



Saying Farewell to Brenda Battat

In the July/August 2008 *Hearing Loss Magazine*, HLAA Member Barbara Chertok interviewed Executive Director Brenda Battat as she became the new executive director of Hearing Loss Association of America. Now, five years later, she interviews Brenda as she gets ready to retire after HLAA Convention 2013 this June. This interview was conducted in May and the magazine went to print before the convention. When you receive this issue, the HLAA Board of Trustees will have filled the position for executive director. See page 8.

Brenda Battat was born in London in 1942 and began working at SHHH headquarters, as it was known then, in September 1989. She became the executive director of HLAA in March 2008.

Brenda has worked in the national office of HLAA in a variety of positions for 24 years. A tireless and dedicated advocate for people with hearing loss, Brenda has led the organization to a position of national and international prominence and financial strength. Her personal involvement with hearing loss—she uses both a cochlear implant and a hearing aid—and having a son with a hearing loss undoubtedly strengthened her commitment to helping others with hearing loss.

Advocacy awards Brenda Battat has received are: Sheldon Williams Itzkoff Leadership Award 2010; Robert H. Weitbrecht Telecommunications Access Award 2007; Oticon Focus on People Advocacy Award 2005; and Self Help for Hard of Hearing People National Access Award 2002.

Brenda lives in Bethesda, Maryland, with her husband Joe. They have a daughter, Anna Westrick, M.D., and a son, James Battat, Ph.D., and four grandchildren.

Barbara Chertok (BC): In our 2008 interview, your vision for HLAA was to work on eradicating the stigma of using hearing aids, have hearing loss be recognized as a public health issue, and hearing aids be considered not a luxury but a medical necessity. Are we there yet?

Brenda: The short answer is not yet but we are making progress. To alleviate the stigma the HLAA Walk4Hearing is a tremendous public awareness event with more than 40,000 people walking since it started. Research is finding hearing loss linked with other conditions such as diabetes and so that is helping the focus on public health.

As for hearing aids being a medical

necessity, I think this needs a closer look. Only 20 percent of people with hearing loss use hearing aids. However, the percentage is skewed by low use of hearing aids by people with early, high-frequency hearing loss. Whereas, among people with significant hearing loss, usage is closer to 90 percent. We have to separate them out, adjust the approach and modify regulations accordingly.

BC: Did your own profound hearing loss impact your decision-making as executive director of HLAA? How?

Brenda: Yes, in several ways. I live the issues daily. I know the emotional impact. But I am mindful to advocate not just on my own experience but for the greater good.

BC: What accomplishment during your tenure are you most proud of?

Brenda: Opening up the conversation about accessible and affordable hearing health care and more options for consumers at the risk of a backlash from audiologists, hearing instrument specialists and manufacturers.

BC: Was there anything you regret not having been able to complete?

Brenda: Not staying to get far enough along with that conversation.

BC: Baby boomers and returning military personnel have joined and swelled the ranks of people with hearing loss to 48 million Americans. What is the most important thing HLAA can do for these individuals?

Brenda: Convince them to seek help for their hearing loss a lot earlier.

BC: Are the challenges facing people with hearing loss any different today than when you took over the reins five years ago?

Brenda: We have made real progress but there is still a way to go. We are still dealing with challenges—lack of suitable accessibility such as captioning and hearing assistive technology, subtle employment discrimination and spotty education support services to name just three. One change, which is a challenge but also an opportunity, is keeping

up with the rapid pace of innovations in technology especially disruptive technologies and realizing their potential to make a difference in our daily lives.

BC: Could you name those “disruptive technologies” for us that you just referred to?

Brenda: Mobile phone-based hearing aids that can be dispensed and adjusted remotely and put the user in control. Mobile apps used as assistive listening devices and to screen hearing. Much better quality personal sound amplification devices that blur the line with hearing aids. Innovation in automated hearing testing for use by physicians and other health providers.

BC: As both a cochlear implant and a hearing aid user, can you give us your personal opinion as to how they differ regarding sound quality and hearing?

