

voice

for hearing impaired children

2010 VOICE Conference
in Pictures

Failure is not an option

Top Tips for Success

Sound Matters

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**It Takes a Village to Give
Children with Hearing Loss
a Voice for Life**

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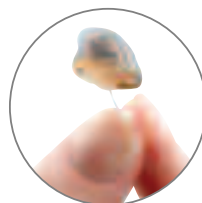


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VOICE for Hearing Impaired Children: A Retrospective

2010 marks the 45th anniversary of VOICE for Hearing Impaired Children; an anniversary of parents joining together to make a difference in the lives of their children who are deaf or hard of hearing.

From its early beginnings in Toronto, Canada, 45 years ago, the mission of the VOICE organization has remained the same:

“To ensure that all hearing impaired children have the right to develop their abilities to listen and speak and have access to services which will enable them to listen and speak”

The roots of VOICE take us back to the 1950s; to an era when children typically did not have their hearing loss identified until the age of two and were subsequently educated in a residential school for the deaf. In the early '60s parents banded together to move in a radically new direction, advocating in favour of mainstream education for children with hearing impairments.

Louise Crawford, Member of the Order of Canada since 1993, was instrumental in establishing an auditory training program at The Hospital for Sick Children in Toronto, Ontario, Canada, in 1962 and pioneering what would later become known as the Auditory-Verbal Therapy Program. Dr. Page Statten, an otolaryngologist with the hospital's Clinic for the Prevention of Deafness hosted an association of parents of children with hearing handicaps and strongly endorsed integration and auditory-verbal training. The informal structure of this parent association was incorporated in 1975 as VOICE for Hearing Impaired Children. Its primary goal was to advocate for auditory-verbal therapy and classroom integration.

The VOICE organization has grown considerably over the years. Parent support continues to be the cornerstone of our organization. The VOICE Conference and Teen Leadership Program held each year at the University of Guelph, Ontario, boasted its largest participation rate this year with as many as 300 participants. We are grateful to our many volunteers, sponsors and exhibitors. Highlights of this worthwhile event are featured in this issue of *Sound Matters*.

Learning to Listen: A Book by Mothers for Mothers of Hearing Impaired Children was first published in the mid-1970s and updated in 1981. VOICE is pleased to release *Learning to Listen: A Book by Parents for Parents* in this our anniversary year. We are grateful for a Parents Reaching Out grant from the Ontario Ministry of Education in support of this project. We are particularly appreciative of the contributors Anita Bernstein, Nicole Nayman, Judith Simser, and Melda Wales and

thankful for the help of our publishers, Andrew John Publishing Inc.

The VOICE Therapy and Training Program, under the direction of Anita Bernstein, LSLC Cert. AVT, is arguably one of the largest of its kind worldwide. In 2010, with sincere appreciation of funding from the Ontario government, VOICE expanded the Mentorship Program to include professionals in training in 23 school boards.

Also in 2010 VOICE launched its first annual DRESS LOUD DAY campaign! This event during May Speech and Hearing Month is intended to help raise awareness in schools and businesses about the needs of students with hearing loss in Canada today. VOICE continues to consult with government to assure that suitable supports and services are available for families and their children with hearing loss. Last month in Ontario a draft document entitled *Guidelines for Programs and Services for Students who are Deaf or Hard of Hearing* was circulated to all school boards. The guidelines, which are subject to further consultation this year, describe effective practices for district school boards when providing supports and services to these students and are designed to help educators and other professionals implement structures and processes that will enhance learning and move toward consistent practices across the province. At the federal level, VOICE continues to lobby for universal infant hearing screening in all provinces of Canada and for changes to the Disability Tax Credit that will eliminate its presently discriminatory eligibility criteria.

It is particularly meaningful in this our 45th anniversary year that VOICE be the recipient of the 2010 Consumer Advocacy Award by the Canadian Association of Speech-Language Pathologists and Audiologists. Reflecting on my personal involvement with the VOICE organization, now spanning 20 years, it is tremendously rewarding to see how far we have come. The VOICE organization truly represents a village of special parents and dedicated professionals. I am honoured to be a member of the VOICE village and of an organization that continues to help children who are deaf or hard of hearing find their VOICE for life!

Sound Matters

2010

Official publication of VOICE

voice

for hearing impaired children

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2010 VOICE conference

in pictures.

Photos courtesy Larry Williamson and Eileen Boxall



Feeling Good at VOICE Conference 2010



Dear VOICE,

Congratulations on this 45th Anniversary from one who has been there from the start. We have come a long way from those early beginnings, when we had no clinical audiologist in Ontario, auditory-verbal therapy was in its infancy, and we were just beginning the struggle toward integration into regular schools.

Have a great celebration,
Leslie Mezei

“Wonderful conference! The keynote was really one of the best presentations I have heard in 41 years ‘on the job’. What a pleasure!!”

Congratulations to all on a job well done.”

Dorothy Boothroyd,
Boothroyd, Dewar & Draffin
Special Education Consultants

“I just wanted to say thank you to all the people who put the conference together. It looked like it was very well attended.”

I would especially like to thank John Bergen for his very generous hospitality. It was so much fun, and food was fabulous.

I saw old friends and made new. I have been absent from VOICE for quite some time, and it is so refreshing to come back and see how far VOICE has come. I guess for me because I am away from the day-to-day growth, when I do attend a function like the conference, talk to families and professionals, I am just taken aback to hear how far technology has come, and the opportunities our kids have been presented with. I came home feeling so proud of being a part of VOICE. Thank you all for that.

Kris feels the same way. Kris is very passionate about being apart of VOICE, helping young kids. It helps him grow as an adult being a part of such a positive passionate group of people.

Kris came home so positive and pumped to do more after attending Saturday’s conference.

Thank you again VOICE for giving me my yearly boost of WOW we have come a long way and I can’t wait to see what’s next.”

Kim Martin (parent of VOICE alumna Kris Martin)

“Another successful conference this year. I had a blast with the teens and a lot of fun being on the panel.”

