

NAME
Address
Phone
Email

Senator Kirk Watson
P.O. Box 12068
Austin, TX 78711

Dear Senator Watson,

I am writing in regards to SB 354. As (the mother of a child with hearing loss) (a professional working with children with hearing loss), **I am extremely concerned about the bill** and the impact it would have on (my family) (the families I serve), as well as thousands of other families in Texas, should it be enacted. Please allow this letter to provide some insight (into our story and) (as to) why we are so **adamantly opposed to the bill**.

(My son, NAME, was born on DATE). As is standard, the newborn hearing screening was administered before we were discharged from the hospital. As (NAME) was unable to pass the screening, we were referred to a pediatric audiologist who determined that (NAME) had bilateral (in both ears) sensorineural hearing loss. We were referred to ECI, Texas' Early Childhood Intervention Program and (he) was fitted with hearing aids (at 2 months).

The early days of (NAME's) diagnosis were extremely difficult. We were confronted with issues and acronyms (SLP, AVT, ASL, ABR, etc.) that we knew nothing about, so we fell in line, and did what we were told to do. I look back now, nearly 4 years later, and feel for the new mother that I was then. I see the flaws in the system. I think about the guidance, information and options that I wish I had received. I also see how easily parents can be swayed by particular agendas. And now, **I am concerned by the tsunami of additional problems that SB 354 would create**.

My concern is that to legislators such as yourself, **SB 354 might sound like a good idea**. Who wouldn't support giving deaf kids access to sign language? Before (NAME) was born I am sure I would have thought the same thing. However, after nearly 4 years of immersion in the world of hearing loss, I have a much different perspective. What I have learned is that **all kids with hearing loss are not the same**. They are a widely heterogeneous group of children; some with autism, Downs Syndrome, cognitive impairment and countless other traits and challenges. **There is no one right way to provide communication, therapy or education**. The needs depend on the child, the level of their hearing loss, any accompanying disorders, as well as the wishes of the family.

I understand that LEAD-K has sponsored this bill. What you may not be aware of is that LEAD-K and groups like them have an extreme, radical, **philosophy that that does not represent the mindset of most families of children with hearing loss** (since 90% of children with hearing loss are born to normal hearing parents.) My understanding is that these groups believe sign language should supersede spoken language. I also understand that they are opposed to the use of hearing

aids and cochlear implants. In fact, these groups call the rise of cochlear implants to be a “genocide” or “ethnocide” on their culture. *Yes, you read that correctly.* They feel if a parent attempts to improve their child’s hearing, they are not accepting the child as they are and are contributing to the genocide of the Deaf culture. I take great offense to that and simply could not disagree more. To me, (NAME) is perfect. I do not think of (him) as being “damaged” or that there is something “wrong” with (him). As (his) mother, **I just want to give (him) every possible opportunity to succeed** and every tool available to reach (his) full potential. Should (he) have been born with one leg, (he) would have a prosthetic. If (he) had seizures, (he) would receive medication. As it was, (he) was born with hearing loss, so (he) wears (hearing aids/cochlear implants).

The bill calls for inclusion in LEAD-K’s program should a child have a greater than 20 decibel (dB) loss. A person not familiar with hearing issues has no concept of what that means. If they think about a deaf kid, the stereotypes come to mind... distorted speech and so on. However, to a person familiar with hearing loss, 20 dB is so minor that it does not require a hearing aid, much less sign language. Furthermore, **there is no evidence based research to substantiate any particular dB cut off level that requires sign language.** Many profoundly deaf children have fully intelligible speech and are integrated into the mainstream hearing-speaking society made possible by hearing aids and cochlear implants. Further, many people have a loss of 20 dB or greater, without even realizing it. They have normal speech and language capabilities and do not wear hearing aids. To put it into perspective, with the help of (his) (hearing aids/cochlear implant), **(NAME) hears at 15 dB**, which is close to the normal range. **(He) can hear birds chirping and (he) can hear me when I whisper to (him).** However, because of (his) unaided threshold showing a (moderate) hearing loss, LEAD-K, wants to treat (him) the same as a child with total profound loss and no hearing technology.

I believe the best analogy, for people not familiar with hearing loss, is with vision. If you do not wear glasses or contacts, you certainly are close to someone who does. **So if you are nearsighted and require a prescription to see properly, are you categorized as being blind? Should you be mandated to learn braille?** Of course not. You go to the Optometrist, get a prescription and wear glasses or contacts to improve your vision. You carry on, functioning in life as a sighted person. The same is true with hearing. You have hearing loss, so you go to an Audiologist, are fitted with hearing aids or cochlear implants, get speech and hearing therapy and function through life as a hearing person.

(NAME) thrives in our family. **Nobody in our family is a part of the “Deaf culture”**, including (NAME). (He/She) is a very smart, and fiercely independent (child) who is educationally on par with (his) “normal hearing” peers. We attend speech therapy every week and (he/she) talks non-stop. (NAME) is flourishing and **does not require sign language to communicate** or special education classes.

Since (NAME) is nearing Kindergarten, my husband and I have been debating whether to send (him) to public or private school. We liked the idea of the private schools for the small classes and safe atmosphere. However, in the end, we recently decided to buy a house that feeds into an excellent school district, as we thought public would provide (NAME) with the best resources. However, **this bill puts that decision in jeopardy.** I will not have my child subjected to special

education unnecessarily because LEAD-K thinks their desires for (him) should be paramount to mine.

I recognize that **you are faced with a difficult task**, proposing and amending policies on issues that you are not personally familiar with. I do hope my letter has shed some light on the fallacy of the argument put forth in the bill and provided some understanding of **the position of the vast majority of families and professionals**. While the intent of portions of the bill may appear on the surface to be admirable, it certainly should not be passed. Sign language is appropriate and necessary for some kids with hearing loss, but not all. **The need should be evaluated by the child's team of qualified and experienced healthcare professionals, along with the child's parents** - not a committee of individuals outside the medical and related fields of therapy and rehabilitation. **Parental choice should never be undermined**, especially by special interest groups. Families deserve to receive unbiased counseling about **all communication options** upon their child's diagnosis and throughout their schooling.

I would welcome the opportunity to speak with your office and look forward to the opportunity to testify on this issue.

Kind Regards,
(Parent Name and Signature)

cc:

Senator Larry Taylor
P.O. Box 12068
Capitol Station
Austin, TX 78711

Senator Kelly Hancock
P.O. Box 12068
Capitol Station
Austin, TX 78711

Senator Eddie Lucio, Jr
P.O. Box 12068
Capitol Station
Austin, TX 78711

Representative Matt Krause
P.O. Box 2910
Austin, TX 78768