



New member of parliament kept disability secret for fear of the stigma

"It is a wonderful example for the welcoming character of Australians that my electorate has sent a woman born in Hong Kong to speak for them in the Parliament." The successful small business owner and speech pathologist revealed how as a teenager she discovered she was deaf in one ear. "Having a disability can be a shameful thing in the Asian culture so I didn't tell anyone," she told the chamber.

Australian Hearing is Hearing Australia

Why change the name and why now? What does it mean for the organisation, the Community Service Obligation program, and hearing services under the NDIS?

We asked Hearing Australia's Managing Director Kim Terrell.



Thanks to Liam, there are 100 new sign language words for scientific words

Liam McMulkin was anxious about being able to keep up a college workload. Since he was also the only deaf student at the university, he also feared that he would have trouble keeping up with the course lectures. So he developed a whole new set of sign language words for himself and future life sciences students.

Disability Royal Commission

The Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability is now accepting submissions.



We acknowledge the traditional owners of country throughout Australia, and their continuing connection to land, sea and community. We pay respect to them and their cultures, and to elders past, present and future. We acknowledge the challenge of overcoming high levels of ear health issues among first nation people and its role in Closing the Gap.

People with disability subjected to isolation, exploitation, violence and abuse in institutions. We thank the Australian Parliament for its bipartisan support of a Royal Commission into the evil committed and being committed on people with disability.

New Liberal MP: "Having a (hearing) disability can be a shameful thing in the Asian culture so I didn't tell anyone"

By Rosemary Bolger for SBS News

The first Chinese-Australian woman elected to Australia's lower house, Liberal MP Gladys Liu has revealed she kept a disability secret for fear of the stigma in Asian communities.



Gladys Liu delivers her maiden speech in the House of Representatives at Parliament House. AAP

Delivering her maiden speech in Parliament on Tuesday night, the Hong Kong-born MP reflected on her experience as a migrant woman.

"It is a wonderful example for the welcoming character of Australians that my electorate has sent a woman born in Hong Kong to speak for them in the Parliament," she said.

The successful small business owner and speech pathologist revealed how as a teenager she discovered she was deaf in one ear.

"Having a disability can be a shameful thing in the Asian culture so I didn't tell anyone," she told the chamber.

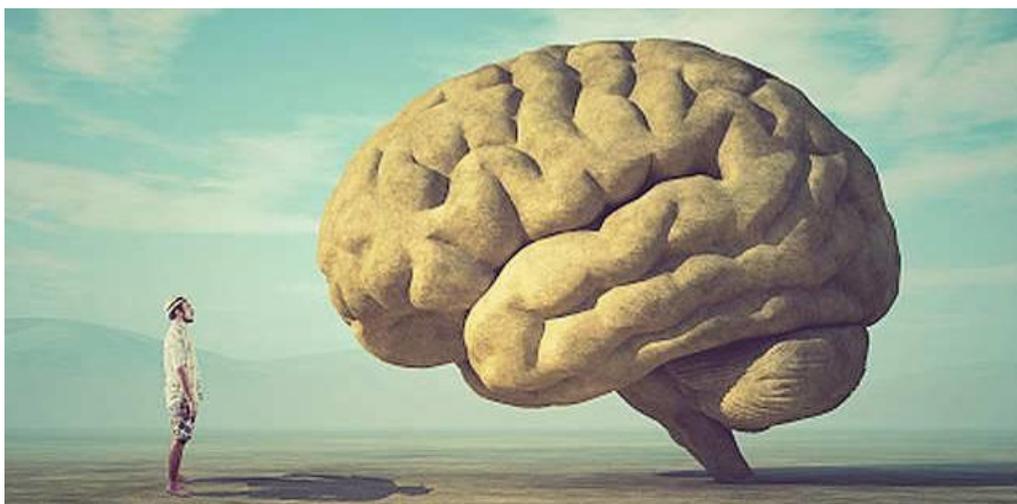
When she did not hear people speaking to her on her left side, she said she was labelled "snobbish, not cooperative and simply rude".