Matthew Wren, VOICE Alumna and volunteer extraordinaire

“I just wanted to say that the conference was incredible. I have heard nothing but positives from the parents whose children I see to the teachers with whom I work.”

2010 VOICE conference

Thank you to all who made it possible.

Nicole Nayman, LSLS Cert. AVT, Teacher of the Deaf and Hard of Hearing



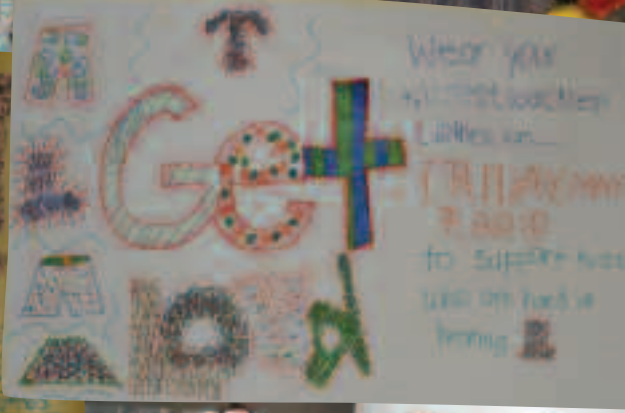
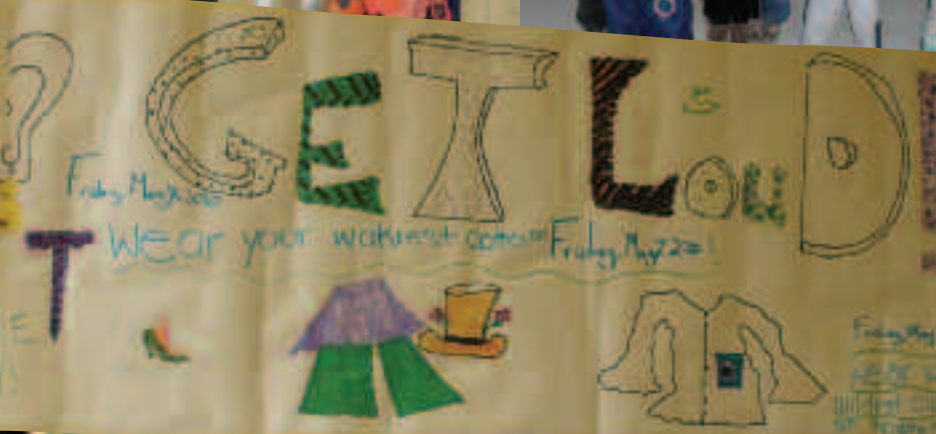
“The keynote speaker was amazing and it just gets better every year!”

Janet Henry
LSLS Cert. AVT Teacher of the Deaf and Hard of Hearing



VOICE Celebrated Hearing & Speech Month with Dress Loud Day!

Check out the blog at: <http://voicesdressloud.wordpress.com>



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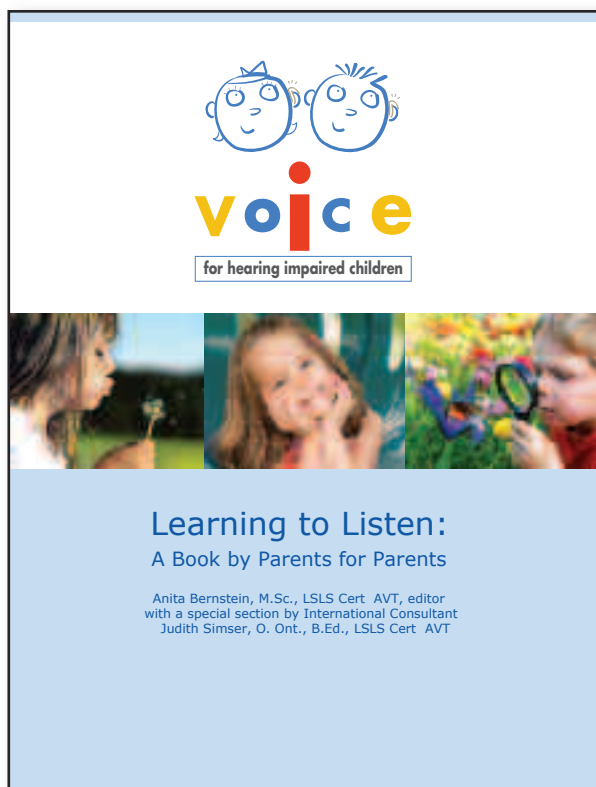


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Learning to Listen, A Book By Parents for Parents: New Edition Launched in Celebration Of VOICE's 45th Anniversary Year



Learning to Listen, a book by mothers for mothers of hearing impaired children was first published in the mid-70s and an updated edition printed in 1981 by VOICE for Hearing Impaired Children. The original authors, six dedicated mothers who had children with hearing loss, shared their challenges and experiences in choosing the listening and speaking option for their children. Their dream was novel for that time – they wanted their children to attend the neighbourhood school and have the opportunity to be educated and socialize with their typically hearing peers. The landscape for children with hearing loss has seen tremendous change since the mid-70s; however, parental concerns for their children as well as the need for support and guidance prevail. Although skilled professionals are available to guide families in developing the skills needed to assist their children to listen and speak, parents find their most valued mentors in other parents who share similar experiences.

The focus of this edition is a sharing of successful strategies for “Living the Auditory-Verbal Life” and activities for making every moment a listening and language learning opportunity. It endeavoured to incorporate all the wonderful activities shared by the original authors as well as many others contributed by VOICE families. Judy Simser, who too parented a child with a hearing loss and is a LSLS AV therapist, shares her insights and wisdom learned in that dual role.

It has been an inspiring experience working with such dedicated parents and professionals to make this edition of the Learning to Listen book a reality. As with its previous editions, it will continue to be an invaluable teaching tool for both parents and professionals.

