Friendship Home in Lincoln Installs VideoPhone
Peggy Williams, Mental Health Specialist

The Nebraska Commission for the Deaf and Hard of Hearing is proud to announce that the Friendship Home in Lincoln has installed a Video Phone (VP). Thanks to Sorenson, the VP was provided to the Friendship Home in an effort to ensure accessible crisis intervention services for Deaf and Hard of Hearing women. The Friendship Home is the first Safe Shelter in Nebraska to have a VP.

The Friendship Home opened in 1978 at which time they began extending a lifeline to battered women and their children in the community. They provide safe beds, a warm meal, counseling and the support of others who have been in the same position. While in shelter at the Friendship Home, women learn about the dynamics of the abuse they’ve experienced and have the support they need to make decisions about their next step, creating a life which is free from abuse. Children have the chance to see conflict resolved without violence and begin to learn to live without fear.

Julie Havener, Coordinator for Strengths Base Services/Counselor for the Friendship Home says that having the VP at the Friendship home is “an important thing” and that she is really excited to have this service available for Deaf and Hard of Hearing women. She stated that they want to reach out to Deaf and Hard of Hearing women; she wants them to be safe.

Katie Partusch, Program Assistant for the Friendship Home stated that there are so many barriers that Deaf and Hard of Hearing women face. She said, “when you have to leave a partner, your home and your community it’s very difficult, therefore, we want to make that transition accommodating to Deaf and Hard of Hearing women.”
NCDHH Calendar of Upcoming Events
Additional information on the listed events can be found online at www.ncdhh.ne.gov/calendar.html

August
18, 1:00pm-4:00pm, Understanding Your Rights; Effective Healthcare for Deaf/Hard of Hearing Seniors, OAD Hall, 4050 Hillsdale Ave., Omaha, Peggy Williams
19-21, visit us at the NCDHH Booth at the Johnson County Fair, Tecumseh, NE
20, 1:15p-2:15pm, Gothenburg Hearing Loss Support Group, Stone Hearth Estates, 110 20th Street, Beth Ellsworth
21, 2:00pm-3:00pm, Kearney Hearing Loss Support Group, Northridge Senior Living, 5410 17th Ave., Beth Ellsworth
24, 10:30am-11:30am, Omaha Hearing Loss Support Group, Dora Bingel Senior Center, 923 N. 38th, Omaha, Beth Ellsworth
25, 4:00pm-8:00pm, Hands and Voices Annual Family Picnic in the Park, Lake Zorinsky Park, Shelter #1, Omaha, Please RSVP to Jen at (402) 321-1419 or jennifer.r.racine@gmail.com
29, Visit the NCDHH informational booth at Older Nebraskan's Day at the Nebraska State Fair, Fonner Park, 700 East Stolley Park Road, Grand Island

September
8, 10:00am-12:00pm, Connect Saturdays, Milton Abrahams Branch Library, 5111 North 90th Street, Omaha
11-13, Visit the NCDHH informational booth at Husker Harvest Days, 9000 W. Husker Highway, Grand Island
13, 10:30am-11:30am, Proclamation of Deaf Awareness Week and Sign Language Interpreter Day, Nebraska State Capitol, Warner Chamber, 1445 K Street, Lincoln
14-16, Visit the NCDHH informational booth at Rail Fest, Junction of Highways 83 and 30, North Platte
14, 8:30am-12:30pm, NCDHH Full Commission Board Meeting, 4600 Valley Road, Room 4A, Lincoln
15, 2:00pm-3:00pm, Diary of a Worm, a Spider, and a Fly, The Rose Theater, 2001 Farnam Street, Omaha
21, Nebraska Sign Language Interpreter Day
23-29, National Deaf Awareness Week

Chairperson’s Corner
At the NCDHH Board Meeting held on June 8th in North Platte, the Board elected Steven Manning of Omaha as Chairperson, Dr. Jan Moore of Kearney as Vice-Chairperson, and Ms. Diane Muelleman of Omaha as Secretary. The officers will serve until June, 2014. We wish to thank the outgoing officers for their services during the past two years: Dillard Delts (Chairperson), Diane Muelleman (Vice Chairperson), and Amy Kasch (Secretary). As always, the Board will continue the NCDHH's mission to provide advocacy, communication access and information, enhancing awareness and services for all who have a hearing loss in the state of Nebraska.
The Omaha Club of the Deaf was founded by four Deaf men who wanted to have an organization to provide some type of social activities for members of the Deaf community; they felt that was greatly needed in the Omaha area. Those four men were Tom Peterson, Charles Faulk, Oscar Tureke and John Rewolinski and the group first met in 1945. The membership grew to over 200 and meetings were held monthly in various rented halls. The club provided not only social activities but also offered card games, bowling, basketball and baseball teams. One of the frequently used meeting places was the Swedish Hall on 1611 Chicago Street in Omaha.

During the late 70’s the club changed the name to Omaha Association of the Deaf, Inc. (OAD) and meetings were held at the American Legion Hall on 61st and Lake. At that time, the group’s totaled about $45,000. The most successful fundraising event was the Midwest Athletic Association of the Deaf’s basketball tournament, which in 1975 was held at Nebraska School for the Deaf. OAD made a profit of $10,000.

