REALTIME FILE

EHDI 2018 Annual Meeting

Shine a Light: Fostering Development Across Domains

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Shine a Light: Fostering Development Across Domains.
>>Robert Cicco: Good morning, everyone! Everyone excited today? Wow, that was like half excited. It's OK. We're going to start in about 30 seconds. Still waiting for people to filter in and everything. So come in, quickly take your seats, and we'll be starting in about 30 seconds here. We have an exciting morning for today, exciting rest of the day. So make sure you get another cup of coffee. All right, that's going to be a quick 30 second, because everyone is coming in. This is good. Again, good morning, everyone! My name is Bob Cicco, I'm a pediatrician neoNatologist involved with EHDI for many years. I want to welcome you to Tuesday of the EHDI meeting.
[Applause]
We hope you've enjoyed the meeting so far. I know you've enjoyed the meeting so far. I to do have a few announcements before our next speaker, our plenary speaker for today. These are housekeeping chores that you need to be aware of, given the fact that many of you will be leaving today. For those checking out, luggage storage is available. If you bring your luggage to the bellman's desk near the hotel front desk, you will be able to store it there.

 At the end of this plenary session, we're going to announce the poster awards and the EHDI website award for 2018. I just want to make you aware, so after the plenary session, I will give closing remarks, make sure you stay in your seats. We don't have another session for a while afterwards, because these are really, really, really important awards, and I think everyone needs to stay and listen to them. If you haven't already seen the posters, make sure you do so.

 We'd also ask that the winner of those awards stay for a few minutes after the session so we can take their picture. Just so you know, blue ribbon will be placed on the awarded posters. You're encouraged to check out those. But like I said, every one of those posters has been excellent. So don't just go to the award winners. Go to all the posters, because they are all ‑‑ they all have fantastic information for us.

 The hotel is again offering a variety of grab‑and‑go options in the exhibit hall. They're going to be available for purchase by cash or credit card. The restaurants are also open for lunch today.

 There's a couple people that we need to thank for the work that they have done in making this meeting so successful. I just want to mention a few of those people. Our audio‑visual company, the Alliant Event Services.
[Applause]
The phenomenal CART writers and ASL interpreters through Alternative Communication Services. They have been absolutely awesome!
[Applause]
And the conference center for organizing this meeting with great care and skill and professionalism that they've always shown.
[Applause]
Finally, on behalf of the meeting co‑organizers, I'd like to recognize and thank the 2018 Planning Committee and staff for their dedication to making this meeting a success. Now, I want you to understand that this is absolutely the hardest part of the meeting so far, because I have to call out much's name and try to pronounce them right. For those who I mispronounce, I apologize in advance. What I want you to do, when I call your name, stand and stay standing until I'm done with everybody. So everyone can be recognized at the same time. So would the following people stand. Zainab Alkebsi. Sarah Ammerman. Brenda Balch. Treeby brown. Joy Brisighella. Karen cover stone. Pam Dawson. Michelle Esquivel. Jeannene Evenstad. Marcia Fort. Gala Guignard. Linda Hazard. Tom Horejes. Is Tom here? I can't see. Are you here, Tom, standing? I was told, isn't it true, because we've all seen him yesterday, Horejes rhymes with gorgeous. Vicki Hunting. Casey Judd. Michelle Koplitz. Christine Liao. Karin Neidt. Yiesell Rayon. Ashley Renslow. Sandi Ring. Tony Ronco. Hanna Sawher. Lisa Schimmenti. Sadie Silcott. Vicki Thompson. Alyson ward. And Karl White. How about these guys, every year, hit a home run! I want to recruit them for the Pittsburgh pirates, by the way, because they're going to be short of home runs this whole year, I got to tell you. That's off the point. This group always hits a home run and really, really, really deserves our thanks and appreciations for the hard work they've put into this. Let's hear it for them.
[Applause]
All right, with those announcements out of the way, let's proceed to welcoming our speaker for today, Dr. Amy Szarkowski. Amy is a psychologist who specializes in working for children with reduced hearing in their families ‑‑ and their families. She works in the deaf and hard of hearing program at Boston Children's Hospital, where she offers guidance to families, provides individual counseling to deaf and hard of hearing children and adolescents, and serves as a member of an interdisciplinary team that performs comprehensive assessments. Dr. Szarkowski is on the core faculty for LEND, those who don't know what LEND is, it stands for Leadership Education in Neurodevelopment and Related Disabilities. At Boston Children's Hospital. Sponsored through the Institute for Community Inclusion at UMass in Boston, through LEND, she teaches and advises future leaders in healthcare about the needs of children with reduced hearing and children with disabilities interacting with medical students.

 Dr. Szarkowski holds an academic appoint in the department of psychiatry at the Harvard Medical School, and has also had the pleasure of teaching as an adjunct faculty member in the deaf and hard of hearing infant toddlers and families collaboration and leadership program at Gallaudet University. Please join me in offering a warm welcome to Dr. Amy Szarkowski!
[Applause]

>> Amy Szarkowski: Thank you. I wonder if he could feel my palms sweating. All right. Here we go. Today, we're going to talk about shining a light. That's our theme. I warned the interpreters already I'm going to use that theme consistently throughout the presentation to the extent that you will be like OK, that's probably sufficient. I think there's a lot to be said for shining a lot, celebrating the positives in where we have come from as a field, and sort of moving us forward. So here we go!