Learning to Listen, A Book By Parents for Parents ORDER FORM

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life is on

Top Tips for Success: Making It in Today’s World!

Panel: Matthew Wren, Sara Borean, Andrea Scott, and Taylor Walker

Panel Moderated by Catherine Luetky, LSLS Cert. AVT and Teacher of the Deaf and Hard of Hearing

A panel of VOICE graduates; shared their personal journeys growing up with a hearing loss and the successful strategies that enabled them to achieve their personal goals.

Be independent – Challenge yourself and new opportunities will open up. Life is a learning curve; it is OK to make mistakes.

Don’t be afraid to ask for help – Be upfront about your hearing loss. There are a lot of people out there who want to help you. Talk to your guidance department – every school and university has one. Use the resources available, they can make your life easier.

Stand up for yourself – Don’t let people tell you that you cannot do something. You can! Prove them wrong!

Don’t give up – Keep pushing forward; life gets better after high school. People become more accepting.

Find something that you love and do it! – Volunteering is a great way to start a budding career or an exciting hobby. Be prepared to adapt your goals; find something that works for you.

Be patient – Other people often do not understand what it is like to be deaf. You have a unique perspective on life as a deaf person. Do not be afraid to give your employers, peers, teachers/professors, and friends guidelines; this will make it easier for them to know how to meet your needs and utilize your skills.

And remember having a hearing impairment does not change who you are – if anything, it makes you stronger!

By Ashley S. Garber, MS
CCC-SLP, LSLS Cert. AVT

Language: Behavioural Building Blocks

As parents, the behaviour of our young children is always on our minds: encouraging appropriate behaviour, discouraging unpleasant behaviour, promoting good habits, and maintaining a peaceful, productive home life. For the parents of children with hearing loss, these typical concerns can seem extraordinary given the focus that they already have on the language needs of their children. It is this focus on language; however, that provides parents with the perfect building blocks to support their child’s behavioural development – and vice versa.

From very early ages, language and behaviour development are linked. It is in infancy that children learn about cause and effect as related to communication – crying brings action, smiling gets attention, etc. Once this concept is firmly in place, the consistency that we use to

pair actions, body language and consequences with spoken language is all important; both in establishing behavioural expectations and in further developing language. The “blocks” will build on each other as follows:

- In new situations, use of familiar language will help children to make connections with known scenarios
- Capitalizing on a child’s growing knowledge of related behavioural expectations will allow for further expansion of language concepts
- As behavioural expectations increase, using known language will help children to understand new standards

For example, when a child is first introduced to the task of play

audiometry, seating her in a highchair, offering a familiar toy and pairing known language (such as “sit down,” “uhoh,” “listen,” and “hooray!”) together with related actions should help her to make connections between other play activities and this new listening activity. Once the listening task is familiar, related language concepts such as “wait,” “your turn,” “put it in,” and “I heard that!” will become more meaningful. As language and behavioural expectations grow in tandem, new standards such as imitating the sounds heard can be introduced.

To confidently build language and behavioural expectations simultaneously, parents will want a tool belt full of strategies. The following strategies will be useful throughout the years:

- **Modeling** – Simply using the desired language at the appropriate time is one sure way to show a child what is expected both verbally and behaviourally. Through modeling from others, children can learn manner words and polite demeanour, question forms, expanded sentence structures, turn taking behaviours and sharing. Engaging in pretend play scenarios provides multiple opportunities for “low-pressure” modeling with stuffed animals or other characters.
- **Emphasize/create routines** – From very early ages children make connections between the recurring events of their life (e.g., feeding, diapering) and the related language. Building routines into other parts of the day will facilitate those connections.
- **Choice making** – Simple choices provide a good opportunity to pair new words with objects (e.g., holding each one out, “Do you want milk or juice?”). Offering a child a choice of actions is an excellent way to give children power while still exercising some control over a situation. For example, asking a child “Do you want to walk upstairs to bed or be carried?” gives them an opportunity to be in charge, but still moves them toward the bedroom. As the child matures, more complex language can be used to describe the reasoning behind alternative choices.
- **Repeating back** – A simple repetition of what a child has said gives affirmation of a child’s successful communication, but then opens the door for parents to respond as they see fit. For example, a parent might say “I heard you. You said ‘I want a cookie’. But **no**, it’s not time for desserts.”
- **Transition time** – Children often need time to shift gears between activities and to process new language. Giving them this

time can often circumvent the tantrums that sometimes come with the end of a fun activity. Instead of “It’s time to go NOW!” a parent might try: “Slide slide slide ... done!” or “You can play while I count to 10, then it will be time to go.” Using a similar transition strategy for most situations helps to make this into a kind of routine and will be more successful.

- **Preparation** – On a larger scale, children with delayed language often benefit from mental preparation for big events (e.g., a doctor’s visit, a new sibling). Repeated discussion using familiar vocabulary along with visuals (e.g., photographs, storybooks) will be helpful in setting expectations.
- **Distraction** – When a child is persistent about something inappropriate, turning their attention to a different, favourite object/subject often interrupts a meltdown while bringing an opportunity to practice known language and build new vocabulary. This is a particularly helpful tool during the early ages when children are quite demanding, yet their attention spans are short.
- **Consistency** – This is the overriding concept for all behaviour management/development. Following through both with promises made and consequences stated is *crucial* for the child with hearing loss and developing language. Children must be able to make connections between language and outcomes in order to continue their growth in both areas.

In summary, the language that parents, teachers and therapists use with children with hearing loss assists them in learning about behaviours that are and are not acceptable in particular situations. In turn, behavioural expectations provide a framework on which language expansion can occur. Having a variety of strategies at the ready will help parents to meet behaviour challenges while growing language all the while, with the idea that helping a child develop good behaviour at the outset may preclude the need to manage inappropriate behaviour in later years.