"I suffered in silence. It's only in recent years that I have realised that in Australia you don't have to suffer in silence."

<https://www.sbs.com.au/news/i-suffered-in-silence-gladys-liu-reveals-how-she-lived-with-a-secret-disability>

Will a hearing aid protect your brain?

Nina Massey writing for News.com.au



A new study suggests that wearing a hearing aid for age-related hearing problems is better for maintaining brain function than not wearing one.

Researchers say their findings provide early evidence that encouraging people to wear an effective hearing aid may help to protect their brains and reduce their risk of dementia.

The research was conducted by the University of Exeter and King's College London. In an online study, two groups of people - those who wore aids, and those who did not - undertook annual cognitive tests over two years.

The group who wore hearing aids performed better in measures assessing working memory and aspects of attention than those who did not.

On one attention measure, people who used the devices showed faster reaction times - in everyday terms.

This, scientists say, is a reflection of concentration, for example, straining to hear a sound, peering closely at an object of great interest and listening intently to someone speaking.

Professor Clive Ballard, of the University of Exeter Medical School, said: "The message here is that if you're advised you need a hearing aid, find one that works for you. At the very least it will improve your hearing and it could help keep your brain sharp, too."

Data was taken from the PROTECT online study of 25,000 people aged 50 or over.

<https://www.news.com.au/world/breaking-news/wearing-hearing-aid-may-protect-brain/news-story/223023a2cbb5eb335d61701a7f1cd8ef>

Australian Hearing is now Hearing Australia

Why change the name and why now? What does it mean for the organisation, the Community Service Obligation program, and hearing services under the NDIS? We asked Hearing Australia's Managing Director.

Kim Terrell: We have changed our brand as part of our commitment to improve our services to our clients, to government and to the communities we serve.

Hearing Australia will build on our wonderful legacy of supporting Australians with hearing loss and providing world leading research and services. In brief, our new brand better reflects who we are and what we do. It will make it easier for people to find and access the hearing help and support they need.



Our new brand is a highly visible symbol that we are deeply committed to increasing the impact of our work across Australia.

Over the past year or so, we conducted extensive research which showed that our old brand wasn't resonating with people – it didn't help them understand who we are and what we do.

We also learned that our clients want us to deliver more personalised services and provide them with better information about hearing loss and how we can help them.

The research clearly showed that we needed to change our brand.

We also wanted to have a call to action for people to recognise the importance of hearing and celebrating the sounds they love. We hope this helps break down some of the out-dated perceptions of hearing loss.

In addition, we wanted to rebrand our online information and supporting material to make it much easier for people to learn about hearing loss and to get guidance on taking action and prevent hearing loss in the first place.

In short, we hope this helps people take the first step to get the information and guidance they need to get help for themselves or their loved ones.

One in Six: Were there other reasons for the name change, for example the poor publicity you received around a recent investigation into audiology by Australian Consumer Competition Commission?

Kim Terrell: Not at all. There is absolutely no connection between the rebranding and the concerns raised by the ACCC last year. In fact, our work on our rebrand commenced well before the ACCC raised its concerns. I should also note that we publicly acknowledged and addressed these issues last year.

One in Six: Is this name change positioning the organisation for privatisation?

Kim Terrell: No, there has been no change to our ownership. We remain a statutory body established under the *Australian Hearing Services Act 1991*. All that has changed is our trading name.

We also remain deeply committed to providing world leading research and hearing services for the wellbeing of all Australians. This includes increasing our efforts to prevent hearing loss arising in the first place.

Furthermore, we will continue to support children and young Australians, Aboriginal and Torres Strait Islander people and adults with complex needs, through the Government's Community Service Obligation program.

As a final point, I'm really pleased to announce that we have commenced the implementation of the Government's \$30m Hearing Assessment Program to reduce hearing loss in Aboriginal and Torres Strait Islander children living in regional and remote locations across Australia. This is a significant national initiative which will be delivered in partnership with the Department of Health and local community health partners.