 One thing, I have small kids, so on my cell phone I have lots of adorable pictures of them, and no good pictures of myself. There's one thing. So this is me. I thought I should probably do a disclaimer, that's not my body. I probably should give credit to Allie Reeseman, a Massachusetts resident, that is her body. When I was young, I thought I wanted to be a gymnast. My family couldn't afford classes. I never made it beyond cartwheels. My dream of being an Olympic athlete was cut short. At 5'2" with substantial thighs my whole life, I thought that would have been a good match for me as I was growing up. How did I end up here? I don't know! Pinch me, right? Somehow, they asked me to do a plenary for you, so here I am. This is my make myself credible slide. I had a speaker who introduced me, so I don't have to do too much about that. Usually they say do a disclaimer, where you get your funding from. I will say they should pay me more. But I do get paid from Boston children's UMass and Harvard and EHDI sponsored me being here. Thank you for that opportunity.

 OK. Rule number 1 for doing a good presentation, know your audience, right? Having been to EHDI seven or eight times, I'm familiar that there are some camps that exist and have existed out there before. I either need to do a disclaimer and say the presentations of yesterday make this slide obsolete, or I need to think, maybe they set the stage for me pretty well, because they talked about moving beyond those camps. In part, that's one of my messages to you. So, here we go. I'm incorporating a shining light moment! See on that slide, where the sun is shining through? No, you can't, because I cut it off. There's a sunlight shining down there. What you would then follow my joke would be that, really, the light shines on all of these camps, sort of equalingly. So although there are existing camps, and some of my ‑‑ some might say it would would be difficult to get those camps to work together, I say bull.

 I had choices of pictures here. This one seemed more appropriate than some of the other ones that I thought were more funny. I didn't want to offend anybody.

 So, here's why I say that, because I'm going to go with the assumption that those of us in the audience share a lot of qualities. I think that as a whole, we're a group of really passionate people who are intelligent and are committed and really want what's best. We have these shared goals of working to foster development and outcomes in children with reduced hearing and their families.

 I think when you, as the speaker yesterday said, when you find the common ground, you see the humanity in another person, when you say we have common ideals in mind, when we come from that place, we're better able to see the perspectives of others.

 This is a cute picture with the head cut off. Of a girl who's opened a book. It's like magic. I thought I might share I have a daughter in first grade who has learned to read over the last couple years. What a treat that is. It is like a magical process to go from recognizing letters and those symbols have some meaning. Then it puts it together, she's reading stories and asking questions.

 It feels like magic to me as her mom. As people who study literacy, they know there's lots of really prescribed ways we can help to make that happen. I think the same can be true for what we do with the kids that we see and serve, that what we kind of do is magic. But there are lots of ways in which we can think thoughtfully and carefully and implement our practices in a way that can lead to those outcomes that feel magical.

 The intent of this too is to sort of set the stage to tell you I'm going to tell you a story. The story today is focusing a little bit on then and now and what I think might come next in terms of the field of EHDI.

 It's one perspective. It's mine. But I have the microphone, so bear with me. I do recognize there are other perspectives. I will highlight the things that I think have been really influential and important into sort of establishing where we are now. Luminaries then, meaning some time ago, up until pretty close to now, there are people who have shaped and informed this field in such important ways and have been instrumental in changing lives for children who are deaf and hard of hearing and for their families.

 I think it's important to recognize the luminaries. I told you, going to use that light theme throughout. Before there was zero to 3, there was like 4 to 7. Not a good way, right? There was a time when identification of hearing status happened at a much later time, when implementation of services and supports didn't occur until much later, and so there has been a seismic shift in moving those things back into the early developmental period, which has huge implications for families. There are people in this room who have helped to make that happen. That's extraordinary.

 Because I have the mic, I'm going to honor a few of the folks who I think have been super influential in making this happen. I'm going to call out a few names and recognize those folks. Christie yoshinagh‑tano, who nationally helped to make us have universal newborn hearing screening. Her along with other people, I'll highlight folks, but I recognize there's always teams around them as well.

 She's one of them. Beth Benedict, who has been a leader in educating people, currently on the faculty and administrator at Gallaudet University, together with Marilyn sass‑leer, developing and establishing the infants ‑‑ you can't cry! I have to stay composed. OK. Together with Marilyn, establishing the infants, toddlers, and families program, and being instrumental in having us as a field think about what are the competencies necessary for early intervention providers. How do we train people to do that? How do we train those going into the homes, doing the frontline work to really be outstanding and fabulous?

 There are of course, many others. Janet DesGeorges had this idea of families need to be at the table, they're stakeholders. What has she done now? Now Hands & Voices is co‑sponsoring EHDI, it's a national organization with international implications and outreach. Wow, the impact is huge! So states across the US have brought family members to the table and are participating. It's huge! A big change from where we were then.

 Rachel St. John is a physician, and a sign language interpreter. She brings to the medical field huge, important information about why we need to care for deaf and hard of hearing kids in this way, as an EHDI champion she has informed her field in ways that are big and enormous and important.

 Sanji Gulati is a psychologist who is late‑deafened. He worked on my team. He has an important role in helping us think about what happens when language isn't provided. He's also zen. Anybody met Sanjay? Zen. Things don't bother him. He, from my earliest time when I first arrived at Boston Children's Hospital, he set the stage for let's talk about families. Even though he's a psychiatrist and diagnosing people with mental illness, he frames it in a way that says how can we support them to function better? What an important thing that is to kind of have that influence on our field.