Resources

For information on “Ages and Stages”: www.healthychildren.org
Parenting with Love and Logic by Foster Cline and Jim Fay
Love and Logic Magic for Early Childhood: Practical Parenting from Birth to Six by Jim Fay and Charles Fay
HOPEOnline archived sessions “Language and Behavior Management” and “Building Better Behavior” found at www.cochlear.com/HOPE

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VOICE Provides a Professional Development Workshop on Maximizing Audition and Communication

On May 7, educators, speech-language pathologists, and hearing professionals gathered to learn, discuss, and share knowledge and experiences in assisting children with hearing loss to learn to listen and speak.

Renowned speaker and clinician, Linda Daniel, MS, MA, Lic. Aud, Cert AVT conducted a day-long workshop on **Maximizing Audition and Communication**. Ms. Daniel is director of HEAR In Dallas and a listening and spoken language specialist, certified auditory-verbal therapist.

Ms. Daniel emphasized that children with hearing loss are not a homogeneous group and professionals must consider each child's unique needs when designing intervention programs. She described the various factors which may affect a child's ability to progress in developing spoken communication including:

- Child factors such as level of hearing loss, additional learning challenges, etc
- Communication mode(s) of the family, school and child
- Family characteristics
- Availability of intervention services and school programs
- Intervention philosophies and the expertise of service providers

Ms. Daniel went on to discuss the possible influence these factors may have on the range of outcomes for children who are learning to listen and speak.

Although studies indicate that approximately 40% of children with a hearing loss also present with additional learning challenges, Ms. Daniel's has found that in her practice, as many as 80% of children have complex needs. To ensure that all clients' needs are supported, Ms. Daniel works with a team of professionals who provide intervention in sensory motor functioning, sensory processing, sensory integration, oral motor issues, psycho-social development, and behaviour.

Taking these variables into consideration, Linda Daniel mentioned that there is a range of communication and educational outcomes for children with hearing loss and presented cases which illustrated the pivotal role of audition in the development of seven levels of communicative competence. Over time, children may move from one category to another, either due to progress or regression.

The child may:

1. Develop excellent auditory-verbal competence with clear, natural-sounding speech, age appropriate receptive and expressive language and function in the social/ educational mainstream.
2. Achieve verbal competence with some delay/difference, functions within the social/educational mainstream but may need some modifications.
3. Acquire spoken language with noticeable delay/disorder in receptive and/or expressive verbal abilities. These children will require ongoing intervention, support services and may benefit from special educational placement.
4. Attain spoken language with significant long-term difficulties in learning, speaking, and auditory functions. These students may use a combination of modes of communication. Social mainstreaming will be impacted by lower-verbal skills and a modified curriculum may be required.
5. Develop little auditory and verbal skills for communication. The student may learn functional communication from drill and repetition and have poor ability to generalize language. These children would probably socialize primarily with family members, caregivers, and teachers. Educational goals focus on life skills to the extent possible.
6. Only use hearing for tone of voice/emotion, may respond to some environmental sounds, and may comprehend a few words such as "No," "Stop."
7. Have no way of communicating that involves audition: may or may not use eye gaze, expression, etc. for communicating.

The ultimate goal is for each child to achieve a level of communication that maximizes the use of audition. The mode of expressive communication will vary with the child's strengths and challenges. Decision making, goal setting, and parent counselling must take into consideration all available information about the child, the family, the educational options and the community.

Adapted from Daniel, L. Levels of Benefit from Cochlear Implantation: Factors Influencing Performance. 1995. Available at: Speechpathology.com.

VOICE for Hearing Impaired Children Position Paper: Disability Tax Credit, February, 2010.

VOICE for Hearing Impaired Children (VOICE) is the largest parent support organization in Canada for families of children with hearing loss.

VOICE's Consumer Advocacy – A coalition of like-minded consumer and professional organizations has been formed to address our shared concerns. Here follows the VOICE Position Paper on the shortcomings of eligibility criteria for the Federal Disability Tax Credit

The Issue

VOICE wishes to bring to public attention the discriminatory nature of the Disability Tax Credit (DTC).

The existing criteria for eligibility for the DTC discriminates against individuals with hearing loss who use cochlear implant or digital hearing aid technology and who have learned to speak.

Many children with hearing loss in Canada are now benefitting from early diagnosis of their hearing loss and have access to technology that enables them to learn to hear and to learn spoken language. This is a tremendous step forward to enabling their full participation in our hearing society. The assistive listening technology, however, does not eliminate their severe and prolonged disability. They are, for all intents and purposes, still deaf. There are many times during the course of their daily living, for example, in water and with the existence of background noise (which represents everyday life) when they cannot benefit from or maximize the use of their assistive listening technology.

The DTC criteria in form T2201 is both confusing and inequitable for families of children with hearing loss. We are informed by the Canada Revenue Agency (CRA) that the DTC is intended to help offset the additional costs of a disability. Families of children with hearing loss have the additional costs associated with acquiring, maintaining and upgrading state of the art hearing technology, including hearing aids, cochlear implants, FM systems, batteries, wires, and cords and the related costs for their children's medical appointments, routine audiological appointments, and auditory-verbal therapy. Many families are bearing the costs for more than one child with hearing loss in their family. Over 40% of children with hearing loss also have another physical or learning challenge. For the reasons outlined herein, VOICE is opposed to the use of a hearing threshold measurement to determine DTC eligibility.

Many families, despite obtaining prior authorization from a qualified

professional have upon filing T2201 had their applications challenged by the CRA. Following an involved appeal process, the decision of the CRA has been reversed. In recent years there appears to have been an increase in imposed eligibility time limitations and follow-up audits. The uncertainty of ongoing DTC eligibility causes undue stress on families. A change in eligibility status has serious implications to a family who want to participate on behalf of their child with hearing loss in the Federal Registered Disability Savings Plan (RDSP) program. Hearing loss in children is a life-long impairment with long-term personal and societal implications affected by increasing costs for technology, future employment opportunities and their overall quality of life.