One in Six: Does the name change signal your intention to enter the private market? Do you have any other plans to diversify in order to remain competitive?

Kim Terrell: We already provide help to clients who do not qualify for government funded hearing services. All adult Australians can have a free hearing check at any of our over 600 locations or on one of our buses that regularly travel to urban and regional areas. We also provide online and phone support with hearing professionals.

We will also continue to look for new ways to make it easier and more convenient for Australians to get the help and information they need, and to prevent hearing loss from happening in the first place. This is particularly important in areas where there is limited access to services.

One in Six: Hearing Services will be moved to the National Disability Service in mid 2020. What about Hearing Australia's role with services to children in the NDIS and the future of the remaining components of the Community Service Obligation program from July 2020?

Kim Terrell: As many of your readers know, we have delivered the Community Service Obligation program on behalf of government for over two decades.

The Program is widely recognised and supported and, in 2018-19, we helped some 32,000 children and young adults, 11,000 Aboriginal and Torres Strait Islanders and some 27,000 adults with complex needs.

At this stage work is underway within government to map out the future of the Community Service Obligation program and how it links to the rollout of the NDIS. We are providing input to this work to ensure that our existing and future clients receive the best possible ongoing care and services. A really good example of what we are trying to achieve is the referral pathway we put in place with the NDIA in August last year for children aged 0-6 years with hearing loss.

Over the past nine months, we have helped some 1,400 families through the pathway gain rapid access to NDIS plans and services. This work has been very strongly supported by the families and early intervention providers. Once we have further details on the future of the Program, we will be happy to share them with you. Right now, it's business as usual and we will continue to support our clients who need our help under the Program.

One in Six: If these services become competitive, why would we need a government hearing services provider?

Kim Terrell: There is no doubt that we have provided exceptional services to many, many thousands of Australians over the past 70 years. Since World War 2, we have grown into a highly effective organisation delivering both not-for-profit services and for profit services across Australia. 60 per cent of our profit is returned to government. Our view is that we need to constantly improve what we do in both our not-for-profit work and our for-profit work to deliver better outcomes to our clients and to government. It is our ability to deliver these outcomes which will determine our future success. I'm therefore pleased to say that we are very well placed to continue to provide exceptional services to our Community Service Obligation program clients, to our Voucher clients and to anyone else that seeks our services.

One in Six: Does Hearing Australia pay its staff bonuses, commissions or provide other incentives to sell top up devices to Voucher Program clients? Will there be any incentives for top up with NDIS participants?

Kim Terrell: No. We do not pay our staff commissions and incentives to sell 'top up' or higher level devices and our policies specifically dictate that our audiologists are not to receive commissions, incentives or any other form of financial reward from hearing aid retailers and manufacturers.

One in Six: Will Hearing Australia continue its program of employing audiologists for children and adults with complex hearing rehabilitation needs from July 2020?

Kim Terrell: Yes. We will continue to employ audiologists with the necessary skills and experience to meet the needs of our clients from mid-2020.

One in Six: Will there be new clinical standards and protocols published relating to the services provided to NDIS participants?

Kim Terrell: Unfortunately, I can't comment on this, as it's a matter for the NDIA.

One in Six: Many existing NDIS providers are reporting that it's not financially viable for them to provide services under the NDIS. Has Hearing Australia undertaken any financial modelling to know whether it will be possible to remain as a service provider to NDIS participants?

Kim Terrell: No. We are of course aware of the costs associated with delivering existing Community Service Obligation program services and will undertake any necessary financial modelling once further details of the NDIS arrangements are known.

One in Six: Would Hearing Australia consider providing services under Medicare in order to expand into service provision to cochlear implantees?

Kim Terrell: We are aware that a significant number of our clients have a cochlear implant and are exploring options to improve their access to cochlear implant maintenance services.

Auslan LOTE Project Launched

A community grant scheme in Wangaratta (Vic) provided Milawa Primary School with \$5,000 to develop a pilot Language Other Than English (LOTE) classes program to teach Australian Sign Language to local students.