The members decided to begin the search for their own hall. OAD was offered a vacant building on 120th and Dodge by the City Improvement Department through Mayor J. P. Morgan. This was a great opportunity until the building was sold and then the Association was without a hall. Finally in 1992, Bob Morressy found the building on 4050 Hillsdale Avenue and advised the board to look at it. The building was owned by an American Legion Club and the purchase cost was $87,000. The decision to purchase the facility was made and the mortgage was ceremoniously burned in 2001. The hall has been completely renovated. The Deaf community has spent tireless hours volunteering their skills and talents in remodeling their hall.

Today, the OAD hall is rented out periodically to the general public, however every third Saturday of the month it is used by the OAD members. The Omaha Deaf seniors use the hall on the first and third Thursday of the month for their activities. Several other Deaf organizations like the Junior NeAD, Nebraska Association of the Deaf, Nebraska School for the Deaf Alumni, and other Deaf organizations use the hall for their meetings. The OAD Hall has become a focus point and home for the Deaf community in eastern Nebraska.

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Chairperson’s Corner

You can support NCDHH services by contacting your district’s legislative representative and explaining the importance of the services that we provide to all Nebraskans, Deaf, Hard of Hearing as well as the Hearing population.
There will be some challenges for the NCDHH Board in the next two years.

- Working with the State Legislature to pass LB39, the sign language interpreter/transliterator licensure amendment. We look forward to creating new alliances and the continued support of the variety of organizations with which we have already established cooperative efforts.
- Researching and determining the type of assessments acceptable as proof of qualification for the Nebraska interpreter/transliterator license.
- Support the addition of induction loops in all buildings so that individuals who depend on their hearing aids or cochlear implants can use the “t-coil” to improve clarity of sound.
- Assuring the funding to meet the vision and mission of NCDHH.
- Remaining aware of issues impacting Deaf and Hard of Hearing citizens.

If you have any concerns, please contact NCDHH Board members, including NCDHH Chairperson, Steven Manning. Find more information on NCDHH Board members at http://www.ncdhh.ne.gov/full_comm/full-comm_bd_mbrs.html.
Mr. Dillard W. Delts
Member of NCDHH Board

Hello citizens of Nebraska, this past year Dr. Seiler and various Commission Board Members have reached out to bridge the gap between NCDHH and the various organizations that support the causes of our various hearing loss needs. The goal has been and will continue to be the unification of the Deaf and Hard of Hearing Communities in Nebraska. Many of Nebraska’s citizens of all ages with hearing loss desire to go about their daily lives with the same opportunities available to those without any disability.

Going about our lives with a hearing loss no easy task, for despite the good will of many of our fellow “non-disabled” Nebraskans, discrimination subtly raises its head in various corners of the State. Many times this because people do not understand what those with hearing loss or other disabilities need to succeed. We are not looking for “hand-outs” but fair opportunities that will allow us to prove we are able to handle the various challenges of everyday life with as much heart and determination as our non-disabled peers.

My fellow Nebraskans, let’s recall the famous words of the 16th President of the United States:
“A house divided against itself cannot stand.”
These words are very true in everyday life! There are various groups throughout the State of Nebraska that are working feverishly for the better good of those with hearing loss. NCDHH is one of these Organizations.

As President Abraham Lincoln understood, division among common entities leads to failure in joint ventures. Only through unification can each of the various Deaf and Hard of Hearing organization throughout the state be able to have their needs heard. This past year we saw two very good bills proposed in the state legislature which would have been beneficial to a variety of us had they become laws. NCDHH went all out to support each of these bills, only to see division, misconception, and lack of support push the bills to the back burner.

NCDHH plans to put as much time and energy as possible toward resolving all issues regarding the bills and resubmit them during the 2013 legislature secession. In order for the bills to be successful, the support of a UNIFIED Deaf and Hard of Hearing community throughout the state is ABSOLUTELY NECESSARY! We at NCDHH will lead the charge to unify the various communities. My fellow Nebraskans, please help us reach out to everyone in the state! We especially want to make more contact with those who live in rural and farming communities that have little or no contact with major city entities. Obtaining the support, feedback, and understanding of those in rural and farming communities is just as important as obtaining the support of individuals in Omaha, Lincoln, Kearney and various other cities in Nebraska.

Your awareness, feedback and support are important to NCDHH and the many organizations throughout the state. Help us make a unified Deaf and Hard of Hearing community in Nebraska. As a result, we can help you obtain the services and support you and your family need to live productive and effective lives!

We look forward to hearing from you all!!!
Sincerely
Dillard W. Delts
Norman Weverka Retires

I know that many of you have already heard that I retired May 4, 2012. I want to be able to spend the rest of my life pursuing things that I always wanted to do for myself. I loved working with the Nebraska Commission for the Deaf and Hard of Hearing and especially working with the deaf community. In my retirement I will be farming, which is my second love, and continuing to restore old furniture and working with my exotic birds.

Through the years at the Commission I found many challenges but somehow things always came out well. I was able to do a lot of presentations and training seminars with the law enforcement agencies, hospitals, fire departments and other agencies throughout the state. I was able to get involved as an advocate in Individualized Education Plan meetings, employment, secondary education and many state agencies. I guess I was involved in almost anything that challenges a deaf or hard of hearing person in a lifetime.

