



# Canadian Hard of Hearing Association North Shore Branch

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Editor: Hugh Hetherington Issue 112 March 2021

## Mountain Ear

### From the Desk of the President

Hi Everyone,



So, Ground Hog day has come and gone. I'll bet you didn't notice. So far it seems to have lasted for about a year, perhaps a little less, but not by much. If I remember correctly, in the movie, Bill Murray gets the girl and everything works out fine. But it took 35

years... are you ready?

I have a question for you, have you looked at our website lately? What a wonderful job our web-master has done, or should I say our web-mistress, is that even socially correct? Anyway, Susan has done an absolutely fabulous job in getting the site to where it is now. I was just looking at it, and it is so full of interesting stuff that I stayed around for almost an hour just peeking into the various "doors".

I have found that sometimes I can go to the web site just to pass some time. Of course, if I have a specific question, that is one thing, but often, I just "pop in" to see if anything new is there, or sometimes I look just for a refresher. Try it, I'm sure that, just like Mikey, you'll like it.

I could use this space to tell you, dear reader, just

how lucky we are to have Susan on our Board, but I've already done that. What I should do is say thank you to her, and Hugh, who really keeps us moving along. He looks after our money, our deadlines, our meetings, and our correspondence I don't know what we'd do without him. So, thank you to Susan and Hugh.

## April Presentation

Monday, April 19, 2021

7:00 pm Via Zoom

**Guest Speaker**

**Lisa Dillon Edgett,  
Ph.D., RAUD, Aud(C)  
Instructor at Vancouver  
Community College**

**Topic**

**"Living Successfully With  
Hearing Loss"**

**For information call  
604-926-5222**

Of course, we are about hearing, and can you imagine not having Deborah on our Board. Who else could keep us going to where we are trying to get to, with all of her experience and training as our own audiologist. Whether at a Zoom “Sound Advice”, or on the web site’s “ask an audiologist” she makes sure that we know what we are talking about.

And thank you also, to Doug and Ron, working behind the scenes and without any recognition, just taken for granted, but always ready to toss in an opinion or help out with an unexpected task, they keep coming up (unexpected tasks, that is).

And, while I’m at it, thanks also to Flo, without who (and even though she is no longer serving on the Board) where would “Sound Advice” be without her?. Are we one lucky branch, or what??

While I’m busy giving your board a collective applause and pat on the back, there is also something I can ask of you. Over the few years, and especially over the last little while during Covid-19, our membership has decreased, and I’d personally like to see it grow a bit. So, if you have any friends or relatives who could benefit from anything our branch provides, tell them about us and direct them to one of our meetings, please.

So, as I write this it is almost Valentine’s Day, that day when the cooing of sweet nothings is at its softest. I remember when I could hear those “nothings” now it’s more like I’m hearing just nothing, or at least, mostly. I hope that you had a special someone with whom you could whisper, and I hope that you enjoyed the day. Also, I hope that they whispered back loudly.

Also, coming up pretty quickly, we’ll be celebrating Easter, Passover and/or whatever else is important to you, and, as I’m writing it is Chinese New Year, here’s hoping that we can all hear the celebrations.

For next month I’m running a small competition. Tell me why you’d be able to do a better job than me at writing this newsletter message, and the best reply will get to do it! I’m starting this competition today, so get your entries in quickly. Competition ends on March 31<sup>st</sup>.

Alon Dion

## February Presentation

On February 15<sup>th</sup> at 7:00 PM a Zoom meeting was held with our guest speaker Kenneth (Ken) Jones, President of the B.C. Tinnitus Association and a Director in the Tinnitus Association of Canada. He is also the Facilitator of the Greater Vancouver Tinnitus Self-Help group that holds monthly meetings in Vancouver and New Westminster. At the present time these in-person meetings have been suspended because of Covid-19. To receive information when these meetings will return you can contact Ken by email at kenjjones@gmail.com. The following article with Questions and Answers about tinnitus was provided by Ken for your information.

### What is TINNITUS?

No, it’s not to do with tendons in your arm; tinnitus has to do with your hearing. Tinnitus is a brain-generated sound that in most cases is only heard by you. It is a symptom resulting from some injury along the hearing pathway between the ear drum and the auditory (hearing) part of the brain. That includes the inner ear bones, the snail-shell shaped cochlea and its sets of frequency-detecting hair cells, and the auditory nerve connection to the brain.

### What does Tinnitus sound like?

People perceive it in many different ways: high pitched hissing, ringing, buzzing, tinkling, clicking, whooshing, popping, and others.