Brenda: Implants are not just better hearing aids. They bring sound in and you know when you hear something and when you don't. There is less ambiguity. The latest programs to cut out background noise really work.

BC: Why is it so difficult to convince government agencies, for example, that hearing loss is a major public health issue, that it is the third most common physical condition after arthritis and heart disease?

Brenda: The number of people with hearing loss is overwhelming to anyone dealing with budgets. The impact of hearing loss on the individual, their communication partners, employment, education, daily life is grossly underestimated and still seen mistakenly as a consequence of aging.

BC: A research study, the Health, Aging and Body Composition Study, done at Johns Hopkins University by Frank Lin, M.D., Ph.D., indicates that untreated hearing loss can lead to dementia and other maladies. Will this result in an onslaught of new hearing aid buyers and users?

Brenda: It is already making people sit up and take notice and is talked about

continued on page 18

Brenda Battat *cont. from page 17*

on the party circuit. But as we know talking about it does not always translate into taking action. Dr. Lin's proposed research is to see if the use of hearing aids can impact cognitive decline. That will make a huge difference.

BC: For a number of years, HLAA's membership was comprised mainly of older hard of hearing persons. Now, HLAA and its programs are reaching out to young adults and children with hearing loss. Why?

Brenda: Young adults are the future of the organization and parents are the absolute best advocates.

BC: What do you feel has been HLAA's greatest achievement since its inception in 1979?

Brenda: Putting the interest of the consumer first and foremost and working with other groups and organizations with common interests.

BC: What does your crystal ball tell us about major changes HLAA will undergo in the years ahead?

Brenda: The Board has a Statement of Strategic Intent that will keep continuity at least for the next two to

three years. The new executive director will make her mark no doubt.

BC: In June, you will attend your last HLAA Convention in Portland, Oregon, as executive director. How does that feel?

Brenda: What better place than Portland! I'm still not quite used to the idea and am working away on projects here that will be around long after I am gone. It might be my last HLAA Convention as executive director but hopefully not my last ever.

BC: If Rocky Stone were alive today, how would he rate the status of the organization he founded?

Brenda: I am not going to do the rating. In Ahme Stone's words, his dear wife, who is still a strong supporter of HLAA, "Rocky must be smiling up there."

BC: Do you wish to offer any words of wisdom to your successor?

Brenda: You have a plum job. Make the most of it.

BC: What's the very first thing you'll do on day one of your retirement?

Brenda: Go for a long walk and count my blessings. I am not the retiring sort. Probably ask myself, 'Okay, what am I going to do now?'

BC: How do you plan to spend your leisure time?

Brenda: I'll have the freedom to do what I want and I haven't decided what that is going to be yet. Although I know I will be digging in the dirt with my herbs. 🌿🌿



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Barbara Liss Chertok lost her hearing suddenly in 1957 at age 21 from what was diagnosed 35 years later as Cogan's syndrome, an autoimmune disorder. She received her first cochlear implant in 1997 and her second in 2008. She joined SHHH in 1979 and is an active member of Hearing Loss Association of America—Sarasota. From 1985-1995, she taught lipreading/speechreading at Montgomery College in Rockville, Maryland, and is a freelance writer/interviewer, with articles appearing in hearing loss journals. She serves on the national advisory board of the American Hearing Research Foundation. Barbara can be reached at barbchert@aol.com.

Thank You, Brenda

The staff of the HLAA national office joins the Board of Trustees and members across the country in appreciation for 24 years of dedication to the organization and her commitment to 48 million Americans with hearing loss.



Brenda wrote the cover feature, "Hydrangea Blue: Hearing Loss Through the Generations" for the July/August 2006 Hearing Loss Magazine.

Under the leadership of Brenda Battat, HLAA's advocacy efforts sought and will continue to seek to:

- Change the way society views hearing loss
- Change the way policy makers view hearing aids and other hearing technologies
- Promote the development of more hearing and access friendly environments
- Leverage state-of-the-art technologies that deliver information and services to those with hearing loss
- Support innovation that facilitates greater access to quality, affordable hearing health care

