

# Hear and Beyond: An Interview with Gael Hannan

By DOUGLAS L. BECK, AuD

**G**aël Hannan is an advocate, author, and speaker who grew up with a progressive hearing loss that is now severe-to-profound. She is a past director on the national board of the Canadian Hard of Hearing Association (CHHA) and has served as a speechreading instructor and volunteer for many hearing-related programs. She developed the Hearing Foundation of Canada's "Sound Sense" hearing awareness program which is delivered to elementary students across Canada, and created a national awareness campaign on infant hearing screening for the same organization. Her articles and reviews have appeared in *The Hearing Review*, *Hearing Health*, and other magazines, and she writes a regular column for the Hearing Healthcare and Technology Matters (HHTM) blog. Hannan is also the author of the humorous memoir *The Way I Hear It: A Life with Hearing Loss* (2015), and in May she will publish a new book with fellow hearing advocate Shari Eberts titled, *Hear & Beyond: Live Skillfully with Hearing Loss*.

**Beck:** Hi Gael! First, let me congratulate you and your coauthor, Shari Eberts, on the publication of your new book!

**Hannan:** Thanks Doug! We're very happy to see it in print and delighted with the excitement it has generated.

**Beck:** Me too! I think you've written about a very important topic in a very easy-to-read, informative, entertaining, and casual manner.

**Hannan:** That was the goal. As people who

wear hearing aids and have been living the life (as it were), Shari and I wanted to write about what we've learned and experienced to benefit other people on their hearing loss journey. Hearing loss doesn't come with an operating manual—so we decided to write one.

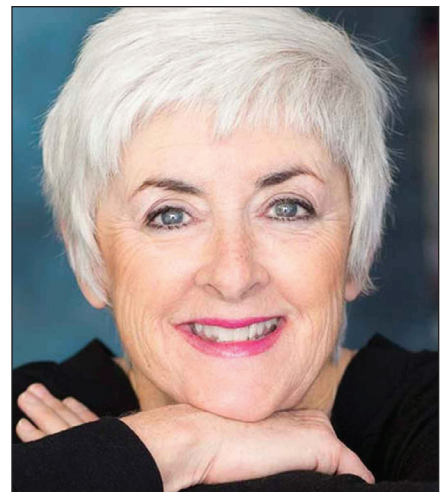
**Beck:** Exactly right. Further, even after 38 years as an audiologist, I am the first person to say it's very difficult to spend enough time with people—particularly those who are new to hearing loss and hearing aids—regarding how to handle every hearing and listening situation! I think it's fair to say each hearing care professional (HCP) tries their best to provide an overview and personal instruction, best practices, useful websites, and more.... but the actual day-to-day experience is unique to each person.

Further, most hearing care appointments are an hour at most, and that time is precious! In that one hour we must cover reimbursement, insurance, how to insert and remove hearing aids, identifying left versus right, how to adjust loudness and programs, how to stream music and phones, how to change or recharge batteries, how to clean receiver and mic ports...and, of course, warranty information, follow-up appointments, referrals, and so much more. And often, after an introductory session, we send the patient/client back to the real world, where they hit the ground running! Having your book as a thorough, informative, plain-speaking, fun, and entertaining "pre-read" allows the new hearing aid user to better understand the advantages and limits of contemporary amplification. I think you've hit a home run.

**Hannan:** That's very kind of you, Doug. The book is also for people who have been living and struggling with their hearing loss for some time, as they may find alternative and useful solutions to their ongoing problems.

**Beck:** Yes, I agree. And nobody has ever been injured because they learned too much about a product, a service, or a process before engaging! Optimizing hearing, listening, and hearing aid use in multiple acoustic and challenging environments is very important.

Nonetheless, for those who have not yet had the pleasure of meeting you, please review a little bit of your history about your own personal journey, and how it was that you came to



Gael Hannan

write this wonderful book?

**Hannan:** Doug, you and I are about the same age, mid-to-late 60s, and when I was born in Canada, there was no such thing as universal newborn hearing screenings (UNHS). Today, in 2022, UNHS programs are common across the western world. If things had been different then, someone might have noticed I was born with a hearing loss, but then again, maybe not! Regardless, the cause of my hearing loss remains unknown, and my diagnosis didn't occur until I was about 2.5 years old, which was about average back when we lived in Halifax. My mother was a nurse, and she did notice something was wrong. However, she wasn't an audiologist or an ENT, and she didn't know whether it was behavioral, psychological, auditory, or whatever else. She just knew something wasn't right!

**Beck:** If you don't mind me interrupting, I clearly recall Derek Sanders, PhD, telling my undergraduate aural rehabilitation class in 1979 something along the lines of "When the mother tells you something is wrong, something is usually wrong!"

**Hannan:** Especially my mother! Unfortunately, my ENT told my parents there was nothing that could be done, which was a common misconception back then. I was tested every year and I even asked for hearing aids...but they said no, hearing aids wouldn't help. By the time I was about 20 years old, my hearing loss progressed to what was called "moderate" and I finally received my first hearing aid through a different ENT office.



**Douglas L. Beck, AuD**, recently retired after working as an audiologist in many settings, including research and cochlear implants, private practice, and industry. He has served

as editor of *AudiologyOnline* and as web content editor for the American Academy of Audiology (AAA) website. Dr Beck is an Adjunct Clinical Professor of Communication Disorders and Sciences at the State University of New York at Buffalo, and serves as Senior Editor of Clinical Research for *Hearing Review*.

**Beck:** Wow! Well, even though you and I grew up in the “dark ages,” there were professionals (though admittedly rare!) who knew the correct answer. Of course, Marion Downs was at the University of Colorado in those days. She used to say any child with hearing loss greater than 15 dB HL has a substantial hearing loss and absolutely needs hearing assistance. Turns out, she was correct! But clearly, your ENT was not aware of the amazing work she and other pediatric audiologists were doing, or the results they were getting.