### What causes Tinnitus?

There are many causes of tinnitus, about 55% are related to LOUD NOISE exposure (concerts, movie theatres, churches, pubs, restaurants, casinos, cranked up head phones, boom cars, etc.), lesser amounts are from neck or head injuries (like whiplash), inner ear infection or calcification of the inner ear bones, some antibiotics and some antidepressants, and in a small number of cases, a tumor along this hearing pathway.

### Who does it affect?

People of all ages, genders, ethnicity, from all over the world, but it appears to be more common in industrial societies. There is no indication that heredity is a factor. Statistics from the US, Great Britain,

Japan, and Australia suggest that approximately 20% of the population experiences life-affecting tinnitus; that's one in five. Many suffer in silence because, only they can hear the tinnitus, or they have been told that, "Yes, you have tinnitus, you're going to have it for the rest of your life, and there is nothing we can do about it". This is devastating, and often leads to depression. But there is HOPE!

### **What can we do about Tinnitus?**

Firstly, reduce stress, and think positively about your tinnitus. Join a Tinnitus Self Help Group and learn about the Tinnitus Retraining Therapy (TRT). In many cases, the greater the stress, the louder the tinnitus is.

TRT is a brain training (by habituation) process that teaches the central sorting area of your brain that decides which of your senses are going to be acted on or ignored. TRT works to convince this area that it can ignore the sound we know as tinnitus, and therefore you will not hear it. It may take from 3 months to 2 years to achieve this.

At the present time there is no cure for tinnitus, so we treat the symptom. Researchers Dr. Jastreboff and Dr. Hazell developed the TRT in 2004, then trained audiologists around the world in their therapy. In this area, St. Paul's Hospital Hearing Clinic, and Sound IdEARS Hearing Clinic each have a trained audiologist.

There are 2 websites that are recommended to learn more about TRT: [atlantatinnitus.com](http://atlantatinnitus.com) (Dr. Nagler, who has tinnitus) and [ata.org](http://ata.org) (American Tinnitus Assn). Local Self Help Groups meet at Holy Trinity Church (12th Ave. & Hemlock in Vancouver) and Century House (New Westminster)

Email

[kenjjones@gmail.com](mailto:kenjjones@gmail.com)

or [nwtinn@inbox.com](mailto:nwtinn@inbox.com)

Kenneth "Ken" Jones has been facilitating the Greater Vancouver Self Help Group since 1996, and has very loud tinnitus as a result of a whiplash accident in 1984. Ken is an advocate and counsellor for people with tinnitus from all over Western Canada, and is Membership Chair of the Assn of Former MLAs of BC, and a former White Rock and Port Hardy Councillor.

## **Speech Recognition Software**

by Hugh Hetherington

In past issues of the Mountain Ear newsletter, I have written a number of times about various iPhone (smartphone) apps that would be helpful to people with hearing loss. They say that necessity is the mother of invention and browsing through the App Store for various subjects tells me that it is certainly true in the development of Apps.

The one I want to mention in this article certainly relates to the need for and problems associated with the wearing of face masks in our COVID-19 situation today. This has impacted the life of most of the Hard of Hearing people and much has been done to try and reduce its impact.

One of these needs that can be helped with your smartphone is in the area of speech recognition. The ability to turn speech into text has been around for some time now. Dictation is one where there have been a number of leaders such as Dragon Naturally Speaking. That ability is now built into smartphones as a native offering. Try it when entering text into Apps, such as, Notes, Pages or any other text entering document. Just touch the little microphone icon on the keyboard at the bottom of your screen and start speaking.

Also, searching your App Store for "speech recognition" will bring up a number of these Apps. One that has caught my attention recently is the Ava App. This App provides free and unlimited speech to text conversion for occasional users. You can caption your live conversations with anyone and there is no time limit. You can invite others to join you with their phone as long as you have an internet connection available. It can be used in groups or at meetings. When others join you on their phones the conversations are colour coded to identify who is speaking. It claims that group size is unlimited, and you can save transcripts of your conversations.

There are also paid subscriptions for "Power Users" or professionals that provide advanced features that you can read about in your App store.

The following article also relates to speech recognition and is reprinted here from the CHHA National Blog section of their website [www.chha.ca](http://www.chha.ca) with permission.

## Increasing Accuracy of Auto-Captions for Virtual Meetings

by Sheila Serup, MBA CHHA-Calgary

With the increasing use of virtual meetings, live auto-captioning enables accessibility for participants with hearing loss. However, there are still challenges to seeing the correct captions being displayed on video-conference platforms.

To better understand why errors occur in translating speech to auto-captions, I turned to an expert in the field of Linguistics. Dr. Ben Tucker, with the University of Alberta's Linguistics department, observes that speech recognition technology still struggles with transcribing voices to text. "When the input voice is highly accented, the system will have a hard time. It also struggles with background noise."

