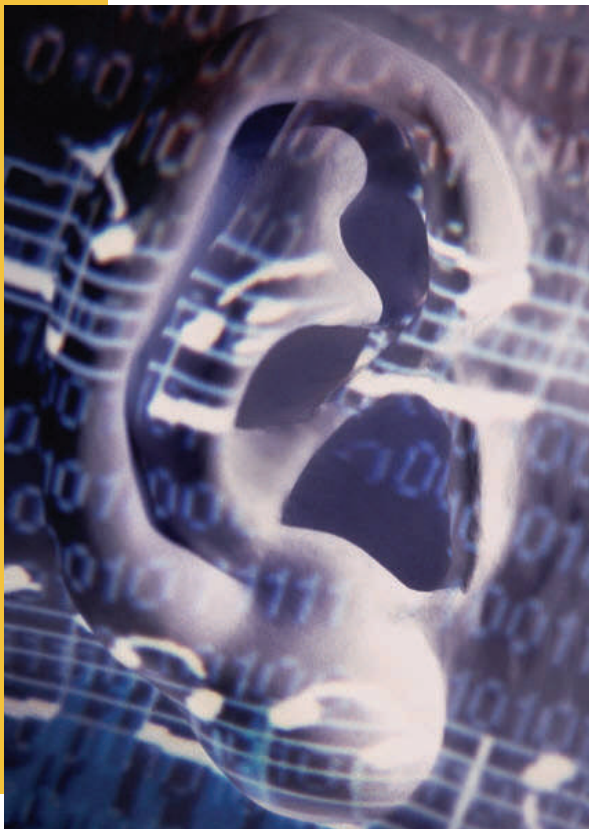


**COALITION FOR HEARING
EDUCATION AND RESEARCH**

**Hear more of life
Be more balanced**



**A non-profit
organization
committed to better
hearing and balance
through medical
treatment, education,
research, and
advocacy**



CHEAR has a Mission and Vision for Hampton Roads and Beyond

CHEAR's Mission

The mission of CHEAR is to foster and provide support for the necessary resources to the Hampton Roads community, its region, our nation and beyond, so that all citizens can obtain the highest quality and comprehensive services for disorders of the ear, hearing and balance. This goal is achieved through programs for identification, clinical care, research, rehabilitation, education, public awareness and advocacy and by cooperation with the medical, educational, and social institutions of the communities in which we serve.

CHEAR's Vision

- ⊙ A world where hearing loss is identified early and treated immediately
- ⊙ A world where the highest quality medical, habilitative and educational services are available to all persons with hearing loss, without regard to socioeconomic status or location of residence
- ⊙ A world where persons with hearing loss and balance disorders can lead lives with little detriment to quality of life
- ⊙ A world where families of children born with hearing loss are able to make informed choices regarding communication options and effortlessly receive the services needed to assist their child in achieving their greatest potential
- ⊙ A world where people without hearing or balance problems are better able to understand those who do have these challenges
- ⊙ A world where teachers, physicians, audiologists, speech pathologists and other professionals have the training and resources with which they can provide for the needs of persons with hearing loss, balance problems and other disorders of the ear
- ⊙ A world where hearing loss can be prevented and reversed
- ⊙ A world where people can grow older with more grace, able to maintain better quality of life with higher levels of activity and socialization without interference or embarrassment due to hearing or balance problems



CHEAR's Objectives

CHEAR exists for the advancement of knowledge of and care of all diseases that relate to the ear. Its primary purposes include:

- ⦿ To support early identification, medical treatment and rehabilitation for children and adults with hearing loss
- ⦿ To support medical and surgical treatment for individuals affected with other ear-related disorders including benign and malignant tumors, neurological disorders, infectious diseases, tinnitus, hypersensitivity to noise, dizziness and imbalance
- ⦿ To support clinical, basic and translational research programs dealing with ear, hearing and balance disorders
- ⦿ To endorse all communication choices, but to specifically support comprehensive services for auditory/oral communication
- ⦿ To educate the general public about hearing loss, dizziness and tinnitus; including the importance of prevention and early detection
- ⦿ To provide educational opportunities for professionals who treat persons with hearing loss or other disorders of the ear; including physicians, medical students, residents, audiologists, speech therapists, social workers and educators



