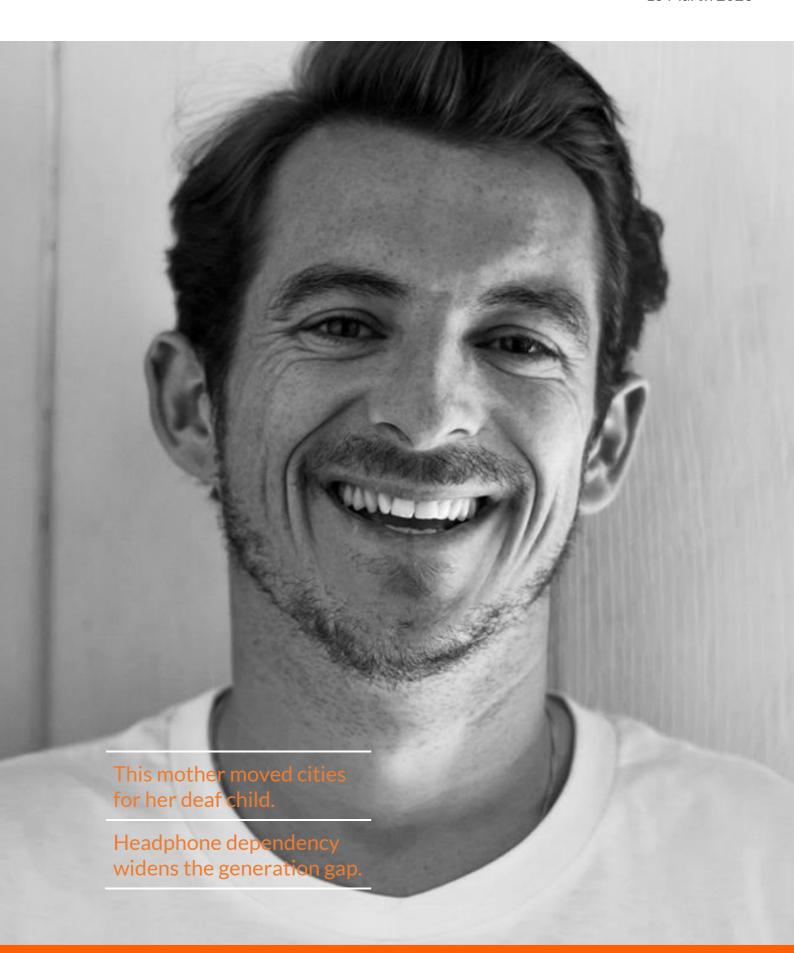


oneinsix

15 March 2023





A lack of staff, adequate support and resources in Victoria's regional and rural areas means some deaf students aren't receiving enough support to ensure they get a good education.

Dr Kaye Scott, chair of the National Association of Australian Teachers of the Deaf said there were patches of excellence in deaf education, but most teachers would agree some students were being let down. She said location often determined whether students received the support they "desperately need to develop skills commensurate with their peers".

Victoria has three government schools for the deaf and 16 state schools with deaf facilities. Those with hearing difficulties who can't attend those schools have the option of attending a mainstream school, where a specialist teacher will visit to provide specific support for their needs. However, in regional and rural schools, those visits might only happen fortnightly.

Raquel Pantelic has a seven-year-old child, Zveki, who is deaf. She said Victoria was "100 per cent failing deaf students".

Originally from Colac, Pantelic moved to Melbourne when Zveki was one because her home town lacked childcare centres and schools that catered properly for deaf education. Zveki is now seven and uses Auslan. "There's a real lack of knowledge around deaf needs and what needs to be in place for a child to thrive," she said.

Deaf Victoria's Philip Waters said: "Can you imagine, as a 10-year-old who cannot communicate in a variety of scenarios, having to wait two weeks at school for a teacher who can understand them? It is too little and does not make much difference."

Bianca Oldham, whose 16-year-old son is deaf, said qualified Auslan interpreters often chose highly paid freelance work rather than teaching, a role that wouldn't pay as much.