 Karen Hopkins was one of the leaders that I met when I came to ‑‑ stop. When I came to Massachusetts also. She is a leader within the state of Maine and also certainly regionally. But she's a person who models this ability to navigate hearing worlds, deaf worlds, everything in between, families, professionals, and I think that she's a kind hard ‑‑ she's a kind heart and we need people like that to help to lead this field.

 So, as I take this chance to give thanks and gratitude for those who have really influenced me in big ways, I want us all to do that too. I think that collectively, it might be that you're on a team and your supervisor has encouraged you, or you've had a mentor who really said go to EHDI, let's get you funding, make sure you can be there. Perhaps you had a teacher in your undergrad or graduate school that said you are good at this, follow this passion! Right? Whoever that is in your sphere, thank you. Say thank you to them. Because those luminaries have got us where we are.
[Applause]
 Because of their work, many families are thriving. I think that's a really important thing for us to think about, to know, and to remember. That when there is a tendency or a conflict that arises or we feel like we're in different camps, families are doing really well, lots of families. We have lots of people who've laid the groundwork through the EHDI systems and the programs they work, who helped to make that happen. Yay for that!

 OK. Here we go. Done with tears. Stories have the beginning, middle and end. I'm getting to the middle part, where I complain a little bit. Here we go. Let's talk about now. What's happening in terms of service provision for children who are deaf and hard of hearing? Again, we've done lots of really good stuff. But I do think that it is time and relevant to think about where we still need to go. So that's where I'm at now.

 Language. Boy, we've talked a lot about language, yeah? The focus of our field for a really long time has been on language, and five times yesterday at various talks, presentations, workshops, I heard people say language is the most important thing. Language is most important thing! We've got to get language in there. I think that that has been, in some part, the message, collectively as a field, that we've really said language matters.

 I question why. Why does language matter so much? We'll get to that. I also want to make the point when I say language, I'm talking sign language, I'm talking spoken language, I'm talking language. It is not in terms ‑‑ I'm not thinking in terms of modality, but really thinking in terms of language that is accessible and the child can process. OK? For the duration of the presentation, when you see language, it's all in caps. That's intentional, because I don't want at that talk about sign language and spoken language. I want to talk about language. OK?

 Drawing on my shine the light theme, here's a little bit where I think we are now in our field. There are some lights. It's not so pretty, though, in some ways. There's some missing parts, some things not well illuminated. I warned the interpreters they'd have to come up with lots of signs for this variety of talking about lights. So here's where I think we are, and I think that being a little bit honest about that with ourselves is an important part of helping us to move forward. My question is why is language so important? And is language the most important thing?

 I would argue language is important because it gets us to other things. On the next several slides I talk about those.

 We need language for connecting and communicating with others. We don't need language in order to label things, right? That's a ball, that's a chair. Not so relevant. Lots of kids can label all of the animals in the book about the zoo, but knowing what a zebra is and knowing how to ask when, when is that happening, this latter part is much more significant for helping a child to understand their world and their context. Right?

 As an adult, I went to Japan and learns some Japanese. I didn't learn zebra, because I wasn't a kid. When I had kids, we speak Japanese in my house, I had things to catch up on. But the language that you use for conversation and for interacting and really letting people know where you're going, what are you doing, that is missing in some of the training that we've done, because we focus so much on the labeling and the building of vocabulary without always thinking of how to use it for really communicating and connecting with others.

 We need language for thinking and problem solving. That seemed like an easy statement. For example, in order to think and problem solve, you have to be able to hold competing ideas in your mind. You have to be able to say what's the plusses and minuses of this idea and of this idea, and how do they compare?

 I have to be able to think about what would be the consequences of action A, action B, action C, then how do I weigh those out? That requires language. Again, all caps. I don't know that as a system we've been addressing language at that level. Right? Now, I recognize some of you are fabulous and you're here in this room, so you might be doing that. But I also recognize that there are others, perhaps those with whom you work and others out there, who are not thinking of language in the same way.

 While I might in some ways be preaching to the choir, I do think it's important for us collectively to think about how are we teaching and structuring language? Five times yesterday, people said language is the most important thing. So I go back to why. Are we thinking beyond just getting language in and thinking about how is that language being used?

 All right. Language for shared concepts and experiences. Wow! The number of kids who have reduced hearing, who I have encountered, who are 3, who can't tell me the names of their family members, because that hasn't been described, they can't describe because they haven't had that experience, even though the language input they've received may have been substantial, it isn't about what is happening in their life.

 Kids, even 3‑year‑olds, need to be able to tell us what's going on. If we follow typical developmental norms, 3‑year‑olds tell us stories. We have to be really cautious and careful about not saying, Well, if a child is deaf and hard of hearing, maybe we expect something less, because although on an individual basis for a particular child who has other complex needs or cognitive limitations, we obviously need to set our expectations appropriately. But as a whole, for children who have reduced hearing, we don't need to change those expectations. We need to be informed by developmental norms and expect that we have to do the work to make sure those children are on that same path.

 Being able to talk about one's experience is huge, important, and part of what helps to foster that connection. There's a lot of talk also that I heard yesterday about we really need parents and children to bond. I absolutely get, as a psychologist especially, it is important, but how do we do that? In part, that is one of the purposes of language. When my children left me a phone message yesterday to wish me good luck for today, that said ‑‑ I said I wasn't going to cry during this part, I might. My son said I love you to the moon and back and back and back 80, 70 times. My daughter says I love you a million times. That's more than you, Koji. He said I'm not that good at numbers, but I mean a lot. That's a nice message to get before you go on stage.

