Square Church, Rm. 104, 14434 NE 8th St., Bellevue. Prudence Clem: 425-746-1074 or e-mail chapter coordinator.

CRISTWOOD—Time/location in retirement complex varies. 350 N. 190th St., Shoreline. Amplification, infrared. Rose Inouye at 206-542-5541 or e-mail inou@wasa-shhh.org.

DOWNTOWN SEATTLE—4th Thurs. 6:00 pm; Community Service Center for the Deaf and Hard of Hearing (CSCDHH), 1609 19th Ave., just off Madison. FM. Focus is on issues and access in the workplace. Judi Carr, facilitator: 206-935-6637 or jstarbright@wasa-shhh.org.

EAST JEFFERSON COUNTY—4th Mon. 1:00 pm; Pt. Townsend Community Center, 620 Tyler Street, Pt. Townsend; amplification, FM. Emily Mandelbaum at mandelbaum@olympus.net or 360-653-6746 or amilrwag@msn.com.

PORT ANGELES—3rd Tues. 10:00 am; Pt. Angeles Senior Ctr., 328 E. 7th, Port Angeles; amplification, FM; Susan Kosiur: 360-376-5740 or swkosiur@aol.com.

RENTON—2nd Fri. 12:30 pm. Renton Senior Center, 211 Burnett Ave. N., Renton. FM, real-time captioning. Mary Hollenbeak at 425-430-0594 or Sandy MacNair: 360-385-3137 or smacnair@cablespeed.com.

THE HEARTSTONE—2nd Tues. 10:30 am; 6720 E. Greenlake Way N, Seattle; amplification, infra-red; Denise Long at 206-517-2224 or dlong@heartstone.org.

WEST SEATTLE GOLDEN EARS—3rd Thurs. 1:00 pm; West Seattle Sr. Center, 4217 SW, Oregon St., Seattle. David Kietzke: drkietzke@att.net or Doug Gray at 206-932-6427.

Chapter success workshops
Share ideas at the 2005 Chapter Success Workshops. Everyone is invited to attend! Remaining workshops will showcase chapter program and publicity ideas.

Bring a lunch.

August 6, 11:00 am - 2:00 pm Pt. Townsend Community Center, 620 Tyler St., Pt. Townsend—same weekend as the Blues Festival.

November 5, 12:00 pm - 3:00 pm Community Service Center for the Deaf and Hard of Hearing (CSCDHH), 1609 19th Ave., Seattle (just off Madison on 19th).

9:30 am or doors will be locked. Mary Jo Harvey: harvenj@netzero.net.

TACOMA—2nd Sat. 10:00 am at TACID, 6315 S. 19th St., Tacoma. Amplification, infra-red, real-time captioning. Jerry Hansen: 253-531-6532 or jerryhansen@wasa-shhh.org.

THE HEARTSTONE—2nd Tues. 10:30 am; 6720 E. Greenlake Way N, Seattle; amplification, infra-red; Denise Long at 206-517-2224 or dlong@heartstone.org.

West Seattle—3rd Wed. 1:30 pm; Fauntleroy Church, UCC Lounge, 9260 California Ave. SW, Seattle; amplification, induction loop. Elaine Maros: elainemaros1@juno.com or Doug Gray at 206-932-6427.

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WEST SEATTLE GOLDEN EARS—3rd Thurs. 1:00 pm; West Seattle Sr. Center, 4217 SW, Oregon St., Seattle. David Kietzke: drkietzke@att.net or Judi Carr 206-935-9337.

WHATCOM-BELLINGHAM —3rd Sat. 10:00 am; Christ the Servant Lutheran Church, 1600 Lakeway Dr., Bellingham; amplification, FM; Charlene MacKenzie at 360-738-3756 or CharMacKenzie@cs.com; Bert Lederer 360-319-4540 or bert@lederers.net.

New!
Brainstem implant a go in nerve dead cases
The House Institute has successfully placed implants directly into the brainstem when a nonfunctioning acoustic nerve precludes the use of a cochlear implant. The implants transmit sound at levels much lower than cochlear implants. Where the nerve is severed to remove a tumor (a result of neurofibromatosis 2), sentence recognition scores of only 20% resulted. Higher levels are reached when the nerve is not diseased, HOH-LD News (Hard of Hearing-Late Deafened News) reported.