The following are examples of when a child with hearing loss may not be able to benefit from their hearing aids and/or cochlear implants (assistive listening technology):

- Anytime there is background noise of any kind (street noise, wind blowing, interior fans/computers/air conditioning, equipment humming such as a fridge or overhead projector, chairs moving, people talking, doors closing, radio, TV)
- Large and open spaces with noise and reverberation such as a gymnasium, movie theatre, arena, church, or auditorium
- In distance (typically more than 3 feet)
- Sleeping (must remove assistive listening devices)
- Swimming and water parks (must remove assistive hearing devices)
- Bath (must remove technology)
- Sports (helmets interfere with sound quality)
- Playgrounds (must remove implant equipment to play on indoor or outdoor playground equipment because a build-up of static electricity damages implant equipment)
- Blow-up bouncy party equipment (must remove implant equipment due to static problem)
- Assistive listening devices malfunctioning or batteries dying

The DTC is a non-refundable tax credit that is intended to apply to persons with hearing loss who have a permanent impairment that restricts their ability to perform functions of daily living, even with the use of their hearing aids.

Unfortunately, the DTC's definition to determine eligibility is inappropriate because of ambiguous terminology which leaves it open to misinterpretation. It is the experience of VOICE families that the authorization of the DTC is subject to individual and varied professional interpretations which results in non-standardized eligibility.

The DTC requires that eligible persons must be **markedly restricted**, i.e. "unable to hear so as to understand another person familiar with the patient, in a quiet setting, even with the use of appropriate devices; or takes an inordinate amount of time to hear so as to understand another person familiar with the patient, in a quiet setting, even with the use of appropriate devices."

Notes

- Devices for hearing include hearing aids, cochlear implants, and other such devices.
- An **inordinate amount of time** means that hearing so as to understand takes **significantly** longer than for an average person who does not have the impairment.

Examples of markedly restricted in hearing (examples are not exhaustive):

- Your patient must rely completely on lip reading or sign language, despite using a hearing aid, in order to understand a spoken conversation, all or substantially all the time.
- In your office, you must raise your voice and repeat words and sentences several times, and it takes a significant amount of time for your patient to understand you, despite the use of a hearing aid."

- Source: *The Disability Tax Credit Certificate, Part B, page 6*

VOICE'S Position

- Hearing loss is permanent. Granting the Disability Tax Credit (DTC) for a child with hearing loss should assure life-long eligibility to the DTC and to the Federal Registered Disability Savings Plan (RDSP) program.
- The DTC eligibility criteria do not reflect the individual's day to day listening environments and corresponding challenges of daily living. Daily living is not contained within a quiet setting.
- Increasingly children with hearing loss are benefitting from early diagnosis and access to technology and auditory-verbal therapy that enables them to learn spoken language. The effective use of technology should NOT disqualify an individual from claiming the DTC just as the use of a wheelchair would not disqualify a physically impaired individual. Whether a child uses sign language or technology and their ability to understand spoken language should not be relevant.

- The DTC is intended to offset the costs of the disability. The increased cost of technology affects all children with hearing loss. Forty percent of children with hearing loss have another physical or learning challenge. Hearing thresholds should not be the only determinant to eligibility.

Recommendations

1. As an interim solution, physicians and audiologists completing T2201 should be encouraged to be guided by case law by the Federal Court of Appeal and other relevant courts with respect to the interpretation of the Income Tax Disability Tax Credit. Precedent has been set in Barber vs. the Queen. <http://www.canlii.org/en/ca/tcc/doc/2001/2001canlii863/2001canlii863.htm>. Therefore, professionals should be encouraged to authorize T2201 on behalf of their patient's with hearing loss.
2. Revenue Canada must change the definitions and criteria to reflect the evolution of and use of assistive hearing technology without discrimination for its effective use.
3. New definitions and criteria should be developed through consultation with VOICE for Hearing Impaired Children, The Canadian Hard of Hearing Association and professional associations, including the Canadian Academy of Audiology (CAA) and the Canadian Association of Speech-Language Pathologists and Audiologists (CASLPA).



CALSPA Award

Executive Director Norah-Lynn McIntyre (right) accepts the Canadian Speech Language Pathology and Audiology Consumer Advocacy Award for 2010 on behalf of VOICE for Hearing Impaired Children

Play Pals: Facilitating Social Interactions for Preschool Children

It's Just Play!

- Play is the work of children
- Play is fun and social
- Play encourages turn taking
- Play can be done without words
- Play involves repetition
- Play integrates the senses
- Play forms the cognitive base for language

Children learn how the world works by figuring out how to interact with the objects and people in the world. Children play because they like to. They are not trying to learn a new skill, improve their motor development, or make connections but these all happen through play. Play is a natural way of learning. They learn patience, how to handle frustration and disappointment, how to persevere and cooperate and they learn to problem solve.

The turn taking that is learned while tossing a ball is the same kind of turn taking that is the basis for conversation. The act of doing versus just saying or telling reinforce understanding. Repetition is the hallmark of learning a new skill and children love to play the same game over and over again. Children are more likely to remember if they have heard, seen, touched, tasted, and smelled it.

Have Fun and Be Social

- Learn skills in a natural context
- Learn social rules
- Learn life skills
- Learn language skills
- Share joint attention
- Learn interaction skills

When parents take on the role of teacher, they sometimes get caught up in thinking that children are learning only when they sit at a table with flashcards. Play allows children to learn in a natural context. Children learn by acting out the experiences that see around them. Joint attention is a key skill to learning language and communication. They practice the language that they hear and the interactions that they encounter in their daily lives.