I am going to miss all the people that I met while being employed at the Commission. Those people provided bridges to better serving the deaf and hard of hearing in Nebraska. I definitely will miss Peg Williams who has been the most wonderful person to work with. I will miss Dr. Seiler as he is one of the best directors I have ever worked for. Lori, the business manager, was one person who kept me informed about things that change in payroll and insurance and of course, we shared farm talk. I want to thank all the other field reps for being so patient with me and working as a team to get things done. Thank you to Traci Cooney for all the help with those NSTEP applications and Cindy Woldt for her expertise trying to teach “an old dog new tricks” with the computers. Thanks to Ben Sparks for companionship and his ability to do the best job interpreting for me. Lastly, all the other people who worked or who were on the Board of NCDHH for their support.

Thank you out there in the community that I worked with whether deaf, hard of hearing, blind and hearing you have given me a life that I will never forget.

Dr. Donita Mains Retires

Saying good bye isn't the hard part — it's what I leave behind that's tough.

It has been my utmost pleasure to serve and work with Deaf and Hard of Hearing individuals, families and professionals for the past (almost) 8 years. The experiences have been wonderful. I have thoroughly enjoyed my position serving you for the Nebraska Commission for the Deaf and Hard of Hearing.

However, family health issues are drawing me to Texas to assist them. Blessings and good fortune to you all.

How lucky I am to have known so many that it is so hard to say good bye to.
Recovery in the Deaf and Hard of Hearing Communities

Peggy Williams, NCDHH Mental Health Specialist

If you are recovering, you might be able to relate with many of the comments and the personal stories told by these four individuals. If, while reading these stories, you start thinking that you might have a problem because of drinking or using drugs due to problems in your life, I hope you will reach out for help the same way Pete, Richard, Beth and Otto did. Please do not let the disease of alcoholism and drug addiction end your life or continue to cause you problems at work, home, financially, physically.

Help is just a call away, not only for you but for your family as well. Resources are available by contacting Peggy Williams at the Commission or you may talk to your doctor. I hope you will enjoy the personal stories of these four remarkable Deaf and Hard of Hearing people in recovery today.

The following people were interviewed by Peggy Williams, Mental Health Specialist for the Nebraska Commission for the Deaf and Hard of Hearing. Their stories are used by permission for the Commission to print in *The Communicator*.

Pete’s Road to Sobriety

There are those who are Deaf or Hard of Hearing who want to stop addictions such as alcoholism and drug use. It is already a difficult task to stop a particular addiction and then to compound this with a lack of services makes it extremely hard for those with hearing loss to do so. Dr. Peter Seiler has taken such a step in his fight against alcoholism and, in fact, has been sober for 28 years now. Dr. Seiler has agreed to share his story so that others will have the courage and find the will to also become either sober or clean or both.

Dr. Seiler, or Pete as he prefers to be called, remembers taking his first drink at the age of 21 years, and even what kind of drink it was (a highball). At first, he didn't notice any effect alcohol was having on his life, his behavior, his relationships with his children and his wife, or his work. Pete stated that he used alcohol like a Pepto Bismol for his anger at the treatment the hearing world gave him. He felt that he was a victim of mainstreaming and was made to feel inferior to those who can hear. He did come from a family that had alcoholic relatives. So the tendency to develop alcoholism and the unresolved anger combined to make Pete a full blown alcoholic.

“My work suffered, manifesting in the procrastination of duties. My weight increased and I noted I was becoming bloated. My relationship with others suffered,” recalls Pete.

Pete tried to quit drinking several times. He even stopped drinking for 30 days and then would reward himself for being able to last 30 days without drinking. One problem with his drinking was that he ignored his family more and more. Near the end of his drinking career, he knew that his kids were very concerned.
“One main reason why I stopped drinking was the fact that one of my children started making my drinks for me. When I asked the child why she did that, she responded that I always said I could not listen to her or my other two children until I had at least two drinks,” remembers Pete. “So she prepared the two to help me get ready to listen to them. That really hit me hard.”

Another reason to stop drinking was his attempt to commit suicide. Pete felt that the only way to stop alcoholism was to either get help or to die. Getting help is very difficult when you are Deaf. No one wants to neither treat a Deaf person nor, due to the cost, provide a sign language interpreter. That made him angry, that he was viewed as a dollar sign and not as a person in need.

He quit drinking on December 15, 1983. That was the hardest day of his drinking because he realized that was IT! No more drinking, no more alcohol. Now he views December 15th as a birthday.

“My advice to any deaf or hard of hearing person who wants to stop drinking is that life without alcohol is well worth the pain during the first six months. Deaf or Hard of Hearing people will, however, have to expect that AA and alcoholism treatment centers are not ready for them. Each person who wants to become sober will have to fight to get that way. Nebraska does not have any accessible programs for Deaf or Hard of Hearing alcoholics. To find an accessible program, that person will need to go to another state such as Illinois (Chicago), Minnesota (Rochester), or Washington, DC (several treatment programs). Still, sobriety is better than the alternative: being drunk and dysfunctional.”