 Kids need language to describe emotions and internal states. Too often, I think this gets a little bit overlooked as we're thinking about feeding this that language piece, right? I worked with lots of kids who are young, who understand happy and understand sad and probably mad. They can either point to symbols that indicate those, they can describe themselves, they can use signs or spoken words to describe those, and don't necessarily have those nuances.

 That is really important! We need to know what's going on with you as a child.

 I've also participated in and read lots of IFSPs. There aren't always social goals. Social goals are often implemented when a child has an autism social disorder, we think they need social pragmatics. I think all children need social goals, all children that we serve should have social goals, and we need to think about making the case for that, and are we providing the right kinds of supports.

 My experience has been that there are people on the EI team who say, well, that's not my role. My role is I'm focused on OT or PT or focused on the teacher of the deaf who is pulled in.

 I think in any of those circumstances, we can incorporate language for internal states, for helping people think about how they feel and communicating that.

 My son is 4, which is a little older than 0 to 3, but it's a relevant story. I will tell you this. Recently, he and my daughter were arguing, and being the really fabulous professional mom I had am, I was like what are you fighting ba about? My son says, mom, I am annoyed with mika, but I don't hate her, so don't worry.

 OK. Smile to my face.

 It's either really great they have a psychologist for a mom or they're doomed. I don't know. Time will tell.

 4‑year‑olds absolutely can have conversations around their emotional states. They can talk about being annoyed, frustrated. It's not just happy, sad or mad. We need to grow and expand the repertoire for words that help kids describe and tell us how they feel. That helps with connections.

 We need language to understand others' perceptions and intentions and to regulate ourselves. Right? Do you know how often you talk to yourself? Like 90% of the time. 90% of the time when other people think you're listening to them, you're talking to yourself and regulating what you do. I shouldn't say that. I should use the picture of the bull, not the other one. I should regulate. Right?

 Some of us regulate better than others. T.J.?

 We need to be able to monitor ourselves sometimes and to say that would be what I'm thinking, but not what I should say. Kids can do this. We need to do this. That's OK. No worries.

 Theory of mind is a phrase that lots of people know and have heard about and have familiarity with and they understand that it means taking another person's perception. But I think it's more than that. It's also anticipating how someone might respond to you, and it's being able to say that in this context I could say that to my friend, but in this context that would be less appropriate. There's lots of ways we can think about theory of mind.

 The ways we have to measure it to date, in my opinion, don't capture the whole concept and the whole thing actually happening in the brain. But, these are strategies that babies also need to be taught. Who amongst us on these EI teams and the frontline providers are doing this work? If we're not, I think we need to. We can't go back to language is the most important thing, period. Language is important, why? Because it allows us to do higher functioning things. This is what gets us to fulfilling a child's optimal potential.

 With respect to what we know about our field to date, I think we need to hold a lantern to that, and be a little bit self‑critical and say that Weaver made, again ‑‑ we've made again really great progress from where things were then to now. Yet, if we look at now, there's room for improvement. Collectively, there are lots of ways we can move that field forward, by thinking beyond camps, by shining a light on these areas of vulnerability, and by questioning whether we, again as a whole, are attending to these various really important aspects of a child's development.

 So, we're going to shine a light on what comes next. Again, my opinion. But, let me share what I think about that. I think we need to be better consumers of research. I was delighted yesterday to attend a talk by Julia Hecht who said let's be critical how we think about this. She really prompted the people in that audience to think about where is the resource coming from? How do we want to understand what these outcomes might mean? That's good. I have been to EHDI eight times. I hadn't yet been to talks that really said let's examine research. That was great.

 I also attended a talk by Linda Leitel and her group that said we need to think about doing really good qualitative research, that we have to have quality at this timive that we produce has meaning and validity and can inform our fields. That was a really nice breath of fresh air to say, yeah, let's think of research also in those terms.

 I put the picture of the person pulling her hair, when I mention statistics, a lot of people do that. Anybody here? It's not everybody's favorite part. I don't think we all need to be statisticians, but by educating ourselves a little more and understanding how research is presented, we can really then be analytical and critical about that.

 For those who are really researchers, like capital R researchers, bear with me here. But I think that we as professionals, especially those who are service providers, tend to do the N of 1 a little bit. Right? We say I tried this and it worked with Johnnie. So therefore, it works. It might be that it worked with Johnnie, and it might be it doesn't work with Jany and there might be alwaysrations for it to work with another child. When we get into the N of 1, here's the thing: Any strategy we describe in terms of input and fostering developmental outcomes can be successful if it's an N of 1. Right?

 As a field, we need to think about OK, in that small cohort, they tried this, it seemed a little successful. What does that mean for us as a whole?

 I also suggest that we need to think about average in different ways. Some of the research out there says, Oh, deaf and hard of hearing kids are achieving or approaching average in this. That's fabulous. But if average ranges from 85 to 115 on some standard measure, and the cohort of kids we're looking at gets 86, they're still not functioning at the same place where these kids are. And I think we have to be thoughtful around how do we absolutely there's individual differences in the kids that we see. For sure. But as a whole, if we don't want to lower expectations for children who are deaf and hard of hearing, we need to be analytical about that piece.

 As a field, I think we need to be conductors of research and so you might say, but that's not me, that's not my role. I think that it is. Because here there are researchers who say, I would love to partner with deaf people. I don't know where to find those who are interested or willing to do that.

 There are research protocols that are happening and they're saying, my biggest problem is I've been recruiting for two years and don't have enough participants.