Stages of Play

- Exploratory play (0–10 months)
- Relational play (9–15 months)

- Functional play (9–15 months)
- Self pretend play (11–18 months)
- Doll pretend play (12–30 months)
- Sequence pretend play of familiar events (2–2½ yrs)
- Sequence pretend play of less familiar events (2½–3)
- Socio-dramatic play (3–5 years)

Early play involves exploration; waving, shaking, dropping, tasting, and banging. Next, babies begin to relate objects together and play functionally; stacking blocks, rolling the ball, pushing the car. Then they pick up the toy cup and pretend to drink, put the bowl on their head like a hat, or walk in mommy's shoes. They extend that play to dolls and toys, giving the baby a drink, putting the bear to bed. This pretend play begins to evolve to longer sequences of familiar activities such as pretending to cook the food, eat and drink, then pretending to do the dishes. Finally, preschool children enter into socio-dramatic play that involves other children and rules "you be the mommy and I'll be your baby, you can put me in my car seat and drive me to playgroup"

Let's Get Together

- Choose a time
- Choose a place
- Choose a partner
- Choose an activity

A play date is not just putting kids together in a room. It takes some careful planning in order for the social play to be successful. The time of day, the environment, the right partner (older, younger, a good language model) and the right activity are all important considerations. People games like hide and seek, tag, ring around the rosy are very social.

Games with rules like ball games, simple board games are also a sure hit. Sensory games such as play-doh, arts and crafts give children a common purpose.

Set the Stage for Play

- Define the play areas
- Close up large areas
- Create personal spaces
- Be aware of noisy areas
- Clear pathways
- Use complimentary toys

Some playrooms are just too busy and too full of toys to encourage language and social interaction. When you enter a playgroup environment you will see that the house area is separate from the art/sensory area and the block play area and so on. A wide-open space just encourages kids to run and is a sure setting for social clashes. Small personal spaces will allow two children to cozy up for some time to share a book or puzzle. Make sure the noisy “crash and bash” truck play area is not beside the music listening or book corner. Clear pathways allow for a number of interactions with different children and can avoid conflict. Using play-doh near the kitchen area can encourage the creation of imaginary food.

Look at your own toy room at home; is it busy with too many toys? Create play spaces by putting some toys away and organizing your toys to encourage interaction.

Playing in Pairs

- Easy to interact
- Brief interaction
- Table for two
- Games for two

It is less demanding to interact with one child rather than with a number of children. It is also an easier listening environment for the child with a hearing loss. Sometimes these interactions are brief but sometimes, twosomes can become best friends. A small table and a simple game or activity can encourage success for pairs.

Promote Peer Interaction

- The toy is the thing – provide duplicates
- Not too many, not too few
- Set up face-to-face interactions
- Shared understanding of themes
- Design collaborative tasks
- Step in, set up and fade out

So how do you promote the interaction between your child and another? Consider your child’s style, the other child’s style. Make sure that your child knows how to attend, participate, initiate and keep it going. Make sure that you have chosen a good time, place and partner. If you are providing toys, make sure that there are enough to go around: 1 dump truck + 2 kids = disaster. If there are too many toys, kids will spend their time exploring rather than interacting with each other. Too few toys can lead to disputes. Arrange materials so that kids are working across from each other in a “conversational” group.

In order to participate in a dramatic play centre set up as a restaurant, the children need to understand what a restaurant is and the appropriate roles for everyone in the restaurant. If a child has no experience with a restaurant, this will result in inappropriate interaction or the child may avoid this activity. Role-play the setting up of scripts for this type of play.

Sometimes assigning a collaborative task can result in good conversation and a chance for each child to take turns. You can participate in the play by taking a role or you can set up the situation and then let the play partners take over.

Play can lead to successful partnerships for language, listening and conversation.



Failure is Not an Option!



Eric Sieloff was born in Sarnia, Ontario, Canada in 1991. He became profoundly deaf at 19 months from meningitis. He received a cochlear implant shortly thereafter and joined the VOICE for Hearing Impaired Children Auditory-Verbal Program at North York General Hospital where the family received therapy for several years from Warren Estabrooks. Eric was mainstreamed in the Lambton County Public School system until 2004 when he and his family moved to Houston, Texas where he undertook a rigorous academic curriculum and graduated high school in 2009. He is now a freshman engineering student at the University of Tulsa in Oklahoma.

I am deaf. And even though I have used a cochlear implant for most of my life, I do not hear perfectly nor do I speak perfectly. The summer weeks prior to 9th grade were stressful as I remember. My mind was filled with questions. How difficult will it be to understand my teachers? How many of my classes will include lectures and will I be able to understand all that is said? How difficult will it be for me in the social situations of a school with almost 4,000 students? As a high school student I came up with communication and coping strategies I would like to share, as they made my education as a deaf student much more enjoyable and somewhat easier.

Accommodations: Be Proactive

Every year before the start of high school I got in touch with my itinerant teacher so that she could help me prepare for my first day of classes and she sure did! She helped me arrange meetings with each of my teachers where we discussed the accommodations that I would need to be successful. For me, these included instructing each of my teachers on how to use my FM transmitter, requesting preferential seating at the front of the classroom to help me with my lip-reading, asking for a note-taker for classes with long lectures, and requesting that closed captioning be used for in-class videos. By going in the week before school started I saved myself from having to ask for accommodations on a limited bell schedule and in front of a full class of students (something that I have never found easy to do).

Being hearing impaired puts one at a disadvantage compared to most others when we arrive at high school but never hesitate to ask for help; teachers love going out of their way to help their students succeed – if you can think of an accommodation that may help never hesitate to ask for it!

Go to Tutorials

When I didn't understand some of the information presented by my teacher in class I would always make an effort to go in for tutorials. I would go in for tutorials at almost every chance beginning in the 11th grade. At the time, I found my Advanced Placement Chemistry class

particularly difficult; however, by going into tutorials and receiving one-on-one instruction in a quiet environment, I was able to learn some once-difficult concepts in no time at all! As for tutorials, my philosophy has always been that you can always go home and spend hours studying the material and maybe understand it in the end, or you can go in for tutorials, ask the teacher to repeat themselves, and learn the same material in possibly 30 minutes or less.