Otto’s Road to Sobriety

Otto remembers his first drink. It was the day he graduated from the Nebraska School for the Deaf. An older kid offered him some wine at a party. He remembers it really “hitting” him. Otto did not realize that he was also an alcoholic. “My favorite thing to drink was beer or whiskey. I’d drink it all,” recalls Otto.

Time and drinking went on, yet no one ever told him that he needed to stop drinking or that he drank too much, even though his wife would be left alone at home while he was at the bars. “I had to sleep on the recliner after going to the bars because my wife didn’t like the smell of alcohol. My drinking was causing problems at home.”

“I was ticketed for DWI in 1973,” remembers Otto. “It was during this process that I realized that I had a problem with drinking. While reading about alcoholism, I realized I had a problem and began to feel bad about its’ impact on my family.” After the DWI, Otto knew he needed help. He had tried to quit drinking on his own. The thought of hurting another person with his drinking scared him and he sought help. His doctor referred him to a treatment center to get the help he needed.

Otto received treatment at the Eppley Treatment Center in 1974. He was also the only Deaf person receiving treatment at the time. “I was the first Deaf person in Lincoln to seek treatment, the first Deaf person to live in my part of town and the first Deaf person to be employed at the lumber company where I worked. I feel like I helped set a path for other deaf people.”

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Beth’s Road to Sobriety

Beth remembers taking her first drink in the 8th grade at a party held after a school play. “I hated the taste of the mixed drink that I drank, but I loved the feeling it gave me.” She felt as if she wasn’t afraid of people anymore. She had to drink in order to feel all right around other people. Drinking made her feel much better about herself. At that time she was very ashamed of her hearing loss and embarrassed about her speech, however, when she was drinking she could blame her speech on being drunk. That was okay, having a hearing loss was not okay.

On many occasions friends would tell her she needed to stop drinking but instead of taking their advice she would stop being their friend. Her attitude at that time was “no one is going to tell me what I can or cannot do!” She didn’t think she had a problem and so she blamed everyone else. When she finally realized drinking and smoking pot might be a problem she made a decision to see a counselor. She explained to the counselor that she thought she might have a drinking problem and the counselor told her “then you do have a problem”. She stopped drinking for two weeks but did other drugs and soon discovered that she just couldn’t. She denied her drinking problems; she explained that she was very defensive!

Beth believes her drinking problems and her hearing loss were related. Her family didn’t think she needed hearing aids; therefore, she didn’t wear hearing aids much. If she had a hearing aid on she was told she was using them as a crutch and not paying attention. Consequently, she became very uncomfortable wearing hearing aids and would take them off if she thought someone might see them. It took Beth a long time to accept wearing hearing aids. By drinking, she would escape the daily teasing she received when she was living at home. After leaving home, she became very defensive about both her drinking and her hearing loss.

On many occasions Beth made attempts to try to quit drinking on her own. Beth reported drinking as well as using drugs such as wine and pot, sometimes speed. Beth was issued a DUI and faced jail time, this got her attention! When she quit drinking and doing drugs in 1985 she started going to AA, but didn’t tell anyone she had stopped drinking until a month into sobriety. She had tried to stop so many times she felt that no one would believe that she had quit drinking and using drugs.

Beth explained that she did not attend a substance abuse treatment facility; however, she did experience barriers in getting sober and had to overcome those barriers. Beth got sober in Logan, Utah and didn’t know anything about assistive listening devices or sign language interpreters although they would have been helpful in meetings. Beth attended AA meetings but missed a lot of what was said. She compensated for this by meeting with people in small groups or one on one. Beth had a great sponsor that spent a lot of time with her in the beginning of her sobriety who became her friend as well.

Today recovery means everything to Beth. She attends AA meetings at least once a week, works the 12 steps of AA, is a firm believer in AA and believes strongly in the tools it offers people to lead a clean and sober life. She has a wonderful sponsor who has become her friend as well!

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LET’S GO BACK TO THE MOVIES
Norman Weverka

The old philosophy of not having captioning at your local movie theater is becoming more untrue. Many movie theaters are getting the technology called the CaptiView. I recently paid a visit to The Grand Theater in Lincoln where they have CaptiView available. I was rather impressed to find that the CaptiView was readily available and was easy to use.

CaptiView has a small box attached to a bendable neck that is then connected to a base that fits into the beverage cup holder located at each seat. All you do is ask for the CaptiView and the theater will provide you with one. When you go in to movie area or auditorium you may sit anywhere you wish and set it into the cup holder and make sure it is adjusted to the right screening area. You can move the top captioning box anyway you want by bending the neck. I found it was best to move it more forward as it allows you to view more picture space and is less stressful on your eyes. Adjust it at a level just below the screen at your eye level. The captioning is very easy to read and it is like a digital dot system in green letters. There is no extra charge for using the system and you do not have to put any deposit on it when you use it.

If you have problems with using the unit all you need to do is contact anyone in the theater and they will be very happy to help you.

The only problem I could see is that they only have ten units available at The Grand. They told me that if a large deaf group plans to come to the movie they can arrange to get more from the other theaters. After seeing this technology, I have no excuse for not going to the theater as it seemed that it was fully accessible for me to watch any movie. At The Grand there was one auditorium, which usually runs the smaller movies, that did not have the technology. Basically all the new and big movies have the technology.