 If we want to understand what is the impact of an intervention on a particular set of children who have reduced hearing, we need to be involved in that. So I think the idea of partnering with people who are doing research is a really great way to do that.

 So you might have a community organization that serves children who are deaf and hard of hearing or deaf and hard of hearing adults, and say how can we help to inform each other? We have to be very careful to not then think that means that whatever the research is is going to focus necessarily on sign, per se, if the research is focusing on how do we develop theory of mind there might be other strategies for examining that concept. Make sense? OK. As a field, I would argue that one of the next steps is that we need to really monitor progress. Now, we do that, some of us, very well, in monitoring a child's progress, because we have to document their growth, right, to substantiate and say they qualify for services. But as a program, we also need to monitor progress.

 If a program is implementing a new curriculum, you can just try it and see what happens, or we can be really strategic and think if we implement this in the right way, might that lead to outcomes we can then think perhaps to generalize, then test it, then we can have some more confidence in being able to say these strategies work? How exciting would that be?

 That, I think, would also help to move beyond camps, because it's not personal opinion, or it's not one individual provider's experience, it is when we have looked at this, we've tried with lots of kids, we see improvements. Is interthat fabulous? ‑‑ isn't that fabulous?

 That means maintaining fidelity. Boy, was I excited to also attend a workshop that talked about fidelity at this EHDI, meaning how do we really make sure we're implementing things in a way that is consistent and that we are making sure that the quality of the implementation of a particular approach or intervention is working. It's great.

 So the next steps in how we might think about measuring fidelity. But that's a really important thing. I did these slides before I went to her talk. I've been thinking for a while that, wow, if we really are doing good research that can help to inform our practice, we can move the needle as a field.

 I think we need to really ask good, important questions. What we do with children who have reduced hearing is different from children who don't have reduced hearing. And in many ways, it's the same, if talking about child development.

 I think we can as a field open our mind and be informed by what is the sort of child development literature and information, how are we using that to then say, Wow, let's think about these important things that are happening out there.

 Vice versa is also true. I have the experience this year of working with LEND and there are things that are not just deaf specific, but working with children whose communication is more limited, or working with children who communicate in different ways. That is hugely important information for the next state, the pediatrician to be, and the psychologist residents, and the nursing students who are ‑‑ they need that information. There's a lots that we as a body know that can also help to inform. I think that definitely can be a two‑way street.

 OK, in addition to the research, which again I recognize some of you might think that's not me, but if we open our mind, where are we going next, that is an important piece. We need to implement good policies. How do we do that? In part I by a collective voice is helpful. If we take any lessons from national government, we can see that factions help to divide things and make things not work so well. But collectively, we have a strong voice and can really advocate for kids who have ‑‑ we need services, children who are deaf or hard of hearing benefit from certain supports. Let's make sure they happen and not just in certain pockets, but nationwide and all of the kids can get what they need. We can do that if we share a collective voice.

 I just want to ask the slide folks if you can switch it so that the current slide is the bigger slide. Is that possible? Yeah. I'm looking at the current slide, then the next slide, which is big, the current slide is small. I can't actually read it very well. Let's just hold a second. Interpreters, you need to switch? No? You're good? OK. Just hang out for a second. I found a dress with pockets.
[Applause]
I saw an meme recently, somebody said that's a nice dress, it has pockets. I feel a little bit that way. Also in prepping me for wearing a mic, he said do you have pockets? I guess I just decided which dress I'm wearing tomorrow. Thank you for your help. OK. Now I can read and we can proceed.

 I think that we also as a part of this implementing good policies need to hold systems and representatives accountable. I had this experience recently, I recently moved to a different part of the state of Massachusetts. I have a different representative. As part of my diligent duty, I reached out to them, said, I think you should vote this way on a particular bill. In my introduction, I described where I work. This particular representative, who now represents me in the US Congress said, would you be willing to inform our staff about this stuff, because we just don't know?

 I'm not a ledges rater. I don't know ‑‑ legislator. I don't know about that particular law. I can help to inform how they think about disabilities in general, and that's a really good thing. It didn't take that much. I just reached out. I think there are ways we can be active, even if it feels like that's a big, scary step. Your local representatives need your help. They're generalists. You are experts. So use your expertise to help make that difference.

 I would say one of the next things we need to do too is to really fan the flame of the next generation of luminaries. I shared with you those luminaries who impacted me substantially. I think there are other luminaries out there, for sure. But there are people coming up who need support, and we need to foster them. For those of us who ‑‑ for those of you who have been here a really long time, those of us a moderate amount of time, we have a responsibility to do that well. I think we need to light that fire and recognize that fire in them and say go for it. A the my first EHDI, I think eight years ago, it was daunting. All the people I had read about, who made such a difference in the field, they were there, I was here. Now they invited me on stage. Isn't that cool? But I've had people along the way who have fostered me and believed in me. We need to do that for the next generation. For sure.

 So I think we need to make room at the table. We need to make sure we are not staying within like these are the people we're comfortable with and we know. We need to bring aboard people who are more junior in the field, people who we say this person has passion and great ideas, let's see what we can do to launch them. OK?

 In order to do, that we have to be open to new ideas, because younger people might challenge us or think in different ways of that's good for us as a whole. That's good for us to have that kind of challenge. Right?