CHEAR's top 3 priority projects for 2009

Mobile Hearing Van



Current statistics point out that only 10% of the adult population is screened for hearing loss, despite the fact that at least 10% of the population and 75% of adults older than 75 years old is expected to have hearing loss. Only 10% of children and adults who could benefit from a hearing aid, actually wear a hearing aid. Only 1% of adults or children who would potentially benefit from a cochlear implant have one. Access to hearing amplification is limited to a select few due to the extraordinary expense of hearing technology, most often not covered by insurance. This project would provide the van, equipment and the audiologist, so that hearing exams and hearing aid care could be taken to those who would not otherwise have access. The hearing aid bank would collect donated aids, purchase new aids and provide hearing aids at low or no cost to children and adults who could not otherwise afford them. This program would also support repairs and batteries.

Children who are given an intensive preschool oral education have the potential to perform as well as their hearing peers in speech perception and language tasks.

Oral Preschool



Resources for oral education are currently extremely limited in Hampton Roads. When a child is hearing impaired and wears either hearing aids or a cochlear implant for amplification and when his family chooses the pursuit of oral speech and language, he must be provided with the required education and therapy in order to achieve his potential, which includes training in listening and speaking. This training includes auditory-verbal therapy and an oral education approach. Without these, his potential is cut short. Hampton Roads will soon lose the only dedicated oral preschool in the area. Without access to appropriate education, these children will have a difficult road ahead and their families may be forced to choose to cut short or abandon hearing and speaking.

Hearing and Balance Center of EVMS



The Department of Otolaryngology and its Hearing and Balance Center provide expert testing and management for hearing and balance problems in adults and children. The clinicians of the Department also run the EVMS/CHKD Cochlear Implant Program, which provides 40-50 adults and children with cochlear implants each year and is the largest program in the region. Current needs for these programs include new technology, funding for research initiatives, and clinicians to support the growing needs of our community.

CHEAR's Initiatives

Clinical

- ⊙ Assist in the provision of comprehensive medical, audiological, and speech and language services to all persons with hearing loss
- ⊙ Support the improvement of newborn hearing screening programs to identify hearing loss at the earliest possible age
- ⊙ Support the coordinated linkage of infants with hearing loss with early intervention and educational services

Education

- ⊙ Support and encourage opportunities for auditory/oral education
- ⊙ Assist in development of comprehensive preschool oral education for ages 3-6 and promote inclusion in the general education classroom
- ⊙ Support training programs for educators on effective techniques for teaching children with hearing loss
- ⊙ Provide support for training opportunities for primary care physicians, residents, medical students, and audiologists on hearing loss and balance disorders

Research

- ⊙ Support research on cochlear implant and hearing aid technology
- ⊙ Support research on the molecular biology of hearing loss, including genetics of hearing loss, molecular biology of hair cell damage, regeneration, and protection, molecular medicine for the treatment of hearing loss
- ⊙ Support basic science investigations into the physiology of hearing and balance, as well as the associated disorders

Community service

- ⊙ Develop programs to educate public on hearing and balance disorders
- ⊙ Provide scholarship programs for children with educational needs
- ⊙ Provide scholarship programs for educators, audiologists, speech pathologists and other students and professionals for training specific to caring for persons with hearing loss or dizziness
- ⊙ Develop and support programs for donation and refurbishment of hearing aids and FM systems
- ⊙ Assist with funding for cochlear implantation and hearing aids for persons who are uninsured or under-insured
- ⊙ Funding and management of mobile van to provide hearing screenings and hearing aid support for persons in the community who do not have access to services

WHY? Consider these facts...