I do hope that you all try this exciting technology and get back to the movies!

For more information on the CaptiView system, visit http://www.marcustheatres.com/Movie/Captions/.
By: Ben Sparks

The Nebraska Commission for the Deaf and Hard of Hearing continues to be Nebraska's leading resource for information regarding hearing loss, deafness and sign language.

Are you a service provider seeking to improve accessibility? Possibly a sign language student looking to polish your skills during the summer months? Be sure to contact our Lincoln office soon to find what you're looking for.

The cost? They’re FREE for Nebraska residents to check out. All you need to do is set up an account, which only takes a minute or two. Media Center materials can even be mailed, with the understanding that the borrower is responsible for the return postage and has to follow the same guidelines as any other borrower.

Hearing Loss: Listen With the Heart
While distressing for an individual, hearing loss also takes a heavy toll on family and friends. These stories chronicle the unique challenges of hearing loss in interpersonal relationships, including communication, self-identity, and how to continue sharing and growing in these relationships. Many shared activities, such as enjoying music, whispering sweet nothings to a lover, and hearing children’s voices are deeply missed by both the hearing and hearing-impaired partners in a relationship. This book illustrates the power of relationships to transform people and how each party has unparalleled opportunities to grow in profound and unpredictable ways.

Cochlear Implant Technology: The Artificial Ear
When it was first developed, the cochlear implant was hailed as a “miracle cure” for deafness. That relatively few deaf adults seemed to want it was puzzling. The technology was then modified for use with deaf children, 90 percent of whom have hearing parents. Then, controversy struck as the Deaf community overwhelmingly protested the use of the device and procedure. For them, the cochlear implant was not viewed in the context of medical progress and advances in the physiology of hearing, but instead represented the historic oppression of deaf people and of sign languages.

Part ethnography and part historical study, The Artificial Ear is based on interviews with researchers who were pivotal in the early development and implementation of the new technology. Through an analysis of the scientific and clinical literature, author Stuart Blume reconstructs the history of artificial hearing from its conceptual origins in the 1930s, to the first attempt at cochlear implantation in Paris in the 1950s, and to the widespread clinical application of the “bionic ear” since the 1980s.
Interpreting: 
**Interpreting in Legal Settings**
The work of interpreters in legal settings, whether they are spoken or signed language interpreters, is filled with enormous complexity and challenges. This engrossing volume presents six data-based studies from both signed and spoken language interpreter researchers on a diverse range of topics, theoretical underpinnings, and research methodologies.

In the first chapter, Ruth Morris analyzes the 1987 trial of Ivan (John) Demjanjuk in Jerusalem, and reveals that what might appear to be ethical breaches often were no more than courtroom dynamics, such as noise and overlapping conversation. Waltraud Kolb and Franz Pöchhacker studied 14 asylum appeals in Austria and found that interpreters frequently aligned themselves with the adjudicators. Bente Jacobsen presents a case study of a Danish-English interpreter whose discourse practices expose her attempts to maintain, mitigate, or enhance face among the participants.

Deaf History: 
**Never the Twain Shall Meet**
Throughout the last two centuries, a controversial question has plagued the field of education of the deaf: Should sign language be used to communicate with and instruct deaf children? *Never the Twain Shall Meet* focuses on the debate over this question, especially as it was waged in the 19th century, when it was at its highest pitch and the battle lines were clearly drawn. In addition to exploring Alexander Graham Bell’s and Edward Miner Gallaudet's familial and educational backgrounds, this book looks at how their views of society affected their philosophies of education and how their work continues to influence the education of deaf students today.

Deaf Culture: 
**Lives of Deaf Mexicans DVD**
Deaf people in Mexico are part of a rich culture that is fraught with educational setbacks, communication obstacles and limited employment opportunities. With thirty deaf babies born in Mexico daily and the lack of governmental support for deaf education, the majority of deaf Mexicans end up staying home to help support their families instead of going to school.

Assembly Required
Luczak shares stories from his days growing up as a deaf gay man in Michigan’s Upper Peninsula and learning signs in secret, trying to follow the music on the radio in order to be cool like his hearing classmates. He eventually got involved with Deaf theater collaborators, educators and sign language interpreters from which his worldview has substantially reshaped on issues of identity, literacy, technology, and family.
Captioning of Internet Video Programming and The Twenty-First Century Communications and Video Accessibility Act of 2011
-excerpts from www.fcc.gov/guides/captioning-internet-video-programming

Closed captioning is the visual display of the audio portion of video programming. Captioning provides access to individuals who are deaf or have hearing loss and is often used in places where it is difficult to hear a TV program, such as restaurants and exercise facilities. On January 12, 2012, the FCC adopted rules requiring captioned programs shown on TV to be captioned when re-shown on the Internet. These rules implement provisions of the Twenty-First Century Communications and Video Accessibility Act of 2010 (CVAA).

Video Programming
- The new rules cover full-length video programming. Video clips and outtakes are not required to be captioned when shown on the Internet. However, when a captioned TV program is re-shown on the Internet in segments, it must be captioned if substantial portions of the entire program are shown in those segments.
- Consumer-generated media (e.g., homemade videos) shown on the Internet are not required to be captioned, unless it has been shown on TV with captions.
- Movies shown on the Internet are not required to be captioned unless they have been shown on TV with captions.