 OK. Here's a shout‑out to a few folks who I think we need to launch. Matt Hawe, new researcher, University of Massachusetts Dartmouth, doing fabulous work in thinking about how to conceptualize exposure to sign language.
[Applause]
Woo‑hoo! Matt's work ‑‑ we're not going to be comparing signers and talkers. We're going to really identify how do we think about how we label or conceptualize people's exposure to language, then that has big implications for how we might then go forward with both research and practice.

 Shara Shafstall, my post doc, who is fabulous, really good at generating hypotheses, to think about what might be. Rather than establishing a person comes in, we read their medical records, we can say but what if? What do we know about the family system that's informing that practice? What do we know about that, all the contextual factors and social factors that influence how the child is functioning now?

 And a big shout‑out to the Ducklings who are just doing amazing, fabulous work in the places where they are. These are the folks sitting right here who are the frontline workers taking what they've learned from some of these luminaries and really saying, We want to change this for the better, for where we live and where we are right now.

 I would argue that mentoring is more not just about teaching skills, like you're the speech language person, so you're teaching somebody how to do the speech language skills, but really helping them to create vision and think about where they fit in, in this wider ability to care for and provide services for kids.

 To the extent we can, moving forward, I think EHDI and us need to fan those flames and make sure we provide opportunities, provide supports, and we raise sort of the next generation of people who will be doing this work directly.

 And, I think we need to light the way for families. I save this to the end, because it is so very important. We talk about ‑‑ we don't maybe know, but talk about what it means to be family centered. That really does need to guide us. Conversations that happen are things like when can we tell parents about this service? Or when should we inform families? I argue we should say to families, OK, let's say the child is newly identified as having reduced hearing. That's the case. OK. So maybe a particular parent feels very overwhelmed and doesn't feel appropriate to throw at them all of the possible services. Here's what I argue, I think we need to still let families know what's coming. I think we can benefit families by saying I as your audiologist have given you news, and I see that this is difficult for you to process. I don't want to overwhelm you, and I don't want to withhold any information from you.

 Here's what I want you to know: I have information about local supports and families that I can connect you with. I have information about EI service providers, specialty service providers. These are information pockets that I have. I am willing to share them with you now or at any time that you feel ready to sort of process that.

 Families get to make that decision, not the professionals. Right?
[Applause]
Of course! A particular parent might feel like I don't want to hear about all of the people coming to my home. That's too much right now. But there are families for whom I need that number today when I leave this appointment so that I can call the family that's in my area. I need that now, because I might fall apart.

 There are other families for whom I need three weeks to process this and think about it, and conceptualize what reduced hearing means in my culture. Whatever the case may be. But I want to get back to you. Unless they know that's an option for them, that information is available, you can provide them or get them in contact with the right places, they won't know to ask.

 In order to be good providers and really family centered, we need to place that power within the family, for them to be able to say, Now I'm ready. Now is when I want to know about this and this.

 OK. I also think we need to be child led. Of course, a 2‑year‑old doesn't get to verbalize their own opinions about how they think ‑‑ what preschool program they should go to. That is good, attentive service providers and professionals working with these families, it is our responsibility to see how does the child respond? What is the natural fit for this particular child? Right?

 There are children for whom a visual language is what they are drawn to, it makes sense to them, it opens their world!

 There are children for whom that is confusing, and that is like too in their face, it feels like I need the access to something else.

 And neither of those is right or wrong, as long as we're shining the light and saying let's look at the child, how do they respond, what do they need?

 To the extent we're able to say this child is doing really well with these strategies and these supports, that really can inform our practice.

 What has happened in the past, in my opinion too much, is that people are very married to a particular idea. Whether it's a modality or strategy for changing behaviors. They try it, then six months later that child hasn't improved in whatever capacity we're trying to shape, so we try it harder. Right?

 But then that window is child development keeps happening, maturation keeps happening, if we keep trying, it's not a method, approach or intervention that works for that child, we're losing time.

 So part of monitoring progress and being really thoughtful about how we're implementing our strategies is we have to then notice this isn't the right fit for this particular child. So let's think then strategically with families and with really good information backing us up that we can strategize about how to Change things and make it better for that family.

 That has to be guided by research and best practices. Absolutely. Many of you have lots of years of clinical experience and you've been there. You've done that. You know what you're doing. To the extent that all of us, all of us are able to say I'm going to remain ‑‑ main tain my curiosity about how to move forward, how to work best with kids, I'll maintain that curiosity and not assume I know, because all of us have more to learn. As a field, the more we gain knowledge and that informs us, if we're open to that, our field moves forward significantly, faster and better, I would say.

 When I told my mom I was doing this talk, she said, Well, what are you ‑‑ how will you end it? What's your bunch line? I said, I don't know yet. She said quote Oprah. So I did.
[Laughter]
This is the same woman on my dissertation day, I'm nervous. She said you've done talks before. Yeah. Anyway. Quote Oprah. So following my mom's advice, what it says at the top that you don't see, it says you have to find what sparks a light in you so that you in your own way can illuminate the world.

 So, if we shine a light on these issues and we're shining lights, lighting candles, thinking about the ways in which we can improve, I also think we let our own light sort of shine out there. By doing our best work, we can impact lives of children and families and it has a ripple effect.