"The teachers of the deaf are asking my children what the sign for things is. It shouldn't be that way. They should be fluent," she said.

A three-year research project has been launched to connect services, collect national data, find funding gaps and assess outcomes for deaf and hard-of-hearing children.

Valerie Sung, associate professor at Murdoch Children's Research Institute, launched a national registry for child-hearing-health outcomes last month, which will focus on students in Victoria and Queensland first.

"Everybody who works with these children has recognised there are inequities in outcomes; that's why there is so much work that needs to be done in this area."



A family experience with deafness helps shape early childhood education plan.

From an article by Katina Curtis for <u>The West</u> <u>Australian</u>



Anne Aly with her son Adam as a toddler and today (at right).

When Anne Aly was a young, first-time mother, a childcare educator pulled her aside to suggest she take her son to a doctor because they were worried he wasn't interacting with the other children in the usual way.

She did, and discovered a series of chronic ear infections had led to Adam having profound deafness which needed surgery to fix. The surgeon told her the toddler was lucky not to have any long-term damage because if the problem had been left longer it could have resulted in permanent hearing loss.

"As soon as Adam's hearing was fixed, he started talking and he's not shut up since. He became dux of his school. He was reading by the time he was three."

"And if it hadn't been for (early childhood educators) picking up that in Adam, he may well have gone on to have permanent hearing loss."

She says the experience highlighted to her how central early childhood education was to a child's development and entire lifetime.

Dr Aly, living in Perth, is the Commonwealth Minister for Early Childhood Education and Minister for Youth in the Albanese ministry.

Dr Aly and Social Services Minister Amanda Rishworth are jointly developing an early years strategy across the Government. The Strategy will help the Commonwealth create a more integrated, holistic approach to the early years and better support the education, wellbeing and development of Australia's children. It will seek to support improved coordination between Commonwealth programs, funding and frameworks impacting early childhood development.

People working in the sector, researchers, doctors, parents, Indigenous representatives and policymakers will help create the strategy over the next 18 months.

"We have a huge opportunity here to really change a child's trajectory," Dr Aly said.

"My son is an example of that. But there are possibly millions more examples out there."

Their vision is to end the silos of policy areas — health, education, social services, Indigenous supports — and take a holistic approach to the way children and their families are supported during the first five years of life.

Investing in the early years would go a long way to fixing big problems like entrenched disadvantage and inequality.







Researchers simulated a restaurant in a sound booth with adults over the age of 60 with varying levels of hearing loss.

No surprise, they found that in certain levels of background noise, the speakers raised their voices, reported increased communication disturbances, and described less willingness to spend time and money in the restaurant.

These negative outcomes occurred due to a cycle of bothersome noise generated by the Lombard effect, which is the unconscious tendency to increase one's voice in a noisy environment.

In restaurants, patrons act as sources and receivers of noise, which results in a noisy environment that is challenging to manage. The researchers concluded with two main findings:

- 1) that the negative cycle of the Lombard effect is reduced when background noise is less than 60 dB(A), and
- 2) that restaurant owners should try to keep their background noise levels between 50-55 dB(A) to be inclusive of older adults with hearing loss, allowing them to understand the speech of their dining partners.

Given the fact that restaurants have a variety of noise sources - kitchen noise, background music, patrons' conversations, etc. - it can be hard to achieve background noise between 50-55 dB(A).

Yet, background noise in restaurants is a well-documented problem and has been rated the most irritating component of dining out.

Acoustic recommendations

The negative cycle of noise in restaurants can be eliminated when the level of the background noise remains below 60 dB(A). There are three main ways to achieve this level of noise:

Acoustical capacity. We have all seen signs in public spaces stating the required maximum capacity. These are safety-standards based on the physical size of the room. However, for restaurants aiming to provide a positive dining experience for their patrons, another relevant consideration should be acoustical capacity.

Acoustical capacity considers the number of people within a restaurant, as opposed to its physical size and effectively limits the number of talkers within the restaurant at a given point in time, which results in a reduction in background noise.