He notes that "co-articulation is possibly part of the problem but is likely only a very small part as most modern speech recognition systems have been trained to deal with it." Co-articulation, as defined by the Cambridge dictionary, occurs when the pronunciation of a sound in a word is affected by the sounds before and after it. (For example, the words "can" and "ham" contain the vowels 'a' and nasal consonants /n/ and /m/ which are produced at the back of the throat, and are therefore harder to hear.) "There are lots of other factors that will play a role as well, and there are simple solutions such as getting a microphone close to the speaker's mouth and reducing background noise," Dr. Tucker says.

He recommends using headphones to reduce noise coming from the environment and looking directly into the camera when talking. Any documents or prompts being referred to onscreen should be situated near the camera, so the person speaking is looking into the camera. "Users can slow it down to help listeners," notes Dr. Tucker. "Reading lips and reading captions – the task is very difficult as the user is multitasking." Dr. Tucker, who is also a Mercator Fellow in Quantitative Linguistics at the German University of Tübingen, notes there is speaker-dependent software such as Dragon Naturally Speaking. "These are trained to work on your voice." Once familiar with a speaker's voice, it will transcribe that speaker's speech to captions. "The problem is that it will only work for your voice." It will create accurate captions for other participants of your speech.

Otter.ai is a transcription service that integrates with Zoom to provide transcripts during and after the meeting.

Before joining a video call, Dr. Tucker suggests spending a few minutes adjusting your position and equipment for an optimal presentation. Practicing with headphones and microphones also enhances everyone's audio-visual experience.

## Living Successfully with Hearing

**Loss (LSWHL)** courses continue to be delivered online through Vancouver Community College. New sessions begin in April, and during this Spring session, we hope to offer both Level 1 and 2 courses. Find out more about the courses through the college website: For Level 1: <https://vcc.ca/courses/dhhe-0618/> and for Level 2: <https://vcc.ca/courses/dhhe-0619/>.

### How does online learning work for LSWHL?

Traditionally, this course met once a week for 12 weeks. The online course follows a similar schedule. Course material is provided on a course website that students can access at their own convenience. This includes videotaped mini-lectures, written material, links to online websites and videos, etc. A group session is scheduled weekly on Zoom where we review, discuss, and practice the material for the week. Students report that they love the convenience of the online course: they can see all the participants (maximum of 8 per class), hear better through their computers, review the material when they want, and participate from the convenience of their own homes.

The Level 2 course involves more direct practice activities to develop the knowledge and skills gained from Level 1: speechreading, conversation practice, and brainstorming challenging situations.

### What do recent students say about the online LSWHL course?

Thank you for your amazing course! It brings hearing loss to a level that is bearable, knowing that I am not alone, and that there are strategies, methods, techniques and skills that one can learn and use to get by in everyday life. You bring humor to a difficult subject, and I want to tell you how much this course has helped me.

The course was great for articulating communication strategies that I hadn't quite recognized (or in some cases identified at all) and so I thank you and your great teaching skills for bringing those out for me (and others!).

Lisa was great, and I cannot thank her enough for bringing a variety of information to create this course. Her hu-

mor and stories kept the course content light and fun. It was a great balance. The workload, participation, online materials, posting of our work; everything was perfectly balanced.

Most important thing I learned in this class, is that having a hearing loss is "not the end of the world." My hearing is not perfect, I have to work harder to get things across, I will forever hear sentences that do not make sense, but "it's not my fault, and to not let it bother me." "Humor is a great way to deal with my hearing loss." I can laugh at myself. This was important for me to learn, because I felt alone and not everyone understood where I was coming from, but being in the class and reading what others felt, and hearing others talk about the same issues, helped me accept my hearing loss.

### How do I register?

If you are interested or merely curious and want to know more, please reach out to Lisa at

[ldillonedgett@vcc.ca](mailto:ldillonedgett@vcc.ca) for more information.

Lisa Dillon Edgett, Ph.D., RAUD, Aud(C)

*The following article is an excerpt from the website [hearinglosshelp.com](http://hearinglosshelp.com) blog written by Neil Bauman, Ph.D. It is printed here with permission. To see the full article you can visit the website blog section.*

## Hyperacusis and Other Sound Sensitivities—Here's the Scoop

by Neil Bauman, Ph.D.  
© November, 2020

Being hypersensitive to sound is not particularly high on my list of enjoyable activities to put it mildly! When you are hypersensitive to sounds, you discover to your consternation that certain sounds, many sounds or all sounds are so loud that they make you wince, jump, cry out with pain or even lose your balance. Yet the truth is, these sounds are often normal, everyday sounds that are not even particularly loud. As a result, you may become annoyed, angry or fearful of sounds, find it difficult to live in our noisy world and thus ultimately withdraw from society.