The pilot includes seven classes from five local primary schools covering each year level from Prep through to grade 6. The schools include Cathedral College, Glenrowan Primary, Myrree Primary and Wangaratta West Primary. Each class group will be delivered 10 fortnightly sessions over terms three and four.

The pilot will be delivered by William Taffe and supported by a teacher or Principal. William Taffe is a local Deaf Auslan teacher, tutor and mentor.

The key objectives of the project and lesson plans are to raise awareness of the deaf community, build capacity in children to communicate and understand this community; and to improve English literacy through learning this visual gestural language.



Milawa Primary School students are currently learning Auslan in an informal manner and have already experienced many benefits - from increasing their understanding of English to learning about empathy through understanding other people's challenges.



"The principals and teachers in the steering committee have been amazing. From the very start I received a huge amount of support for the concept and the backing to run with the idea by Milawa Primary School Principal, Ash Campbell," program supporter Elizabeth Ellis said.

"Kate Dale, a teacher who works with Deaf children in the region volunteered hours of work to detail the scope, sequencing and lesson plans for the classes. William Taffe, Auslan interpreter Pauline Hume and Teacher of the Deaf Maggie Cole contributed large amounts of support and advice."

Testing will be conducted to measure effectiveness to the project objectives and funding will be sought to continue and to expand the program.

For more information contact Elizabeth Ellis at elizabeth@wineengineerroom.com.au

Focus groups about Accesshub

Accesshub is a telecommunications information website provided by the Australian Government.

Accesshub provides a range of information resources about **how to use the National Relay Service** as well as information about mainstream communications equipment and services which may be suitable alternatives to the national relay service for some people. Accesshub can be found at <https://www.communications.gov.au/what-we-do/phone/services-people-disability/accesshub>

The Government has contracted ACCAN (Australian Communications Consumer Action Network) to research the ways in which people who are Deaf, Deafblind, or have hearing or speech impairment use the new Accesshub website.

ACCAN will hold focus groups in Sydney, Melbourne and Hobart to hear from people who use the NRS and have used Accesshub.

There will be three focus groups specifically for people who have hearing impairment:



- The **Sydney** focus group will be held on **Wednesday 21 August** from 9.30am-12pm. The venue is Vision Australia: Level 7, 128 Marsden St, Parramatta.
- The **Melbourne** focus group will be held on **Tuesday 27 August** from 9.30am-12pm. The venue is CAE: 253 Flinders Lane, Melbourne.
- The **Hobart** focus groups will be held on **Wednesday 28 August** from 9.30am-12pm. The venue is the Old Woolstore Apartment Hotel: 1 Macquarie Street Hobart.

The focus groups will go for about 2.5 hours. When you arrive there will be an information sheet and consent form to fill out, as well as a short questionnaire. During the focus group, we will ask questions about the Accesshub website. Participants will be encouraged to offer feedback and insights on the current Accesshub website, and how it could be improved.

Participants will receive a **\$100 gift card** to thank them for participating in the project. Light refreshments will also be provided. All of the focus groups will be live captioned.

ACCAN is able to support participants to attend the focus groups if needed, for instance, by providing cab charge vouchers or travel reimbursements, or arranging accessibility supports.

If you are interested in participating in this project, please contact Meredith Lea from ACCAN. Meredith can be contacted via email at: Meredith.Lea@accan.org.au or on the phone: (02) 9288 4000. Please be sure to provide any details about your accessibility requirements (e.g. if you require an interpreter or a hearing loop) and/or your dietary needs.

My first 48 hours with hearing aids

By Adam Felman

The big kicker with gradual-onset hearing loss is that you are not aware of how it's changing you until the physical symptoms have become moderate to severe.

As an editor and writer for Medical News Today, I am constantly exploring the causes and effects of a range of different diseases and conditions.

At the time of writing, I have been wearing my hearing aids for 2 days, yet their impact is already astounding.



From time to time, I find that a particular article will pop up and alert me to my own health issues. And that is exactly what happened when I looked into deafness and hearing loss around a year ago.