Restaurant owners may not be enthusiastic about reducing the number of people who can eat at their restaurant. But given the fact that irritating noise in restaurants is directly linked to the number of people seated, having an acoustical capacity limit is a strong way to improve the dining experience.

Absorbent materials. A more realistic acoustic treatment for restaurants is installing absorbent materials on the ceilings. This approach to



reducing background noise is more common than adhering to an acoustical capacity, and although it may not result in the lowest levels of noise, it is a viable option for restaurant owners.

Suspended acoustic ceiling baffles absorb bothersome noise in restaurants. These baffles hang vertically to scatter sound that decreases speech intelligibility between talkers/receivers.

Screens. Another practical option is installing screens between tables. The screens increase customers' privacy and reduce their volume levels by increasing the spatial energy decay.

Where to start?

We recommend that restaurant owners collaborate with acoustical consultants early when designing, renovating, or refurbishing their businesses.

Acoustical consultants are engineering firms specialising in acoustics, vibration and noise control. They provide acoustical consulting services in areas most affected by noise and vibration issues – architectural, environmental and industrial workplaces. Learn more at:

- Association of Australasian Acoustical Consultants, https://aaac.org.au/
- Australian Acoustical Society, <u>https://www.acoustics.org.au/</u>

A proper sound treatment may contribute about 5%-10% to the total cost of renovation, which is a small expense to eliminate customers' irritation stemming from noise.

Some Michelin-starred restaurants are among the eateries with the lowest background noise levels, as their design process considered the acoustic experiences of their patrons, resulting in easily intelligible conversations and customers who are willing to spend long periods at the dining table. Acoustic consultants contributed to the design of these top-tier eateries, but they are also available to support any restaurant owner with a desire to facilitate positive dining experiences in their space.

The Hearing Journal <u>76(02):p 6,7, February 2023.</u> DOI: 10.1097/01.HJ.0000919792.64838.c1







In Shakespeare's *Romeo and Juliet*, Juliet famously asks, "What's in a name? That which we call a rose by any other name would smell as sweet." She wonders how the name someone has can define them, rather than the characteristics of the person instead.

This seems logical enough—a name is just shorthand for describing an actual object or state of being—but when it comes to disability, a name can take on significant meaning.

The language of disability is constantly evolving.

Historically, disability was discussed within a medical model. Doctors discussed people's inability to do something that a "normal" body could do—whether that was walk, hear, see, or whatever. It was a "dis" ability, "dis" meaning apart or asunder in Latin.

The medical model transitioned into personfirst language as in "a person with a disability" or "a person with hearing loss," stressing that the person comes first and the disability second.

Recently, identity-first language has become popular—for example, "I am disabled." This assumes that the person part is a given and implies membership in a community of others with that same disability. Many people feel empowered when using this type of language.

For hearing loss, identity-first language is complicated by the Deaf community, which has defined Deafness to include using sign language to communicate. For "deaf" people who don't sign or who aren't culturally deaf, the word doesn't seem to fit, leaving us without a oneword descriptor that reflects our state of being.

What you call yourself may change as your feelings shift

Our own use of language may change over time as we become more accepting of our disability. Often the path goes through the medical model, to person-first, and finally into identity-first, as we discover a community of others like us.

Before I came out of my hearing loss closet, I referred to hearing loss only when absolutely necessary, saying something like "I don't hear well." Now I typically say, "I have a hearing loss," or "I wear hearing aids." Occasionally, if I want to have more impact, I will say "I'm a little bit deaf." That really gets people's attention, perhaps because deafness is seen as more serious. Because of the cultural associations of using the word deaf (Deaf), I find it difficult to use the term regularly—primarily, because I don't want to give a false impression that I use sign language.

Evolution in language makes it challenging to know what to say sometimes. This lack of conversation makes disability a stigmatized unmentionable. When people know the right words to use, it makes it easier to have a talk about disability, which in turn makes it simpler to create workarounds when needed and to provide a more inclusive environment.

From <u>Psychology Today</u>. Copyright: Living With Hearing Loss/Shari Eberts. Reprinted with Shari's kind permission.