Boston Scientific acquires Advanced Bionics
Boston Scientific (BS), a manufacturer of neuromodulation devices in Natick MA, has acquired Advanced Bionics (AB), maker of the Clarion cochlear implant in Valencia, CA. AB’s structure will not be changed, the release stated.

FDA Med-el citation
The FDA has asked Med-el to respond to a warning citation about its alleged failure to use acceptable standards in making implants.

WA CI clinics list
- Children’s Hospital & Medical Center, Seattle
- Madigan Army Medical Center, Tacoma
- Puget Sound Hearing & Balance, Seattle
- Seattle Ear Clinic, Seattle
- Spokane Ear, Nose, & Throat, Spokane
- Tacoma Ear and Balance, Tacoma
- UW Otolaryngology Clinic, Seattle
- VA Medical Center, Seattle
- Virginia Mason Listen for Life Center, Seattle

Implant corner
For cochlear implant wearers and those who seek more information about this technology
By Ben W. Gilbert, Tacoma

40 years of implant advances have reached 100,000 users worldwide
By Dr. Jay Rubinstein, Director of the Virginia Merrill Bloedel Hearing Research Center, University of Washington

Cochlear implants have undergone a remarkable evolution over the past 40 years, from a highly experimental device to a standard clinical practice with about 100,000 recipients worldwide.

This metamorphosis has been accompanied by a dramatic improvement in speech perception. Most adult users who became deaf after acquiring normal speech and language are able to function nearly normally, as long as competing noise is not present. Similar gains have been made with implants in congenitally deaf children.

The first cohort of children who received multi-channel cochlear implants under the age of five is now graduating from high school and college. They appear, on average, to have acquired age-appropriate reading skills, something which would not have occurred using either hearing aids or American Sign Language. This first chapter in the widespread application of cochlear implantation has been a resounding success. Now, what comes next?

There are two main limitations to outcomes in both adults and children. The first is the device technology. The second is the delay from either birth in children, or time of deafening in adults, until implant surgery is performed and the device activated. The latter problem is being addressed through widespread publicity about the efficacy of implantation and through efforts toward universal newborn hearing screening. Nevertheless, much still needs to be done so all children and adults who might benefit from this intervention receive access to it as expeditiously as possible.

Limitations posed by device technology are being addressed in many laboratories around the world. Despite high levels of speech perception now being achieved in quiet, noise severely degrades the speech perception possible in even the best cases. In addition, perception of music still leaves much to be desired, despite the fact that many implant listeners enjoy music.

Two potentially synergistic pathways to achieving higher fidelity sound with an implant are increasing the number of electrical channels and the quality of temporal coding within each channel. Both pathways can be affected by manipulations of the signal processing software. The former pathway may also be enhanced biologically through the use of hair cell regeneration and related nerve growth factors.

The advances in implant technology in the past twenty years are accelerating, as we move forward to achieve a more normal auditory experience for those with hearing impairment. It is likely many dissatisfied users of current hearing aids will become implant candidates as this technology improves.
Myrna hears, but she yearns for music

Myrna Kain of Everett, WA, active for many years in Everett SHHH tells why she got an implant.

I had my implant done in June of 2002. I saw the before and after effects some of my SHHH friends went through with their implants and the remarkable enhancement of their hearing. I decided, after going to several seminars about cochlear implants, that it was my turn.

I truly believe I had been a candidate for many, many years, but people told me I was doing really well with my hearing aids. I actually was depriving myself. I also felt the need to learn more sign language (which is OK) so I could still communicate somehow as my hearing diminished. I really did not know what to expect after the surgery, mainly because I had forgotten so much of what I could or could not hear. I couldn't believe the little things I was hearing—rain drops on the roof of my car, water running in the dishwasher, grease sizzling in the electric pan. My sister-in-law told me they were going to have to whisper, so I couldn't hear what they were saying about me (a tease).