When can I expect to see captioning on the Internet?
Implementation Schedule for Captioning Internet Video Programming

The following deadlines apply to video programming that a distributor shows for the first time on the Internet (newly added to the distributor’s inventory of Internet video programming):

September 30, 2012: Pre-recorded video programming that is not “edited for the Internet” must be captioned on the Internet if it is shown on TV with captions on or after September 30, 2012. “Edited for the Internet” means the TV version has been substantially edited. Examples of editing for this purpose are: deleting scenes or altering musical scores. Changing the number or duration of commercials is not considered “editing” for this purpose.

March 30, 2013: Live and near-live video programming must be captioned on the Internet if it is shown on TV with captions on or after March 30, 2013. Near-live video programming is defined as programming that is performed and recorded less than 24 hours before being shown on TV for the first time.

September 30, 2013: Pre-recorded video programming that is substantially edited for the Internet must be captioned if it is shown on TV with captions on or after September 30, 2013.
Otto's Road to Recovery
Continued from page 7

Otto did not have a sign language interpreter during the treatment process. Otto chose to communicate using lip reading techniques. He would speak during treatment sessions. His spoken English skills shocked counselors and other patients. “They didn’t think that a deaf person could speak, get drunk or drive a car. Of course, I made it very clear to them that a deaf person could drink and drive,” Otto remembers. “I was in treatment for 6 difficult weeks, so difficult that I never wanted to go back.”

Otto would attend AA meetings with his brother, a skilled oral interpreter. Otto was able to easily understand what was said during meetings by following the messages on his brother’s lips. Eventually, Otto’s wife attended AA meetings with him, now that the meetings were accessible to a deaf person through his brother, the interpreter.

“I’ve been sober for 40 years,” states Otto proudly. When Otto attends family gatherings or is playing cards with his friends, he isn’t tempted to drink. He does admit to, occasionally, having a small glass of wine on Fridays. Before moving to his current home, he had never had a drink.

“I’d like to offer some advice to anyone that might feel they are having problems with their drinking,” states Otto. “Think of your family first and of your future. Drinking will destroy your family and it will destroy your future. Don’t pick up the first drink because that will lead to another and another drink. To recover, find someone who is a recovering alcoholic and understands recovery. Find someone that can help you.”

Beth’s Road to Recovery
Continued from page 8

Overcoming her alcoholism was the most difficult thing she has ever done; however, it is also the most rewarding. Beth explained that her last drink was a box of wine, consumed in one day. She feared that if she had not stopped, her drinking would have taken over her life.

If you want to quit, reach out for help and support; it is there for the asking! To encourage anyone that wants to stop drinking and using drugs, Beth states that it can be done and there is tremendous support available. She would be happy to help you on your journey if you so choose.
One of the Midwest’s trusted methods of measuring interpreter’s skill is coming to an end. Dr. Seiler received information that the Kansas Commission for the Deaf and Hard of Hearing will no longer be providing Quality Assurance Screening Test, QAST, materials as of January 1, 2015. KCDHH has been the agency responsible for the creation of evaluation stimuli for the QAST.

The NCDHH Full Board, working cooperatively with the Interpreter Review Board, has established a task force to review available testing methods. The NCDHH Full Board voted to establish a task force that includes representatives from several stakeholder’s groups. Members of this task force include: members of the Interpreter Issues Subcommittee, Susan Peterson and Steve Manning; member of the Interpreter Review Board, Gary Theiler; Nebraska RID Chapter representatives, Bethany Koubsky and Connie Herndon; The Nebraska Association of the Deaf, Jerry Siders; The Nebraska Commission for the Blind and Visually Impaired, Cheryl Poff; independent testing experts, Frances Beaurivage and Barbara Woodhead.

The Nebraska Sign Language Interpreter Evaluation Task Force has been given the responsibility of “determining how interpreters will be assessed and licensed.”

The Evaluation Task Force met on April 3 and June 6 in order to discuss several topics to be addressed including the current state of the QAST, “grandfathering” current QAST levels, mentorship and a cursory look at available evaluation systems.

For more information regarding upcoming meetings of the task force, please contact Ben Sparks, ben.sparks@nebraska.gov, (800) 545-6244 or (402)325-1068 VP.

The healthcare field is continually expanding and becoming increasingly complex. Fortunately the National Consortium of Interpreter Education Centers has developed a website to help consumers get accessible information regarding their healthcare as well as assist interpreters with their task of providing qualified interpreting services.

This website www.healthcareinterpreting.org is designed for patients, providers, interpreters and interpreter educators. Interpreters can research workshops, networking opportunities and mental health resources. There’s even a free online medical terminology course. Patients can access up-to-date medical news such as the new CPR technique called Continuous Chest Compression.

For interpreters who are seeking to improve or polish their receptive skills, I recommend www.oicmovies.com. OIC creates new vlogs constantly, providing today’s important (and some not so important) news to viewers in ASL.
FCC sends out “Denial of Application” to eight VRS companies
Ben Sparks

You may have noticed a reduced number of companies that offer video relay services, VRS. In recent months many VRS providers have suspended service until they can achieve certification through the Federal Communications Commission, FCC. Video relay service providers are private companies that offer services that allow deaf, hard of hearing and speech impaired individuals to communicate over video telephones with hearing people in real-time through the use of a sign language interpreter. VRS companies are required to be certified and provide proof that they can meet requirements set by the FCC before they receive reimbursement for VRS services.