My hardest class was always English, and I'm sure it is the same with many hearing impaired students. Most of my English classes consisted of a lecture for which I would use a note-taker, but the amount of information I had to try to comprehend seemed overwhelming at times. To make matters more difficult, my classes would sometimes have group discussions for which I could hardly follow the conversation at all. On the days there were group discussions I would go in for English tutorials after school and ask my English teacher what some of the important things to know from the day's discussion were. My teachers would always explain some of the main points from the discussion so that I could use them in essays, free responses, etc. I remember in particular my 11th grade English teacher always went into great detail if I needed her to – she never hesitated to help me understand anything! I could never really come up with any direct ways to benefit from class discussions, but fortunately they became less frequent as I got older. I always did all my work, read everything I was assigned (even overviews on the Internet and Spark/Cliffs Notes) to get ahead in order to compensate for classroom discussions.

Be Social

When I was 8 years old my parents enrolled me in piano lessons, and I continued taking them for almost 8 years. I must say that learning an instrument has been one of the greatest time investments I have made in my life thus far! Sure, it was more difficult for me to learn than a hearing child (as I saw myself in comparison to my brother) but it is possible! By learning an instrument I have become accustomed to a broader range of sounds, but even more exciting and probably to some peoples' amazement – I, a deaf teenager, can make

music with my own two hands! Once in high school I thought finding new friends would be difficult so, with my musical experience, I joined the marching band in the percussion pit where I played drums, marimba and other keyboards. High school bands and orchestras are excellent opportunities to meet new people: everybody is broken up into their individual sections according to instrument, and with the amount of time devoted to practices you get to know each other very well. I made several very good friends in band. I would also strongly recommend becoming a participant in some of the clubs your school has to offer. If there is a club that you might find interesting – join it! In 11th grade I was interested in learning sign language so I joined my school's Deaf Culture Club. Being the only deaf student in my school, the club sponsor was more than happy to have me there! I learned some sign language phrases and befriended everyone in the club. I had the opportunity to perform "Silent Night" in American Sign Language when we visited an all-deaf school, and until then I never realized how many others there were like me! I also joined the National Science Honor Society because of my keen interest in the science and technical fields. I found that joining clubs is a great way to meet new people because where else would you find people who have similar interests as you?

Going Forward

Beginning high school was very stressful for me as I thought I would fall behind my peers because of my hearing loss. However, as weeks

went by I realized that I greatly benefited from the things mentioned above and I had fewer worries about high school. With my hard work and the help of my teachers I learned what was taught and I was able to make many new friends. In May of 2009 I graduated from Clear Lake High School with honours and began to think about the next chapter in my life. In choosing a university, I wanted to keep my learning environment as much like high school as possible so I applied to several smaller schools as I believed I would have more chances to learn things one-on-one from professors. All through high school I was most interested in mathematics, chemistry, and human biology. I am now a freshman at the University of Tulsa in Oklahoma studying chemical engineering with a pre-med minor. I received several generous academic scholarships which made going to a private school more affordable for my family. At TU most of my classes are similar in size to high school and so I have been able to continue using my coping strategies. I have got to know my professors well – one has even offered me a summer research opportunity in the chemical engineering field!

I am deaf. I do not hear perfectly nor do I speak perfectly. But I have worked hard and developed some coping strategies that made high school a very positive experience. Now that I have started university, my future plans are still unclear but one thing I do know: success is my goal and failure is not an option!

feature

By *Vickey Hlady-McDonald*,
SLP, Auditory-Verbal Therapist

“TOYS for TALKING Project”: A Dream Brought to Life

Julie Eskra has much to be proud of. Over her career, she has been a founding member of VOICE for Hearing Impaired Children's London Chapter, worked with countless children with hearing loss following an auditory-verbal (AV) approach, and served on the implementation committee for the Infant Hearing Program in the Middlesex area. Her latest success is in bringing to life a dream held by London AV therapists Janet Henry, Vickie Hlady-MacDonald, and Margaret Louwerse: the creation of a toy-lending library for families who are new to the AV approach.

A member of the Retired Teachers of Ontario (RTO/ERO), Julie believed that children with hearing loss could benefit from the fundraising efforts of RTO/ERO. The “Toys for Talking” project's goal is to provide child-friendly toys and books suited to a range of developmental stages to families so that they can work directly with their child in the first months of intervention. Families are often faced with many pressures, including financial, during the initial months of identification and intervention when their child is diagnosed as having a hearing loss. This project should help relieve the burden.

RTO/ERO members have gone above and beyond to ensure that students have the materials necessary to achieve success in a society that increasingly demands high levels of communication skill and literacy.

London AV therapists and RTO/ERO volunteers will soon be creating kits, based on materials needed to teach the skills necessary for beginning listeners. In addition to the usual animal and vehicle toys, kits will contain a variety of toys for developing detection and localization skills, cognitive concepts, fine motor skills, and music appreciation. Additionally, age-appropriate books and reference materials for families will be included.

On May 11, 2010, RTO/ERO executive officially announced the project grant (\$4,000) and presented a cheque to Vickie Hlady-MacDonald. It was a special moment for Julie Eskra. The London community is thankful to RTO/ERO and members like Julie for their ongoing contributions and advocacy, which give children with hearing loss a voice for life.

It Takes a Village to Give Children with Hearing Loss a Voice for Life

The past 45 years has not only witnessed monumental advances in hearing technology, universal newborn hearing screening, the evolution of supports and services for children with hearing loss who are learning to listen and speak, BUT greater recognition of the auditory-verbal (AV) approach throughout Ontario.

Not so long ago, many families of children with hearing loss tripped over the AV option for their child. And once they did learn of it, it was most likely unavailable or unfunded in their community. Today AV is one of the funded communication options discussed with parents of newly diagnosed babies and it is the recommended intervention for children who become cochlear implant recipients.

Years ago, the educational options for children with hearing loss were limited to segregated settings. Today increasing numbers of children who are deaf or hard of hearing are learning to listen and speak, enter and succeed in their neighbourhood schools.