When I first got my implant, I was nervous about losing the processor, with it just hanging on my ear, so I had Robbi Bishop, my audiologist at the Virginia Mason Medical Center, attach it to my ear mold. I just wasn't used to that big hole in my ear. Eventually I got used to wearing it without the ear mold.

I go in once a year for new programming. Each year, the tuning sounds louder and louder. As they say, every day it gets better and better. Some people have said my speech has improved.

Like many other people, I love music, but the implant doesn't give me the sound of music the way I want to hear it. I hope implants can eventually be tuned to a program for music listening—it sure would be great. Looking back, I regret not having the implant done sooner. If the FDA approves having two implants done, I will have one on my other side ASAP.

How deaf become HOH

“So many deaf people morph into hard of hearing with a cochlear implant,” deaf educator Randy Collins, told HOH-LD News.

“In the past, Randy said, “HOH people would become deaf if their condition changed. Now the trend is going in the opposite direction.

“I know what to do for hearing people who become hard of hearing or deaf, but deaf to hard of hearing is altogether different. Let’s face it—money speaks English. The better our receptive skills, the better our chance of grabbing the brass ring. We are underemployed and we know why; so do deaf people. CIs are here to stay and have made a world of difference for many people.

“Deaf culture will continue to exist and adapt to the mainstream. In the future, deaf people who have CIs will wear them at work to become more accessible to English, and ultimately better jobs, but will on returning home, become a member of the deaf community again. The most successful deaf children have two things in common—ability and parental support. Mode of communication is NOT the primary determinant.”

From hearing aid to CI

Barbara Mladinov, active in Tacoma SHHH, tells about getting and managing a cochlear implant.

My hearing loss was gradual. I required nothing more than a hearing aid in one ear and an amplified telephone for work. It progressed faster as I grew older, and eventually I needed an aid in the other ear. Word recognition was becoming more and more difficult.

My daughter knew Dr. Souliere and suggested I see him. He is the only doctor who does implants in Tacoma. On my first visit(1998),I was told my hearing was a little too good to qualify for an implant, but to return.

A year later, I qualified and we began the procedure. Dr. Souliere stressed not to expect miracles, so I tried to keep an open mind. The surgery was simple (day surgery, but I stayed overnight because it was done in the afternoon); however, it required many visits for mapping.

I started with a body-worn speech processor but then went to the Esprit 3-G behind-the-ear speech processor. I wear a hearing aid in the other ear. While it does not help with word recognition, it picks up other sounds wonderfully. It helps when I’m driving, as I can hear sirens and other sounds so clearly.

The hearing aid also picks up the doorbell and the telephone when I’m not wearing the speech processor. I usually don’t wear the processor at home, as I’m alone. It just magnifies the outdoor sound too much—the buses pass here and there are sirens, so it can get annoying.

(Continued on page 8)
The race to cure hearing loss

By Michael Cheever, Associate Director of Development
UW Medicine Development, University of Washington

Treating hearing loss is no longer the only potential solution at the forefront of hearing research; recent discoveries at the University of Washington hint at curing deafness and hearing loss altogether.

Thanks to the Virginia Merrill Bloedel Hearing Research Center, the university brought together more than 60 research scientists from more than a dozen university departments to take a holistic approach to researching potential cures for hearing loss.

These scientists are researching deafness and disequilibrium at the structural, cellular, and molecular levels to discover how hearing loss affects vision and balance, and determine if hearing loss may even be related to Alzheimer’s disease.

Scientists at Bloedel want to reverse the damage — to restore hearing — through hair-cell regeneration. Most cases of severe hearing loss result from damage to cells in the inner ear, which are susceptible to damage from noise, aging, and genetic predisposition. Once these cells are lost, they are not replaced. The result is permanent hearing loss.

Until fairly recently, scientists thought hair-cell regeneration was impossible in higher vertebrates and that the mature inner ear was incapable of producing new hair cells in response to trauma.

This perception changed, however, when UW researchers made a monumental discovery: hair-cell regeneration occurs naturally in birds. This breakthrough changed the focus of the hearing-research community. Ten short years ago, there were two laboratories studying hair-cell regeneration — now there are over 30.