I was going through the questions a doctor might ask during diagnosis, and I was staggered to find that as few as 5 percent of them did not apply to my own ears.

Sure enough, I took these issues to a doctor, and entered the referral process for treatment by an ear, nose, and throat specialist.

After 8 months of waiting, I now have two hearing aids. At the time of writing, I have only been wearing them for 2 days, yet their impact is already significantly greater than I could ever have imagined.

To recap, I'm lucky enough to have retained at least half of my hearing in each ear. At present, I can lead a mostly active, healthy life, I don't need to communicate with sign language, and my work is unaffected.

However, it's all too easy to dismiss the impact of a gradual, creeping condition such as hearing loss. It can develop suddenly, or, as in my case, take 20 years to reach a diagnosable level.

I will be 30 years old this year, and those 20 years mark a hugely important period in anyone's life.

Whether you are trying to make an impact as a young professional starting out, rounding off your formal education, building a family, or all of the above, you will undoubtedly be taking account of parts of your life that are becoming increasingly important and complex.

Communication is a huge part of navigating this formative stage. If any element of communication is lacking, it can have a significant impact on the way your personality develops, and the methods you use to connect with the outside world.

The big kicker with gradual-onset hearing loss is that you are not aware of how it's changing you until the physical symptoms have become moderate to severe.

Socialising becomes too much of a risk. Every pang of guilt or embarrassment after saying "what?" or "huh?" might lead to another night when you don't risk going out to socialise. You end up distancing softly-spoken colleagues, friends, and even family members, simply because the effort it takes to process their speech can become draining. I've forgotten what it's like to chat with a friend at a concert or even a bar. Very often, I will have great difficulty separating conversational frequencies from noises in the environment, making it almost impossible to fully focus on what people are saying.

Something as trivial as needing subtitles when watching television programs and movies with other people can create an isolating feeling of being stigmatised. Even though your friends are probably understanding, and although subtitles exist to significantly improve the viewing experience for people who cannot hear as well as others, it can still be hard to ignore the underlying feeling of being 'different.'

As a result of these fleeting moments and hang-ups, I developed subtle, invisible coping mechanisms to anchor my social interactions. For example, I cycle between a set of 10–15 stock phrases that I wheel out based on tone of voice and general context.

"Absolutely!" "100 percent!" "I can fully understand that." "Tell me about it!"

None of these seem out of place in a conversation. However, once they become a substitute for genuine responses and coherent conversational flow, they develop into a cornerstone of shame and awkwardness in daily encounters.

Until you start looking at hearing loss as a condition, it simply feels like part of your worldview. Even if it hasn't yet reached the stage of impairing daily function, it can still strip at least 30–50 percent of the human experience from your day.

My new hearing aids are discreet yet powerful — sometimes, to my underused ears, excessively so. A packet of chips opening 20 feet away sounds like it's crinkling next to my head; I can hear the wheels of a stroller from a balcony five floors up; even the cacophony during bathroom breaks sounds like a National Geographic documentary.

There are unexpected changes, too. My experience of food has completely altered — the additional frequencies adding a lightness of bite and extra crunch that I was previously unaware of.

Using a hearing loop system for the first time at a concert was emotionally overwhelming. My balance and spatial awareness have also greatly improved in these first few days of wearing my hearing aids.

My hearing no longer feels impaired — that is, until I remove the hearing aids. Those few moments in the day without them, such as going to the gym or grabbing a shower, are now pretty draining by comparison.

However, I have heard about 20 birdsongs for the first time in the last 48 hours, and I've listened to the phasing hiss of the sea as I've never listened before.

And, I was hit by a hailstorm that might genuinely be the single most impressive thing I've ever heard, although until 2 days ago, the bar was not all that high.

I have a lot to learn about life with hearing aids, but my first lesson was that no one close to me sees it as a negative life event. Everyone has been congratulating me as if I've just become a parent for the first time.



I've realised that however self-conscious you might feel about wearing hearing aids, people only see it as a connection with the world, and this is a huge deal. I see my hearing aids as an opportunity, rather than as debilitating or cumbersome devices.