Australia's high level of untreated hearing loss.

The first results of a major study into hearing loss in Australia are in - and if you are over 50, you should probably book a test. Nearly half the people screened in the first rounds of the Australian Eye and Ear Health Survey who said they did not have a hearing...



Hearing Australia Marrickville centre officially opened.

Prime Minister Anthony Albanese and Bill Shorten, Minister for the National Disability Insurance Scheme and Minister for Government Services, have officially opened the Hearing Australia centre in Marrickville, NSW. They met with staff and clients and saw first-hand...



Hearing change-makers: stories for World Hearing Day.

The World Hearing Forum (Deafness Forum Australia is a member) has launched a website under the banner 'Ear and hearing care for all!'. The website contains powerful stories of high-profile supporters and everyday changemakers people from around the world living...

Our recommendations to the Australian Government.

1/. Closing The Gap: Aboriginal and **Torres Strait Islander Peoples in the** criminal justice system.

Our justice system is ineffective in addressing the complex needs and vulnerabilities of Aboriginal and Torres Strait Islander peoples. We must put a stop to the perpetual cycle that exists between childhood ear disease and the disproportionally higher rates of incarceration.

Read our recommendations.

2/. A national program to support families and children in their journey from diagnosis to engagement with an appropriate specialist service.

The Government can create a program of working with families to link them to diagnosis, device, and funding programs, while guiding them on to an evidence-based specialist early intervention service that meets their needs and reflects their choices. It will be delivered in a family-centred manner to support families during a vulnerable time, while ensuring they have choice and control throughout the process.

3/. Addressing the burden of hearing loss among vulnerable groups.

The Australian Government's Hearing Services Program should ensure that vulnerable groups, those requiring specialised programs, and people on low income have access to highquality hearing services at no or low cost. In order to do so, the eligibility of the Program should be extended to include people on a Health Care Card, or Low-Income Card, Seniors Health Care Card holders, children of refugees, people in the criminal justice system, and people in aged care.

Read Deafness Forum's recommendations.

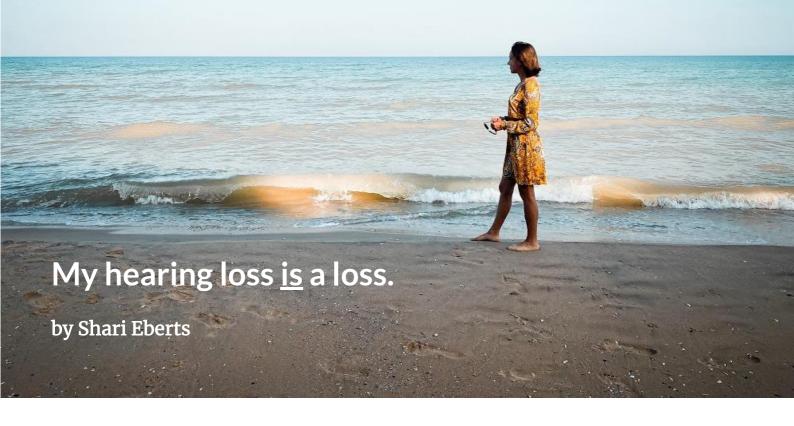
4/. A new and better way to help people in Aged Care with their hearing needs.

Residents of aged care facilities have complex needs and research has shown that they require a different model of service delivery than is currently available.

Read our recommendations.







Someone recently asked me why I use the term *hearing loss* in my advocacy work. I can't remember if they preferred deaf or hard-of-hearing or some other term, but they took offense at my use of the word "loss."

It's a fair question, and a personal one since we experience hearing difficulties in our own way.

People born with hearing loss may not perceive hearing loss as a loss because, as one person said to me, "How can you lose something you never had."

Some people proudly associate themselves with Deaf culture, using sign language to communicate. Others embrace deaf gain—the idea that deafness is a positive in their lives.

But for me, the term hearing loss feels right because for me, hearing loss is a loss.