Eight potential VRS service providers’ applications were denied, for varying reasons, based on the information they provided to the FCC. The most common reason for denying certification is a lack of proof of how the VRS company will be able to provide service 24 hours a day, seven days a week. This information can be found online at: http://transition.fcc.gov/cgb/dro/trs.html. The following companies received Denials of Application on November 15, 2011:

- PAH Relay
- IWRelay Inc.
- PowerVRS, LLC
- BIS Relay, LLC
- CODA VRS Corporation
- Malka Communications Group, Inc.
- S&L Deaf Communications, LLC
- Say-Hey, Inc.

According to fcc.gov, there are only ten certified companies available to assist with VRS calls. These companies are listed at http://www.fcc.gov/encyclopedia/trs-providers. This online list also includes TTY relay service providers and some companies that are discontinuing VRS services. For example, AT&T stopped providing VRS services on December 23, 2011 and Sprint discontinued VRS services on January 4th, 2012. The current certified VRS providers are listed below, eight of which are operational.

- American VRS; Service not in operation
- CSD VRS; www.zvrs.com
- Purple VRS; www.purple.us
- Sorenson; www.sorensonvrs.com
- Convo; www.convorelay.com
- Healinc Telecom; www.healincvrs.com
- Snap VRS; www.snapvrs.com
- Gracias VRS; www.graciasvrs.com
- Communication Axess Ability Group; www.caag4.com
- Hawk Relay; Service not in operation

Get up to date Deaf/Hard of Hearing News in your Inbox!

Keep up with upcoming activities through the weekly E-Communicator. The E-Communicator is delivered to e-mail inboxes once a week. If you don’t currently receive our weekly newsletter, visit http://www.ncdhh.ne.gov/newsletter-subscription-page.html to sign up today. There, you will have the option to sign up for our other updates as well, such as NCDHH mental health news.

Spread the word about your events & activities!
Free Telephone Equipment for Deaf and Hard of Hearing Nebraskans

The Public Service Commission and the Nebraska Commission for the Deaf and Hard of Hearing jointly administer this program. The goal of this program is to provide persons with disabilities financial assistance in the form of vouchers, allowing them to obtain specialized telephone equipment such as amplified telephones, amplified cellular phones, TTYs and signaling devices.

One of the questions that we receive is, “Can I get a cell phone through the program?” The answer is yes, from a state approved vendor. Currently, telephones and plans are available through Sprint and Jitterbug. NCDHH and the Public Service Commission are recruiting additional cellular providers for the NSTEP voucher program. The process is quick and easy. If you indicate that you would like to receive a cellular phone on your NSTEP application, you will receive step-by-step instructions on how to proceed with your order.

Sprint, Verizon and Jitterbug offer equipment and programs to meet your needs. Jitterbug products are designed for ease of use and clarity. Sprint and Verizon offer an array of equipment that will meet most needs with “data only” plans, texting, internet access and more. The equipment offered by these companies are hearing aid compatible, with ratings from M3/T3 to M4/T4. Before you redeem your voucher, NCDHH staff recommend that you go to a vendor and review the equipment on display. Make note of which model best meets your needs and apply for it through the NSTEP process.

The program will issue a voucher to approved applicants for the purchase of specialized telecommunications equipment. A list of approved vendors is included with the application package. Applicants can choose to have the equipment set up and to request training on the use of the equipment. If you are not sure what phone works best for you, contact NCDHH for an appointment to test equipment to determine what best meets your needs. NCDHH can assist also you in processing your application.

To qualify for NSTEP, you must meet the following requirements:
- You have a certified hearing, visual and hearing, or speech disability which prevents you from using the telephone effectively;
- You are three years of age or older, and can demonstrate the ability to use the equipment
- You must have phone service or have applied for phone service in the state of Nebraska at your place of residence
- You are a current resident of the state of Nebraska;
- You have not applied or reapplied in this program in the last five years

For more information, please call (800) 545-6244.
THE DEAF BIONIC EAR
By Donita K Mains, PhD, CSW

By December 2010, 219,000 individuals worldwide had received a cochlear implant. Almost 43,000 adults and 28,000 children in the United States have cochlear implants. While a cochlear implant does not cure deafness or hearing loss, it is a prosthetic substitute for hearing. Some recipients find them very effective, others somewhat effective and for a few the effectiveness is small.

Here are two local stories. Both gentlemen are older and have cochlear implants. Johnny thinks his hearing loss was really noticeable in the mid-1980s due to noise exposure from farming. This began his usage of hearing aids. In 1998 cancer was discovered on the left side of his face. After surgery and radiation, his hearing loss increased. Around that time he also had a sudden decrease of hearing in his right ear. Even with powerful behind the ear hearing aids, Johnny had difficulty hearing and missed out on a lot. Two years ago, he was tested and the determination was made to get a cochlear implant. After a couple months of healing, his processor was turned on. Every day Johnny does a computer speech program which is designed to help his speech recognition. Even with the cochlear implant, Johnny is still struggling with his hearing and believes there is some benefit but not a lot.