Since this discovery, researchers have made two more major contributions to the study of hearing restoration. They have verified it is possible to regenerate inner-ear structures in mammals, and to induce the first stage of hair-cell regeneration in the inner ears of mature mammals.

While the Center has made great strides, there is still a lot of work to be done — work that requires financial support to continue.

Recently, the Oberkotter Foundation, known for support of health and human services, has generously stepped in and issued a dollar-for-dollar match on all contributions given to support the Center’s hearing regeneration work.

With the help of the Oberkotter Foundation and support from the community, the Center will bring the science of hearing regeneration closer to a practical treatment for hearing loss.

“We have a critical mass of research scientists at our Center,” says Edwin W. Rubel, Ph.D., a leading researcher at the center. “And with the Oberkotter matching gift, we have a unique opportunity to take hair-cell regeneration research to the next level.”

If you would like more information or would like to make a contribution, please contact Michael Cheever at the UW Medicine Development office: 206 616-9575 or cheever@u.washington.edu.
We need you!

Since its birth, WASA-SHHH has been served by dedicated individuals who have given of their time and talents to develop a dynamic organization. We have hosted an international convention, developed training programs, and lobbied for hearing aid insurance legislation. Our future plans include a state-wide conference.

WASA-SHHH is seeking nominations for the Board of Trustees upcoming election. Board positions are open to people who are hearing and hard of hearing alike, and we encourage family members and professionals who advocate and provide services to hard of hearing people to apply. The Board is made up of 9 to 18 elected members, each serving a 3-year term. Every year a third of the board positions become available. Although there is no limit to the number of terms a person can serve on the board, officers are limited to 2 consecutive terms in any one office.

If you are interested in joining the WASA-SHHH Board of Trustees and being a part of a great organization that does great work, or know someone who is, please contact Michael A. Bower, Nominations Committee Chair, at MABower@wasa-shhh.org (please put WASA-SHHH in the subject line).

WASA-SHHH Board meetings are scheduled four times a year. The last meeting of the year is a general meeting with installation of the new board. Meetings are open to SHHH members and the public. Captioning and ALDs are provided.

- Saturday, August 27, 11:00 am - 4:00 pm; St Lukes Rehab Center, 711 S. Cowley, Spokane (bring a lunch)
- Saturday, December 3, TACID, 6315 S. 19th St., Tacoma. (Time to be announced).

Please contact Judi Carr, Meeting Coordinator, for more information: jstarbright@wasa-shhh.org.

Opportunities for volunteer work

You don’t have to be a WASA-SHHH Board member to participate in Board activities. We need help in the following areas:

- Web design
- Grant writing
- Public speaking, training
- Newsletter writing/editing, proofreading
- Fundraising, sponsorship
- Advocacy
- Financial/auditing
- Outreach

Please e-mail us if you wish to be of help: info@wasa-shhh.org

Getting support

There’s no reason to go it alone. If you can’t find a chapter near you, contact us (see WASA-SHHH Board, page 10). We will try to locate someone in your area to meet with you.

If you have e-mail, that’s even better. We have a strong online support network—people just waiting to “talk” to you and help you solve your hearing-related dilemmas.

SHHH also has message boards, a chat room, and listserves. Join SHHH today and take advantage of these great ways to receive online support: http://www.hearingloss.org
We appreciate you!
Your donations help us fund projects that benefit people with hearing loss. These contributions are for November through January:

- Mariam Anderson, Issaquah
- Judy Barnes, Portland, OR
- Matthew and Shelby Bellews, Seattle
- Lucina Colinares, Seattle
- Marjorie Thomson, Denver, CO
- Roy and Lisetta Lindstrom, Silverdale
- Doris Linkletter, Des Moines
- Jane Nelson, Mercer Island
- Wendell and Norma Walker, Port Orchard
- Betty Ruble, Auburn
- Avis Shek, Bellevue
- Peggy Vorwerk, Bainbridge Island

United Way
You can make regular United Way contributions and help hard of hearing people in our state. These readers have supported this newsletter throughout the year through United Way:

- Erlene Little, Seattle
- Dave Pearson, Marysville
- John C. Robbins, Renton
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