There'll be occasional squeals of feedback and keeping them wedged in my ears can be a challenge, especially while moving around. However, I'm in the early stages of treatment and already connecting with the world more closely. While my hearing aids are not perfect yet, they remain a genuine game-changer.

If conversations have started to become a struggle for you, or if you've passed on getting a hearing aid because of the visual aspect, then I urge you to look into your options. Visit your doctor, speak to your insurer about coverage, and weigh up hearing assistance as a real option.

Sound is 20 percent of your experience as a human. Conversation, music, and background noise are all part of keeping a steady headspace and progressing with your day. Protecting and enhancing that is a life-changing step to take for people who can't process sound as well as others do. I cannot wait to stick these bad boys in upon waking up tomorrow and seeing what else I can discover for the first time.

<https://www.medicalnewstoday.com/articles/324995.php>



It can already be difficult to say a scientific word like “deoxyribonucleotide” let alone spell it out in sign language — but that’s why this determined young university student is being praised for inventing brand new ways for deaf scientists to communicate.

Like most first-year students, Liam McMulkin had already been anxious about being able to keep up a college workload. Since he was also the only deaf student at the university, he also feared that he would have trouble keeping up with the course lectures.

Though there are some British Sign Language (BSL) translations for scientific vocabulary words, the lexicon becomes fairly limited for college-level communication. As McMulkin continued studying in university, he became more and more frustrated by how his translator would be forced to spell out long complex words.

“Watching the interpreters for a one-hour lecture is very tiring,” McMulkin told BBC. “There are a lot of new words and scientific words are often very long, like ‘deoxyribonucleotide’ and ‘deoxyribonucleoside’.

“Sometimes the interpreter would be finger spelling for ages and I was having to watch it,” he added. “We would make up new signs which meant it was easier next time, but it also meant I had to learn new signs which was very tiring.”

McMulkin finally resolved to develop a whole new set of BSL vocabulary words for himself and future life sciences students. To date, he has created over 100 new signs for scientific words that have been officially recognised in formal BSL, which is used by approximately 87,000 people across the UK.

As McMulkin prepares to study for his master’s degree in September with the goal of eventually becoming a researcher, he is excited to see his new words ease the struggles of other deaf scientists who are following in his footsteps.

<https://www.goodnewsnetwork.org/deaf-student-invents-100-new-scientific-sign-language-words/>

INVOLVING PATIENTS AND PUBLIC IN RESEARCH



Your chance to help shape research - call for expressions of interest.

There is increasing recognition that people who are affected by the outcomes of research, should have input into the scientific process. Members of the public and patients, particularly in the UK, are increasingly taking an active role in research. Not just as research participants, but in every aspect of the research process.¹ NAL is committed to introducing public and patients' involvement (PPI) into our work.

We are seeking interested members of the public to form a PPI panel

What is involved?

- Work alongside researchers and 2 or 3 other PPI panel members
- Take part in discussions – time commitment is around ½ day per month
- Share decisions about research questions and topics
- Plan how the research will be carried out and how the results will be used
- Participate in sharing the news of research results

Who can help?

- Adults with hearing loss
 - Carers, close friends, or family members of people with hearing loss
- with:
- a strong personal interest in hearing loss and its impact
 - willingness to speak up and share opinions
 - ability to encourage and critique and the ideas of others
 - ability to think about the “bigger picture” of hearing health

X Technical, educational qualifications, or research expertise are not required

What are the benefits?