School board personnel are becoming familiar with the terms “auditory-verbal approach,” “auditory-verbal educator,” and “auditory-verbal therapy” as these have materializing in special education documentation and increasing numbers of boards are seeking teachers of the deaf with AV knowledge and skill.

The VOICE Auditory-Verbal Program has continually expanded to keep pace with the changing Ontario landscape and the needs of the growing numbers of children with hearing loss who are learning to listen and speak. The VOICE Therapy Program grew from AV intervention provided to a few families in two main centers to its current caseload of over 100 children receiving services province-wide from seventeen (17) **VOICE Certified Auditory-Verbal Therapists**. For the past 16 years, it has been my pleasure to work alongside the talented and dedicated team of VOICE therapists who provide outstanding support to VOICE families.

The shortage of skilled and certified AV professionals has been of great concern since the McGill graduate program in auditory/oral habilitation closed in the late 90s. VOICE has worked closely with Ontario universities, the College of Teachers, and the AGBell Academy for Listening and Spoken Language to ensure that professionals have the skills needed to support this growing population of students.

A number of recent developments aim to ameliorate the need for

specialized professionals:

- In 2006 The AGBell Academy began offering an additional certification track – **Auditory-Verbal Educators who are Listening and Spoken Language Specialists** supporting school age students
- The Ontario College of Teachers is currently developing a specialization program for teachers of the deaf to enhance their skills in supporting student with hearing loss that listen and speak
- The University of Ottawa is launching a certificate in auditory-verbal studies in the summer of 2010

In the early 90s, to ensure that every VOICE chapter had access to local AV therapy by a certified professional, VOICE actively fundraised and launched the AV Training and Mentorship Program.

Today, the Ministry of Education has recognized the outstanding outcomes of children who have learned to listen and speak through an AV approach as well as VOICE's expertise in training professionals who provide services for these students. As a consequence, the ministry has provided VOICE with funding to train teachers of the deaf or speech-language pathologists, towards certification as auditory-verbal educators, in 23 school boards throughout Ontario.

In addition, VOICE mentors are providing AV training and supporting the development of skills of speech-language pathologists who provide services through the Provincial Infant Hearing Program in three different regions of Ontario.

VOICE has expanded its professional development offerings which include a yearly conference as well as workshops for professionals in the field of deafness, school teams, classroom teachers, and support staff.

Results of studies conducted by The University of Ottawa and the Children's Hospital of Eastern Ontario identified the factors which

contribute to the success of students with hearing loss who are mainstreamed in their neighbourhood school. These included

- Early identification of hearing loss
- Access to auditory-verbal therapy
- Parental and community involvement
- Trained teachers of the deaf

Over the years VOICE has focused on ensuring that these programs

are in place so that children with hearing loss can realize their potential alongside their hearing peers.

Children who are deaf or hard of hearing require the collaboration of a dedicated team to help them succeed. In Ontario, VOICE families and professionals have developed a strong coalition which has laid the foundation for the development of highly regarded AV intervention and training programs. It does indeed take a village to **give deaf children a voice for life.**

feature

VOICE Programs Featured in Two New Publications

The VOICE Auditory-Verbal Training and Mentorship Program is recognized as a prototype program for successful mentoring in the upcoming *Volta Review* monograph titled, “**Professional Preparation for Listening & Spoken Language Practitioners.**” This journal highlights a critical issue facing the field – the shortage of well-qualified professionals who can facilitate listening and talking in children with hearing loss. The purpose of this monograph is to showcase the excellent training programs currently available as well as to emphasize the critical need for more well-trained professionals. The VOICE training program is featured in the article: “**A Survey of LSLS Cert. AVTs Who Mentor: Fostering Independence to Endow the Future**” by Helen M. Morrison, PhD, CCC-A, LSLS Cert. AVT, Christina B. Perigoe, PhD, CCC-SLP, LSLS Cert. AVT, and Anita Bernstein, Sp Ed, MSc, LSLS Cert. AVT

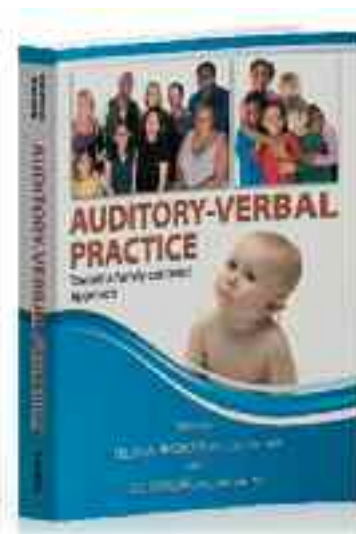
This resource will be available in the VOICE library in August 2010

Families who learn that one of its members has a hearing loss will experience varied reactions. To best serve these families, practitioners must provide family assessment, support, and information. In a newly published text entitled *Auditory-Verbal Practice: towards a Family-Centered Practice*, editors Ellen A. Rhoades and Jill Duncan examine the theoretical and practical bases of family therapy models and the importance of providing support to all members of families. The editors present essential family therapeutic strategies that are needed to effectively work with families and objectively examine current auditory-verbal practices and various ethical issues. Varied family-based intervention models are discussed, with the family-centered approach considered the ideal to which practitioners aspire. Chapter

10, *Supporting Families*, written by **Anita Bernstein**, VOICE’s **director of therapy and training** and **Alice Eriks-Brophy**, **associate professor at the University of Toronto and past VOICE board member**, identifies the specific needs of varying family and extended family members and provides tips for supporting them and encouraging their collaboration in raising a child with a hearing loss. VOICE’s parent support programs, including weekend camp, educational conferences, on-line chat group for parents and teens, multicultural outreach, etc. is featured as one of the models of comprehensive family support networks.

This resource is published by Charles C. Thomas publishers, www.ccthomas.com and a 20% discount is being offered if ordered on line before October 1, 2010 with the order code: **RHOA-0610; ISBN 978-0-398-07925-3 (hard copy) or ISBN 978-0-398-07926-0 (paperback).**

This resource will be available in the VOICE library in July 2010.



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