Walt has had trouble hearing for a long time. He got his first hearing aid in the mid-1970s but had battled tinnitus for many years prior. He believes his hearing loss can be linked to heredity and noise exposure. His noise exposure started in the military on a Navy Airplane Carrier and continued while working around diesel train locomotives. Walt wore powerful behind the ear hearing aids for many years but still couldn’t hear much. April 2011 he had his first cochlear implant. After the processor was turned on the hearing would open up for him. He could hear things he hadn’t heard for a very long time. However his excitement was short lived. After three months the implant failed. He received a replacement implant in September. Once again he was hearing. His only objection is how magnetic the transmitter is. One day while working in his shop, the transmitter pulled off and stuck to a metal tool. Depending on the environmental situation, Walt still must concentrate to hear speech. All in all, Walt is happy with his cochlear implant and wouldn’t give it up. He would do the other ear in a heartbeat.

Outcomes with cochlear implants are not 100% perfect, but they have continued to improve. Most recipients report that the quality of speech and environment sounds is better.
NCDHH Board News

The Nebraska Commission for the Deaf and Hard of Hearing Full Board held elections at the June 8th meeting in North Platte. NCDHH would like to recognize the following for their current and future work, providing advocacy, communication access and information to enhance awareness and services for improving the quality of life for all who experience hearing loss:

Mr. Steven Manning, Chairperson
Dr. Jan Moore, Vice Chairperson
Ms. Diane Muelleman, Secretary

NCDHH Full Board Meeting
September 14, 2012
Time: 8:30 am
Lincoln Medical Education Partnership Building
4600 Valley Road, Room 4A
Lincoln, NE

For more information, please contact Lori Burrage by phone at (800) 545-6244 v/tty or by email at lori.burrage@nebraska.gov.

NCDHH Interpreter Review Board Meeting
November 2, 2012
Time: 1:00 pm
Lincoln Medical Education Partnership
4600 Valley Rd, Classroom 4A
Lincoln, NE

For more information, please contact Traci Cooney by phone at (800) 545-6244 v/tty or by email at traci.cooney@nebraska.gov.

These meetings are open to the public. NCDHH encourages anyone to attend who wants to know more about our agency.

Do you have difficulty hearing a one-on-one conversation?
Do you have your television volume up too high?

If so, you may benefit from the use of an Assistive Listening Device (ALD). Equipment has been designed to not only increase the volume of the sounds in your vicinity, but you can also adjust the pitch. Contact a Field Representative at one of our offices. They can prepare a 90-day loan to ensure a device will meet your needs.
NCDHH Services

Are you aware of all the different services the Nebraska Commission for the Deaf and Hard of Hearing provides to all Nebraskans? Maybe you're a person who received hearing aids through our cooperative efforts with the Lions and Sertoma clubs or possibly a person who received an amplified telephone through the Nebraska Specialized Telecommunications Equipment Program. Did you know that NCDHH can do so much more?

Information
NCDHH is Nebraska’s source for information on deafness and hearing issues. By establishing connections with private businesses, hospitals, clinics, and leading educators statewide citizens will have quicker access to appropriate services and resources.

Public Presentations
NCDHH offers community education programs for businesses, schools, and service groups.

Training
Instruction for conversational sign language is available to State agencies that employ or work with people who are Deaf or Hard of Hearing. Classes are tailored to agency needs, last four to six weeks, and require a minimum of ten participants.

Media Center
Nebraska residents can check out books, DVDs and videos covering hearing issues and instructional training for sign language users for a three week period.

Behavioral Health
NCDHH Mental Health Services assists providers, consumers and the general public in promoting accessible mental health, alcohol/drug, and domestic violence/sexual assault services for Deaf and Hard of Hearing citizens of Nebraska.

Interpreter Referral, Licensing & Certification
State law requires that Deaf and Hard of Hearing people have access to licensed interpreters when communicating with State agencies, law enforcement, or the court system. NCDHH maintains a list of licensed and certified interpreters available near you.

Advocacy
Trained NCDHH representatives are available to assist in educating businesses, government agencies, and other groups on ways to improve the lives of people who are Deaf or Hard of Hearing.

Equipment
Short term loans of telecommunications and assistive hearing devices are available through several NCDHH programs for individuals, businesses and organizations. NCDHH also jointly administers a voucher program, NSTEP, enabling most Nebraskans to receive free telephonic equipment.

Hearing Aid Banks
NCDHH coordinates hearing aid bank referrals and processes the applications in accordance with guidelines established by the Lions and Sertoma Clubs. NCDHH approves applications, informs applicants of the necessary testing and fitting procedures, and assists the applicants in the overall process.
Submit an Article Idea!

NCDHH welcomes ideas and articles for consideration and insertion into future issues of the newsletter.

Please submit articles to:

NCDHH Newsletter Ideas
4600 Valley Road, Suite 420
Lincoln, NE  68510-4844

or e-mail them to:
ncdhh@nebraska.gov

Articles submitted are not necessarily the views of NCDHH. The NCDHH newsletter is published four times annually.

Is this address correct? If not, please let NCDHH know. Thank you for your help.