Let me be clear for any of the moms and dads who read this: When hearing loss in any child is greater than 15 dB HL, it requires a comprehensive audiometric evaluation—*not* a screening—and needs to be treated with whatever the appropriate technology is, as determined by a pediatric audiologist, so the child can maximally develop speech, language, psychological, emotional, hearing, and listening skills.

By the time you moved to Toronto, I had completed a master’s degree in audiology from the University of Buffalo only some 150 miles south. Audiologists already were teaching, organizing, and writing books on counseling and working with the whole family. We learned about working with the educational audiologist in the schools and making sure the amplification fit the needs of the individual and their family. We knew the impact of hearing loss on the individual; we knew about the importance of early diagnosis and treatment; we knew about hearing aids and how to fit them to the needs of the individual and the family; we knew about FM systems in classrooms—and we definitely knew about the value of pediatric audiology. However, less than 150 miles away, there you were, with no access to the same information, struggling to hear and to listen, learn, and participate. I don’t know how you survived, succeeded, and thrived, but clearly you did!

**Hannan:** I did the best I could with what I had. It was either work hard or give up; you know me, giving up is not an option.

**Beck:** Absolutely. And because hearing loss is invisible, people with typical hearing have no idea how hard you had to work, how exhausting it is to simply follow the conversation in a noisy restaurant or classroom, and how much listening effort is required just to get by. It really does take tremendous effort and it is exhausting—and your book really helps illuminate these issues.

It’s important for people to understand that some 95% of all hearing loss is not a medical or surgical problem; it’s an audiologic problem. Further, without a comprehensive evaluation and appropriate contemporary management using peer-reviewed, best practices developed by subject matter experts at AAA or ASHA, the patient/client is at risk of falling short.

**Hannan:** I agree, Doug, and hearing loss is also a *social issue*. I hope the parents reading this will understand the importance of pediatric audiology and will seek the appropriate help from the appropriate professionals. For me, it took decades to understand, to learn, to engage, and to fight for the rights of people with hearing loss, who are often more vulnerable to suffering from less sensory input, and they are likely to experience more anxiety, self-doubt, depression, and isolation—none of which is an asset! I also received great benefit from attending conferences held by the organizations like Hearing Loss Association of America (HLAA) and CHHA.

**Beck:** And so, 25 years after you first attended a hearing loss conference—lucky for the rest of us—you wrote an amazing book.

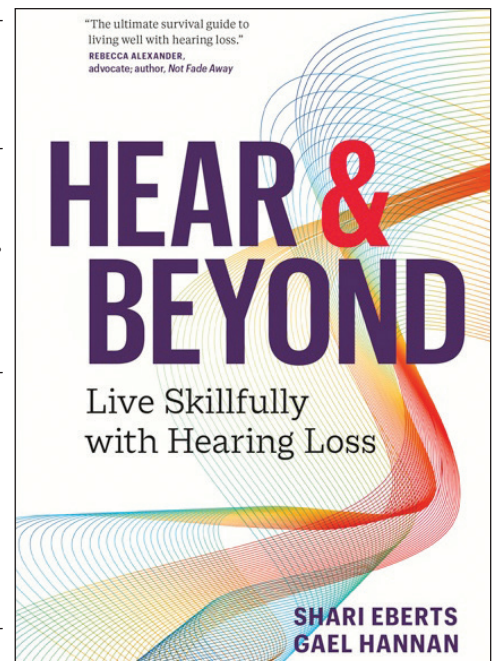
**Hannan:** There were a few steps in between. Shari and I both read many good hearing loss books and articles, along with some that are overly technical (and, excuse me, boring) for the general public. We wanted to write a skills-based book that we could have used much earlier in our hearing loss journey.

**Beck:** I believe I’ve written some of those technical and admittedly boring articles and chapters!

**Hannan:** Maybe! The point is, we wanted and needed a real-life, experience-based book for a person with hearing loss who doesn’t have years to waste and who needs to know how to communicate successfully in the real world.

**Beck:** You’re right. Most of the literature on hearing loss, hearing loss diagnostics, hearing loss management, hearing aids, cochlear implants, aural rehabilitation, and assistive listening devices is written for professionals. Of course, that’s necessary and important, but we clearly and absolutely need more and better information for those addressing the real-world, day-to-day experience with hearing loss, hearing aids, and cochlear implants.

**Hannan:** Yes! Our book’s focus is on three major strategy groups: the technology, the



emotional/mental/attitudes, and the communication game-changers (self-advocacy, evaluation tools for listening situations, not bluffing, etc.) and how to apply them in everyday life.

**Beck:** And so, without giving away any more of the content, I must absolutely endorse the book for parents and for individuals with hearing loss, as well as people who have others in their lives with hearing loss. The experiences the two of you share are extraordinary, instructive, pragmatic, and insightful.

And if you don’t mind, I’d like to mention that you received a cochlear implant about 5 years ago, and so you are very familiar with hearing aids, and their benefits and limitations, as well as other hearing options for people who need more than what hearing aids can offer.

**Hannan:** That’s right. But in our book, Shari and I espouse the need to change our goal from simply hearing better to *communicating better*, using other crucial strategies to augment our technology. That said, I do love my left-side hearing aid and I adore my right-side cochlear implant which has increased my overall “soundscape” and made speech sounds much richer.

**Beck:** Gael, thanks for writing the book. I whole-heartedly endorse and recommend this book for all people with hearing loss, for the parents of children with hearing loss, and for everyone else, too! It’s an important, educational, and insightful book, and it’s a quick read.

**Hannan:** Thanks Doug, Shari and I had a joyous experience in writing it. ▀