- Helping make hearing research more relevant and useful
- Making a positive difference to knowledge of hearing loss and how it is managed
- Learning from others
- Discovering your own strengths and skills
- Being part of a team and share the passion for quality hearing research
- Financial remuneration

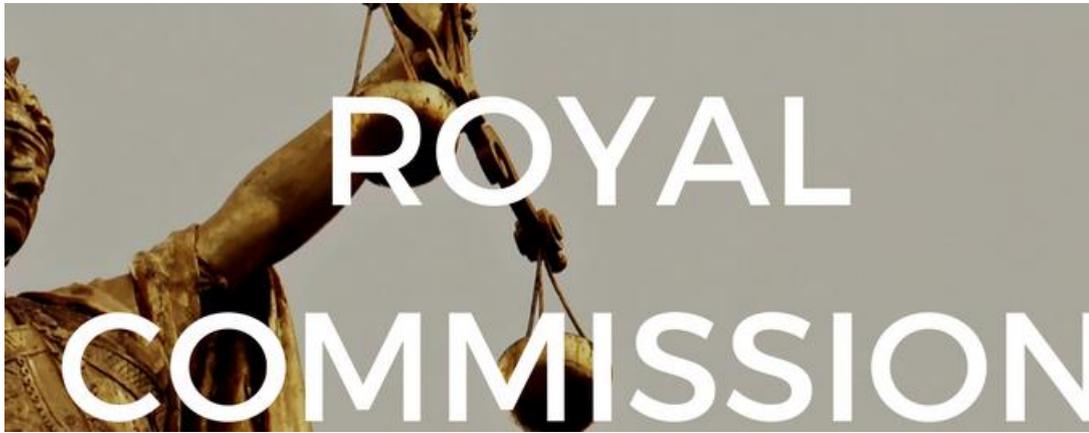
I am interested in taking part, what should I do?

Please email a paragraph (up to 200 words) explaining: 1) why you are interested, 2) any relevant experience, skills or knowledge, to: Lyndal.Carter@nal.gov.au

If you have any questions, please feel free to call Dr Lyndal Carter, Ph (02) 9412 6962

Disability Royal Commission

The Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability was established on 4 April 2019. Visit the [website](#)



Make a submission to the Royal Commission

The Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability is now accepting submissions.

Submissions can be made using the form available on the Royal Commission [Submissions page](#). An Easy Read version of the form is also available.

If you need assistance in making a submission you can contact them using the information below.

The Australian Government is also funding a legal advisory service and advocacy support for people who want assistance to make a submission. This support will be available shortly, and people can subscribe to their [Mailing list](#) so they will be advised as soon as support services are available.

You can contact the Disability Royal Commission:

- by email at DRcenquiries@royalcommission.gov.au
- by telephone on 1800 517 199 (9:00am to 5:00pm Monday to Friday AEDT excluding public holidays)
- by post at GPO Box 1422, Brisbane Qld 4001

Two Commissioners must step down

Advocacy organisations have highlighted conflicts of interest among the people appointed by the Government to be Commissioners of the Royal Commission.

People with disability, organisations and supporters, have been calling for a Royal Commission into the epidemic of violence against for many years.

But advocates believe two of the Commissioners appointed by the Government have significant conflicts of interest that threaten the integrity of the Royal Commission process. In addition, they want all Commissioners to fully declare any and all potential, perceived or actual conflicts of interests, and be willing to step aside from hearings that involve their conflicts of interest.

Advocates call for John Ryan and Barbara Bennett to step down as Commissioners due to the real, perceived and potential conflicts of interest arising from their past roles. Mr Ryan, as a very recent senior public servant for the NSW Department of Family and Community Services (Ageing, Disability and Home Care), has been involved with oversight of residential care programs for people with disability in NSW. Ms Bennett was recently the Deputy Secretary of the Families and Communities Branch of the Department of Social Services in the Commonwealth Government, and at various times oversaw the Commonwealth workplace health and compensation scheme, the National Redress Scheme, welfare, family safety, housing and homelessness, and grants to the disability sector. Therefore, both had responsibility for organisations that are likely to come under significant scrutiny by our Royal Commission.

People with disability need to have complete confidence that the Royal Commission is a place where they can give evidence safely. People with disability must be able to tell our stories to Commissioners, knowing they can seek and receive justice from them and the body they represent.

Commissioners need to be above reproach, free of any perceived or potential bias or influence and have the primary interests of people with disability at the heart of what they do.

Know someone who might like to get their own One in Six?

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

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