 Thank you so much for the opportunity to talk with you and share my thoughts!
[Applause]
What an honor.
>>Robert Cicco: Wow! Let's hear it one more time!
[Applause]
I have to add something, Amy, based on what you talked about at the end that I can honestly say that in every ‑‑ I have learned so much more from families that I have cared for than anything I ever learned in medical school, about how to be successful in what you do. If any one of you is providing that kind of ‑‑ I don't care if you're a physician, audiologist, you're a deaf educator, whatever, cannot say the same thing. We all need to open our minds and say what can we learn from the people that we are caring for, because that's how we get better. I'll leave it at that.
[Applause]
OK! So, some announcements at the end, but don't go anywhere, because we have awards to give out for the poster sessions. Awards to give out for the best website. I want everyone to stay for this. Let me run through these quickly. While lunch is not provided today, the hotel is again offering a variety of grab‑and‑go options, and they're available for cash and credit card, and the restaurants are open for lunch too.

 This is for EHDI coordinators only, the HRSA and MCHB will runs again have their office hours open from 12:00‑4:00. Please see the registration desk if you want details. That's for EHDI coordinators only.

 Reminder before you leave the meeting totally, by the end of the afternoon sessions, complete all your evaluations, turn them in. I mentioned how wonderful this planning group is in terms of putting together such a fantastic meeting. A lot of that comes from feedback that we give. So when you turn those evaluations in, that really helps the planning group be able to plan for next year.

 The completed copies of the overall meeting, or poster evaluations can be turned in at the registration desk.

 We do take the use of the evaluations very seriously, the planning group takes them very seriously and makes changes in the meetings related to this. Make sure you do that.

 Also, if you're applying for continuing education credits for this meeting, be sure to complete and turn in your forms before you leave the meeting. OK? Because I'm not sure if you get your credits if you don't do that. Turn them in before.

 So, I just want to remind people this is the last plenary session. Instead of a closing plenary like in other years, there's more time for breakout session and opportunities to attend those sessions. So this will be the last time that we gather as a group. I want to take this opportunity to thank our sponsors once again. I know we thanked them a number of times during this meeting, but once again this meeting can't happen without the help of the sponsors. Once again, let's thank all of our sponsors for the meeting.
[Applause]
And don't forget that you guys as attendees make the meeting. It's your discussion. It's your networking that really makes this happen. So we really appreciate the not just your attendance, but openness and sharing that goes on at this meeting.

 As we close this last session, we want to wish you another good day. Remember, this is the last plenary session, but we have great speakers, great talks for the day. We want to thank everyone for being a part of this meeting. This meeting is really enriched by your hard work, your creativity, your preparation, coming into this meeting not just to sit back and absorb, but also share your thoughts and everything. It's been very important.

 We come together to share what we know, and we learn from one another, and we work together to improve EHDI. We've had some valuable instructional sessions, shareholders' meeting, networking opportunities, poster sessions. Many different ways for us to learn new skills and broaden our perspective, and it inspires us really to carry on the work we do. I'm hoping that all of you will leave this meeting energized to go home and put some of the things that you have learned today, during this meeting, in practice in your workspace. OK?

 We also hope that you will come next year again, 2019 EHDI meeting in Chicago, March 3‑5, mark it on your calendars now so we have this down.

 Until then, I want you to enjoy the rest of your meeting. Return home energized, carry on the work. But don't go anywhere right now, because now is the time for us to give out the awards for the poster sessions and the EHDI website. We'll have ‑‑ who is going to do this? We're debating who gets the option of doing this. Once again, thank you for your attendance at the meeting today.
[Applause]

>> Good morning, I'm Pam Dawson, from Maine. Do you have an interpreter? OK. Tommy and I, we chaired the poster committee and we have some awards to give out. We'll wait for an interpreter. Let's wait. We'll wait. OK. First of all, we had 11 very dedicated judges that helped us this year. If you were a judge, can you please just stand so we can all thank you?
[Applause]

>> Thomas Horejes: Please stand. We'd love to see you. Thank you so much. So we have the first award, for deaf and hard of hearing mentor role model guide information support improvement, and that award goes to ‑‑ drum roll, please ‑‑ Beth Benedict. Where is Beth?
[Applause]
I will personally give it to Dr. Beth Benedict. Congratulations.
>> Pam Dawson: The second award is for the early intervention track.
>> Thomas Horejes: We have several in this category. Christine Yoshinago‑Itano.
[Applause]
Stephanie Olson.
[Applause]
Karen Putz.
[Applause]
Michelle Burke.
[Applause]
Is Michelle here this morning? Everybody is probably going to get coffee. Yeah, come on up. So those who I just named, please come to the stage.

 Elaine Gail.
[Applause]
Congratulations. Yay! There you are. Congratulations.
>>Pam Dawson: Can you just stay? We'll have all the winners up here. OK. Terrific. Let's give them all a round of applause!
[Applause]
The next track was for early intervention. The winning poster, the title was "The Rhode Island EHDI program: Ensuring families are supported and engaged by improving the follow‑up process after a diagnosis of hearing loss." And the authors are Betty Vorr, Alice Beth Brown, Liza Fenn, Richard Lupino, Sarah Franklin, Leslie Bobrowski. If any of you are here, please come up, get your award.
[Applause]

>> Thomas Horejes: The next award is for posters under the theme of program evaluation and quality improvement. The awards go to ‑‑ Marcia Fort.
[Applause]
Is Marcia here?
Jude Williams. Is Jude here?
[Applause]
And Sheila Sutton.
[Applause]

>>Pam Dawson: We had a tie in that category of program evaluation and quality improvement. The second winning poster was entitled "Striving to meet or beat JCIH benchmarks in a large pediatric audiology practice." Those winners are Kristin Euler, Rebecca Awad and Johanna Orapaza. If you are here, please come up, too.
[Applause]

>> Thomas Horejes: The next award is language acquisition and development. It goes to Uma Soman.
[Applause]
And Danielle Shoffel.
[Applause]
Congratulations.
>>Pam Dawson: The next track is follow‑up tracking and data management. The winning poster was called "Findings from Washington state EHDI program electronic linkage with Part C services." The authors were Karin Neidt, Debra locker in‑Doyle ‑‑ Debra Lockner‑Doyle, Julie Walker, and Marcie Rider. Please come up.
[Applause]

>> Thomas Horejes: Congratulations!