You may seek help from professionals whom you think should be able to assist you, but as so often happens, the doctors you consult know even less that you do about your condition. Unfortunately, the

truth is, few doctors know much, if anything about the various hypersensitivities to sound that we have to endure. As the founder of the Hyperacusis Network once lamented, "Ear Nose and Throat doctors (ENTs) are renowned for misdiagnosing our condition [hyperacusis], giving poor advice and/or subjecting our ears to tests which collapse our tolerance to sound even more."

Even fewer doctors know how to effectively treat these conditions. There is little good information on the subject. Therefore, you typically have to take charge and learn what is safe for your ears on your own. Unfortunately, when you have hyperacusis, you instinctively choose what seems to be the logical treatment—wear ear protectors to protect your ears from the painfully-loud sounds you now hear. Unfortunately, this coping strategy is often exactly the opposite of what you should be doing. Over-protecting your ears just makes your hyperacusis progressively worse, not better.

Since these wrong or inappropriate treatments leave you worse off than you were before, you sink into deep depression. You think you've just been given a life sentence with no hope of parole on the horizon.

Many people with hyperacusis are desperate for help. At this point what you need more than anything else is hope, and along with hope, a plan to successfully get your sensitivity to sound back to normal. Hyperacusis may seem to be a rare condition, but in reality, people with hyperacusis inundate me with their pleas for help. Seldom a day passes without someone contacting me for help.

Since there is so little good information readily available on the various kinds of sound hypersensitivities, I have spent the past four years researching this subject. I have distilled what I have learned into a comprehensive book entitled, [Hyper-sensitive to Sound? Successfully Deal with Your Hyperacusis, Recruitment & Other Sound Sensitivities](#) that was just released this month (November, 2020). This book teaches you what the various sound hypersensitivities are and what you can do to free yourself from these strange conditions and get yourself on the road to recovery.

All opinions expressed in this newsletter are those of the contributors and not necessarily those of the Canadian Hard of Hearing Association or CHHA – North Shore Branch.

There are a number of different hypersensitivities to sound. If you are hard of hearing you have probably heard about/experienced recruitment. That is one kind of sound sensitivity. You may even have heard the term “hyperacusis” and know it has something to do with perceiving sounds as much too loud.

However, you probably don’t realize that hyperacusis is not just one condition, but is actually a whole family of disorders lumped together under the umbrella of “hyperacusis”. What you likely don’t know, and really need to know, is that each of the various “kinds” of hyperacusis have their own specific treatments. Using the wrong treatment just makes things worse. Thus, you need to have an accurate diagnosis of your specific kind of hyperacusis before trying to treat it.

Furthermore, you may find that you may have just one kind of hyperacusis, or more likely, you may have two or more kinds at once—for example, you may have a combination of loudness hyperacusis and pain hyperacusis at the same time (a fairly-common combination)—yet each kind needs its own specific treatment.

Not only does each condition need its own treatment, but when you have more than one condition, each one needs to be treated in the correct order depending on which conditions you have. Using the correct treatments, but treating them in the wrong order, or treating them all concurrently can be a recipe for disaster as numbers of people have found out to their sorrow.

Just teasing apart the various disorders can be a challenge in itself. Making matters even worse, other conditions that can have similar symptoms such as Tonic Tensor Tympani Syndrome (TTTS), Stapedial Myoclonus, Acoustic Shock disorder (ASD), Superior Canal Dehiscence Syndrome (SCDS), Third Window Syndrome (TWS) and so on are often intertwined with them.

To help you figure out what sound sensitivity disorders you may have, I have briefly outlined below the 10 conditions that are often lumped (in whole or in part) under the single term “hyperacusis”.

*(Editor’s Note: To read all about the 10 different types of hyperacusis you can visit Neil’s website at [www.hearinglosshelp.com](http://www.hearinglosshelp.com). Just click on the blog section where you can read the full article.)*

# Sound Advice

**Presented by:  
The Canadian Hard of Hearing  
Association  
North Shore Branch**

**When we meet, we discuss topics  
and issues dealing with hearing loss.  
We look forward to seeing you there.**

**West Vancouver Seniors’ Centre  
sessions and Silver Harbour sessions  
are now being held online as Zoom  
meetings. West Vancouver on the  
First Friday of each month and  
Silver Harbour on the last Monday  
of each month both at 10:00AM.**

**To receive an invitation to join  
either meeting send an email to  
[chha\\_nsb@telus.net](mailto:chha_nsb@telus.net) and you will be  
added to the list for both. You are  
welcome to join either meeting or  
both if you desire.**

**(No meetings in July and August)**

**Subjects to be addressed include:  
Technology;  
About Speechreading;  
Expert Coping Strategies;  
Improving Hearing Environments**

**For Information call:  
604-926-5222**