On Hearing Loss:

- Hearing loss is the most common birth defect.
- 6 of every 1000 infants are affected by hearing loss in the USA.
- 1 of every 1000 infants is born profoundly deaf in the USA.
- Additional children are born with risk factors for progressive childhood hearing loss.
- Approximately 15% of young people ages 6-19 show signs of hearing loss.
- Between 2003 and 2005, newborn screening led to the confirmation of hearing loss in 287 Virginian babies. In 2006 alone, 111 infants were confirmed to have hearing loss.
- In Virginia, more than 1,500 students, ages 2 – 22, receive special education services with a primary disability of hearing impairment/deafness each year.
- In 2006, the National center for Health Statistics estimated that 37 million persons, or 17% of the US population, have hearing loss.
- Hearing loss is more common than both visual impairment and heart disease.
- 40% of those over 65 years of age have hearing loss.
- Profound deafness creates an annual income loss to our society of \$2.5 billion.
- Deaf people earn 30% less than the general population.
- Lifetime costs of deafness for an individual are estimated at more than \$1 million.
- Only 1/3 of children who could benefit from hearing amplification possess the financial resources to obtain treatment.
- Adults with hearing loss are more than four times as likely as adults with good hearing to experience serious psychological distress
- Studies have linked untreated hearing loss to: irritability, negativism, anger, fatigue, tension, stress, depression, avoidance or withdrawal from social situations, loneliness, impaired memory and ability to learn new tasks, diminished psychological and overall health (Better Hearing Institute, 2008)
- Only 10% of children and adults who could benefit from a hearing aid, actually wear a hearing aid.
- One hearing aid costs \$1200-3000 and most often is not covered by insurance.



On Hearing loss and education:

- Children with hearing loss of any degree without appropriate identification and intervention have reduced academic performance.
- The average student who is deaf and graduating from high school reads at a 4th grade level and demonstrates 5th grade math skills.
- 97% of the US population does not know sign language but 90% of deaf children are born into hearing families.
- Children with hearing loss who are identified and receive effective early intervention services before six months of age demonstrate superior language skills over those identified after six months of age.
- Many children who are deaf and hard of hearing and have early, effective intervention are ready to transition to inclusive classrooms by kindergarten or first grade.
- Speech intelligibility is better in children with hearing loss who are educated in educational settings that emphasize oral communication.

On Dizziness and Balance:

- 90 million Americans or 42 percent of the population will complain to their doctors of dizziness at least once in their lifetime.
- Twenty million Americans chronically endure dizziness and balance disturbances.
- Balance disorders increase in frequency in the older age groups and are the most common presenting complaint in people over the age of 65 years.
- U.S. physicians report a total of more than 6 million visits a year for complaints of dizziness. In many cases, the cause of dizziness is due to a disorder of the inner ear.
- Dizziness affects 40% of people over the age of 40.
- Fifty percent of elderly individuals who fall and break their hips die within two years.
- Approximately 615,000 individuals have been diagnosed with Ménière's disease in the United States. Another 45,500 are newly diagnosed each year.
- U.S. doctors reported 5,417,000 patient visits in 1991 because of dizziness or vertigo.
- The number of people affected by Benign Paroxysmal Vertigo each year has been estimated between 10 per 100,000 and 64 per 100,000 people.
- 347,000 hospital days per year in the U.S. are incurred because of 'vertiginous syndromes,' 202,000 because of 'labyrinthitis' and 184,000 because of 'labyrinthitis unspecified,' with several thousands more accounted for by other balance disorders.

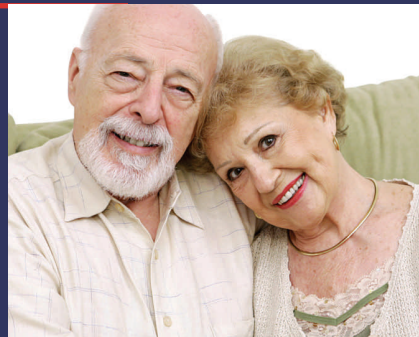


On Tinnitus:

- More than 20 million people in the United States suffer from migraine and about 25% of these experience dizziness during attacks.
- Tinnitus, or ringing of the ears, affects more than 50 million individuals in the U.S. alone.
- Approximately 10 million persons report that tinnitus impairs their sleep, concentration, work performance or relationships.
- 12 million Americans seek medical attention each year for tinnitus.
- 2 million Americans report that they are so seriously debilitated by their tinnitus that they feel completely disabled.
- Up to 90% of all patients with tinnitus have some level of hearing loss.
- Approximately 70% of all medications included in the Physician Desk Reference (PDR) list tinnitus as a possible side effect.



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Be more balanced**



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