 The next award is for family perspective and support. Torrie Anne woodruff.
[Applause]
Kathy Jankowski.
[Applause]
Claire Benston.
[Applause]
And that's for family perspective and support.
>>Pam Dawson: The next category is EHDI workforce issues. The winning poster was "Ask audroigram an initiative for EHDI stakeholders" and the authors were Nancy Schneider and Brittany Johnson. Please come forward.
[Applause]

>> Thomas Horejes: We have more award. We really appreciate your patience. The next category is EHDI program enhancement. The award goes to ginger mellon.
[Applause]
And Samantha Reinard.
[Applause]
The next category we have several individuals, so hold your applause until I read out everybody's name. Awed ‑‑ audiological services. Again, Christine Yoshinago‑Itano.
[Applause]
Sandra Shalibanito.
[Applause]
Samantha Burnba.
[Applause]
Ashley Malley. Allie McNee. Elizabeth Penacost. And Amy Thrasher.
[Applause]
Tammy Fredrickson. And that is that category.
[Applause]

>>Pam Dawson: Last one. Student posters. We had wonderful student posters this year. Thank you to all of you that contributed to it. We actually have a three‑way tie. The first poster, I'll just say them all, then you can all come up together, the first one, the title was Native American hearing education and training initiative. That was closy pfeiffer ‑‑ Chloe pfeiffer and Mary Frank.
[Applause]
The second was screening diagnosis and management of hearing loss in children with significant cognitive disabilities. Stephanie Barry, Megan Bartashuk, Ashley McMillan, and crystal Smaldone.
[Applause]
Last one, through the characteristics of children who are deaf or hard of hearing with additional disabilities differ by race and ethnicity or other demographic factors? Winners are Sandra Gabbard, Angela Bonino, Ayanna Zanders, Kendra Husky. Congratulations! Come on up.
[Applause]
Thank you very much.
>> Thomas Horejes: We do have one more final round of applause for you to congratulate all of the poster winners as you see them up here. Please join me in congratulating all of them.
>> Good morning. I'm looking for the remote right now. Ah! Maybe it's going to be done for me. I'm here to award the 2018 EHDI website of the year. If we can go on to the next slide. Thank you. What this is going to be is some clicking here, I'm warning you, I don't know where the remote is. We'll go and be flexible with the situation.

 So just to review our last past years, this has been going on, I think the eighth or ninth year. If you can start clicking, click away. I'll tell you when to stop. Ah, a remote.

 We started in 2011 with Pennsylvania, they really set our standard. In Minnesota followed up. This is a friendly competition to improve three things about EHDI websites. We had a tie in 2013. Those three things we'll be talking about in a moment. Kansas, Washington state, Iowa, and last year's was Illinois.

 So we're here to have the 2018 winner, and I want to talk about that. First, and foremost, the team that did all these evaluations. So they have quite a bit of criteria to go through, it takes about an hour if you're really good per website. So this is not insignificant. Then you have to come up the learning curve. If any of these people are in the room, I'd like them to stand up, give them a round of applause.
[Applause]
I want to thank each and every one of those people. They were a bit pushed on schedule, but came through. Thank you again.

 Deeply appreciate your help.

 Here are the three categories, one is on content and that's that you have useful data. The next is design and layout, you can get to the layout in a user‑friendly way. Then once you have gotten to that data, it is user accessible, you can understand it and it is presented in a way that you can under it.

 So there's a quite a bit of content on the website, which is cut off on this slide on the infant hearing website. This is a quick at a glance sheet, and it shows all the criteria. There's the content. All the categories under that.

 Next is that design and layout, all those categories.

 Then accessibility.

 So, here's this year's finalists. These are the top five. So most of the websites have been reviewed. There are a few that didn't change, and those went to a smaller level of scrutiny. But all the ones that changed, all the efforts where a website changed from last year, that got a lot of review and a lot of attention. I want you to know if you're not in these top finalists, your efforts did get noticed and they were appreciated.

 Here's our top five: Georgia, Guam, Idaho, Louisiana, and Wyoming.
[Applause]
And our winner is ‑‑ I don't have the envelope, I have it memorized. Guam!
[Applause]
If they can come up to the stage, we'd appreciate it. This is just their home page. It's very visual, very interactive. A lot of content. Very designed in a way that is user‑friendly. I'm going to give them full appreciations for their efforts. Here they are.
[Applause]

>> I just would like to say thank you for this award. I know our web designer that helped us, her name was Sherry, and we spent ‑‑ and Janique, they really did a lot of designing and trying to make it as accessible as possible. So again, just thank you so much! Visit our site!
>> So I hope you have a little bit of difference in height. I hope you have a wonderful day today. There are so many and interesting sessions happening. I hope that you learn something and experience something new and expand your horizons. Thank you so much for your attention!
>>Robert Cicco: One more thing, first, thank you for your attention for all the awards. I hope we actually benefit from seeing all the hard work people put in. Don't forget your evaluations. Enjoy the rest of the day. And be safe traveling if you're traveling!