I first noticed my hearing loss in my mid-20s. Pretty quickly into the first semester I began missing things in class—a comment that was made as an aside or under one's breath. Sometimes the entire class would burst into laughter, and I would be left looking around trying to figure out what was so funny.

For me, it was a deep and powerful loss:

- A loss of freedom to converse
- A loss of confidence that I could walk into class and participate fully without accommodations
- A loss of energy because understanding speech now took so much work.



For Shari Eberts, living with hearing loss is a challenge, but there are silver linings.

Yearning for the ease of communication that had once been mine, I battled stigma, keeping my hearing loss a secret from everyone. This prevented me from asking for the assistance I needed.

Eventually I began wearing hearing aids, but it wasn't until I met other people with hearing loss that I felt less alone with my struggles. I learned





that I didn't need to shoulder my hearing loss all by myself.

Over time, I began to self-identify and ask for the assistance I need.

Today, acceptance and self-advocacy help me to live my best life, despite the challenges of hearing loss.

Living with hearing loss is a challenge, but there are silver linings. Perhaps these are part of the deaf gain experience others describe. The first is meeting people I would not otherwise have met.



But there are silver linings!

My hearing loss peers have become trusted friends and an incredible support network and they make my life richer.

I have developed greater empathy for others. Hearing loss is invisible, as are many conditions. I hope people will offer me compassion and grace when I struggle and I try to give others the same benefit of the doubt. You can never understand all that a person is facing just by looking at them.

Hearing loss has given me purpose. Every time I self-identify at a movie theatre or ask for captions on a webinar, I am advocating for us all. The same is true for your efforts.

Despite the silver linings, there are times when I feel the loss of my hearing keenly. Like when I miss the punch line of a joke or feel exhausted at the end of a long day of meetings. Or when my tinnitus acts up and I notice my family reminding each other to speak up so I can hear. I might feel guilty or tired or sad. Thankfully, the loss is one that I have learned to accept.

From the <u>Living With Hearing Loss</u> blog. Connect with Shari on Facebook and Twitter

Kate invented an ewhistle.

Kate is a young New Zealander. She invented a device that helps people with a hearing impairment play team sports.



The e-whistle gives an electronic signal when the whistle is blown. Her innovation is a brilliant tool for inclusion. It will allow people with hearing loss to better participate in sports.



Watch the video





Prime Minister Anthony Albanese and Bill Shorten, Minister for the National Disability Insurance Scheme and Minister for Government Services, have officially opened the Hearing Australia centre in Marrickville, NSW.

They met with staff and clients and saw first-hand the services Hearing Australia delivers to the local community and to children and adults under the government's Community Service Obligations (CSO) Program.

The centre supports around 2,000 clients each year, with 35 per cent of clients eligible for government funded services under the CSO Program. The dedicated team also provides outreach services to Norfolk Island and to First Nations peoples in Redfern, La Perouse and the Northern Territory.



"Good hearing is essential to keep us connected to our friends, families and communities.

"It's important that anyone who has concerns about their hearing takes action and talks to their doctor or an audiologist to get a hearing check."



The Prime Minister highlighted the importance of the world-leading Australian Government Hearing Services Program, which continues to support thousands of pensioners, veterans and eligible adults across Australia every year.

The Prime Minister and Minister Shorten also spoke with Hearing Australia staff at the centre about the services provided to First Nations clients, as well as the organisation's commitment to improving the hearing health of First Nations communities across Australia.



Newborns begin language processing just hours after birth.

Babies appear able to successfully differentiate speech sounds shortly after being born, according to research published in Nature Human Behaviour.

Researchers from Bangor University (Wales) collaborated with researchers in China for this study of newborns at Peking University First Hospital.



Researchers examined the neuroplastic changes to the brain caused by five hours of postnatal exposure to random recorded sequences of vowels. They repeated the assessment two hours later. Babies in the experimental group heard the same stimuli both times while the other two groups were either trained with different vowels or experienced silence.

After five hours, researchers noted that the experimental group started differentiating between the forwards and backwards vowels*. Their response to forwards vowels became faster than to backwards vowels—and that response appeared to strengthen after two hours, as compared with the other two groups.

"Newborns probably benefit directly from being talked to from the very first moments they have left the womb," says study author Guillaume Thierry, professor of cognitive neuroscience at Bangor University. * The mouth and tongue movement is vital when we pronounce a word with vowels in it. Speaking such words requires our tongue to move forward and backward. The letters which need a forward movement are known as Front Vowels, whereas those letters which require backward movement are known as Back Vowels.



Speech intelligibility and classroom acoustics in schools.

Good verbal signals and low background noise are key factors for all children to maximise understanding of what is being taught.

Classroom shape, surroundings, and even furnishings change how the environment "sounds" and how speech is "heard" in the classroom.

Classroom acoustics is perhaps one of the most important, but often least considered, factors when designing a classroom.

A recent review highlighted the negative effect on intelligibility associated with poor transmission of the speech and poor classroom acoustics caused by long reverberation times and high background noise.

Good classroom acoustics is needed to improve speech intelligibility and, therefore, increase children's academic success.

From AshaWire





Headphone dependency widens the generation gap.

There has been a lot of talk about how the streetscape of our towns and cities, not to mention our workplaces, have drastically changed since Covid lockdowns.

But the biggest change is the silence.

It is not that we have suddenly become a more reserved country, or even that we have been struck dumb by the slew of problems that are confronting the nation and the world right now.

No, it is the ubiquity of a generation of digital natives listening to devices in their ears that put them at one step removed for everyone else.

They split into two distinct groups - those sporting little white cordless earbuds and those more flamboyant types in outsized headphones who could easily be mistaken for a 1970s DJ fresh out of the radio studio.

Both, though, are relying on wireless and Bluetooth connections to funnel sound into their ears and cut out the voices of those around them - and by association eschewing any connection with others as they go about life utterly closed in their own separate world.

We are, in short, and in short time, becoming a headphone nation.

Whether it be on public transport, in a shopping centre or in the middle of a bank of desks in the

office, a sizeable slice of the 25 to 40-year-old working population is, thanks to their headphones, with us but not with us: no chatter in the sandwich queue; no rows over pushing in; not even a flicker of recognition and a meeting of eves.

For those like me whose heads are unadorned by any tech, it can feel like walking on to the set of some dystopian sci-fi drama.



And you have to have your wits about you.

Danger lurks – from the millennials cycling or e-scooting along with the headphones on, eyes open but minds firmly in another reality; or for the pedestrians halfway through a conversation





relayed through pods or headphones and prone to stepping into the traffic at any moment because they are blanking out those fine-tuned skills an older generation has developed to listen out for traffic approaching from your blindside.

"It can widen the generational gap," says Cristina Odone, head of the UK's family policy unit at the Centre for Social Justice.

"When millennials spend so much time with these big headphones over their ears, it sends out a clear message that they are choosing to be in a world of their own."

And that, she adds, excludes everyone else, including their own families. As I have been finding with my own children who, when they are home, can effortlessly disappear inside their headphones while I am still talking to them, especially if I am saying something they don't want to hear.

"It is all another feature of our increasing social isolation," warns Odone.

And the past decade has seen phenomenal growth in headphone sales. While the small, white earbuds remain popular, the real boom is with the larger headsets. You can get cheap imitations online, but among PCMag's latest top recommendations you will struggle to find anything under \$200, with branded versions going for considerably more and top-of-the-range stretching into four or even figures.

Perhaps it is not just the physical damage to ears that should be worrying us. It's the less obvious cost of the social and human obstacles they are creating, says Julia Samuel, psychotherapist, bestselling author and presenter of the Therapy Works podcast.

Headphones, she believes, have the potential to damage the emotional growth of those whose daily ritual as they leave the house is to put them on precisely at the moment when they could be engaging with the world.

"They are placing a barrier in the whole interactive and interweaving between mind and body," she says.

"They limit the amount of input wearers are getting from outside."

They can cause, she worries, "a deficit of connection with those around you and leave you a little emptier and a little chillier".

It is all about headphones breaking human connection — in families, in the street, in the workplace, in communities, in society.

"There is a clear risk involved," says Samuel.

"Retreating into a solitary world with your headphones may seem like a calm refuge, but as human beings, we co-regulate. We need to connect with others to keep us calm. Being isolated leaves many of us in a heightened state of anxiety."

Yet in the widest sense, in that curious but noticeable silence that is descending on what once were noisy, vibrant public spaces, there is something essential and elementary at stake, says Samuel.

"We are tribal beings. We are all about connection, and headphones break connection."

By Peter Stanford writing for STUFF NZ







Deafness Forum Australia board member Rae Walker is pictured with Dr Stephen Rodrigues. He was awarded the Dr Harry Blackmore Award at a World Hearing Day event in Perth hosted by Telethon Speech & Hearing and Deafness Council of Western Australia.

Stephen Rodrigues has been an Ear, Nose and Throat department head at Royal Perth and Princess Margaret hospitals.

As Chair of Training (WA) for Otolaryngology, Head and Neck Surgery he has been a leader in developing Western Australia's next generation of ENT surgeons.

As convenor of Cochlear Clinical Skills Institute he imparts his knowledge to audiologists and surgeons throughout the Asia Pacific who have a cochlear implant focus.

Through publications and involvement in teaching he is sharing knowledge that continues to raise the level of awareness of issues that affect Deaf and hard of hearing people.



Information Sessions

What Australia told us!

The Disability Royal Commission will share what we heard from Australians with lived experience of violence, abuse, neglect, and exploitation.

16 March, Brisbane



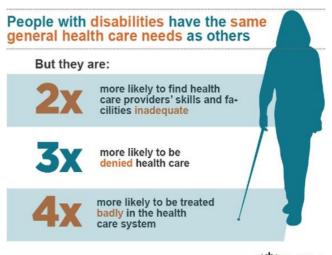
The Disability Royal Commission will deliver a final report to the Australian Government in September.

In the meantime, the Royal Commission is holding information sessions titled What <u>Australia Told Us!</u> to share the major themes that it heard from the community.

The information sessions will be face-to-face events held in each state and territory, and will update the community on the DRC's work to date, including:

- How people engaged with the DRC
- Ways people shared their experiences
- What they learnt from people who participated in private sessions and submissions
- How people can stay informed

Registration is open for sessions in **Brisbane** (16 March), Perth (28 March) and Hobart (28 March).











Information products for students with disability and their parents and carers

These resources have been designed by students with disability and their parents and caregivers.

They are designed to help you:

- understand your rights as a student with disability, or the rights of your child.
- work with education providers to make sure you can learn and participate on the same basis as students without disability.

The content was checked by students and their families and by disability organisations and education authorities. The resources were funded by the Australian Government.

Each information product is available in **Easy** Read English and Auslan.

There are also versions translated into the languages of our communities.

From https://www.education.gov.au/disability- standards-education-2005/students/english

Are you eligible for a free hearing aid from the Government?

Download and read 'How do I apply for free hearing services?'

You can check your eligibility. But if after using the checker you found that you are not eligible, but require assistance, there is information on how to request a reconsideration of a decision.

For all inquiries, hearing@health.gov.au Visit the Hearing Services Program website.

Connect, collaborate, impact. ®

Now is the time to join Deafness Forum Australia to support our advocacy in 2023.

You can download a membership application form here.

Know someone who deserves their own copy of One in Six?

Drop us a line at hello@deafnessforum.org.au

Our website is a rich source of information,

www.deafnessforum.org.au

Items in Deafness Forum communications may include terminology or summarise views, standards or recommendations of third parties. which are assembled in good faith but do not necessarily reflect our views or indicate commitment to a particular course of action. Some content derived from sources may contain ableist terms, and some may not be accessible to all audiences. We make no representation or warranty about the accuracy, reliability, currency or completeness of any third-party information. We want to be newsworthy and interesting, and our aim is to be balanced and to represent views from throughout our community sector, but this might not be reflected in particular editions. Articles may be edited for accessibility, style and length. Contact us to receive this publication in an alternative file type.



