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Senate Standing Committee on Community Affairs
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6th May 2010

To whom it may concern:

RE: Inquiry into hearing health in Australia.

In response to the Inquiry's call for submissions the Newcastle Elderly Citizens' Centre respectfully submits the attached document, and thanks the Committee for the opportunity.

Sincerely,

Patrick Fisher,
On behalf of the Board of Management,
Newcastle Elderly Citizens' Centre.

Submission to the Inquiry into Hearing Health in Australia

The
Senate Community Affairs
References Committee

Researched and compiled by

Patrick Fisher

6th May 2010

On behalf of the

Newcastle Elderly Citizens' Centre

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1.1 The Newcastle Elderly Citizens' Centre (NECC)

The NECC welcomes the opportunity to submit to the inquiry. The NECC provides support for frail older people, people with disabilities and their carers. It has a strong base of volunteer's and is presided over by a Board of Management. The NECC is funded by the Department of Ageing, Disability and Home Care and is committed to providing support services, information and advocacy for its members.

1.2 Introduction

The Australian Government Hearing Services Program is in need of redevelopment if it is to better serve the need of the community. A majority of members report several deficiencies with the current system. These include the:

- ❖ quality of hearing aids provided at subsidised rates
- ❖ prohibitive cost of hearing aids outside government supply
- ❖ lack of ongoing contact by government agencies on new technologies and initiative, leading to a general feeling of being poorly informed
- ❖ access to hearing support products and the relative lack of government subsidisation of assisted listening devices and
- ❖ inflexibility with eligibility criteria for the Hearing Voucher System

These issues will be dealt with throughout the submission and will be framed in the terms of reference established by the Committee. The submission will also provide relevant recommendations for each of the terms of reference, as well as a summary of recommendations with the conclusion.

2.1 The extent, causes and costs of hearing impairment in Australia

The inquiry has already heard from a wide variety of sources the relevant statistics on the incidence of hearing impairment among the elderly. Reputable organisations such as Better Hearing Australia, The Deafness Forum and the Deaf Society of NSW have all submitted relevant data on hearing loss and its impacts, especially concern the elderly and frail. The data overwhelmingly supports the claims that the elderly make up the majority of the hearing impaired, especially considering that almost 75% of people aged over 70 are experiencing hearing loss to some degree in either one or both ears¹. Simply put, the elderly are the largest interest group in hearing health policy, and have the most to gain and lose.

Within the member base of the NECC a significant majority have professed to some form of hearing impairment. Whilst a variety of causes have been considered, most members attribute hearing loss to long term exposure to industrial noise. Many members spent the entirety of their working lives involved in works of public infrastructure, such as railway construction, or in the manufacturing and industrial sector. Those who have worked in the steelworks or mining industry reported occupational conditions which put heavy stress on their hearing. The ramifications of this exposure are being felt today.

Costs can be measured both in economic and social terms. While the incidence of self-funded retirees is on the rise, an overwhelming majority of members subsist on government support in the form of the aged pension. The costly nature of hearing health services, combined with prohibitive cost of 'high quality' hearing aids puts considerable pressure on the financial operations of the elderly, and is a heavy financial burden for those on fixed incomes.

¹ , Supported by statistics from Access Economics, February 2006, *Listen Hear! The Economic Impact and Cost of Hearing Loss in Australia* p.31

The social costs, including lost quality of life, decrease in overall socialisation and the wider effect of hearing loss on family members will be discussed in section 3.1.

2.1.1 Summary

- ❖ Hearing impairment is widespread among the elderly, reinforcing their status as the demographic most effected by hearing health policy
- ❖ The causes of hearing impairment among the elderly are most often attributed to long term work in heavy industry during their younger years
- ❖ Elderly members are facing added stress on already limited pensions to cover the gaps in hearing health treatment

2.2 Recommendations

There is no way the damage done to ears decades ago can be 'fixed', as other ailments can be. The reforms to occupational health and safety regulations came too late to save the hearing of the elderly. Instead, there needs to now be a focus on the provision of assistance in both the technology provided to the hearing impaired and in effective communication of training and support information.

The first step must be ensuring that hearing health policy and issues receive funding and support which reflects its incidence in the community. It remains one of the most common forms of disability and must be acknowledged as an area of priority in national health, lest new reforms fall into the same cracks.

3.1 The implications of hearing impairment for individuals and the community

Members of the NECC report various impacts of hearing impairment. There is the financial aspect, briefly discussed above, the social isolation and lack of motivation that the hearing impaired can suffer from and the feelings of frustration with impersonal and ineffective systems of redress that members report.

Hearing and indeed sound in general has a significant role to play in socialisation and interaction between humans. It transcends images in terms of emotional potency, and provides the most effective form of communication. Untreated hearing loss impacts both the person suffering and their loved ones. Lifestyle changes made to accommodate the hearing impaired (such as shouting conversations or turning televisions up to maximum volume) are reported by members as having a negative impact on quality of life. There is a tendency to withdraw from a world that one cannot hear, emphasising how important maintaining support for the hearing impaired is.

The difficulties faced by those who suffer from hearing loss are drastically mitigated through the effective use of hearing aids in conjunction with other assisted listening devices. However, some members have reported dissatisfaction with both the level of information available and the complexity of accessing it. This frustration leads to an unwillingness to pursue hearing aids, clinical services and assisted listening device support, because, as one member put it, "it's best to just not get involved with that mob".

3.1.1 Summary

- ❖ Hearing impairment has financial, social and interpersonal impacts, all of which are negative for the individual and the community
- ❖ Members report that there is a high level of frustration at the complexity of the system in place
- ❖ This frustration leads to a disinclination to pursue some services, indicating a failure of programs to engage with those they seek to help

3.2 Recommendations

The current system offers financial support for a limited range of hearing aids to those who fulfil criteria established by Hearing Australia. The criteria which Hearing Australia uses to administer the voucher system as in need of significant change, which will be discussed in greater detail in section 4.2. Changes to these systems would ease financial pressure on already burdened pensioners.

To counter the social difficulties faced by those with hearing impairment, there needs to be a greater emphasis and subsidised support on assisted listening devices, rather than simply the provision of hearing aids. Closed captioning is a cheap and effective means through which some difficulties can be addressed, however the service needs to be better organised to be truly effective. As it stands now many programs have inconsistent or inaccurate captioning. Investment and development of this service is essential to helping raise the quality of life in the hearing impaired.

The frustration generated by a complex and unwieldy system of referrals and 'passing-the-buck', as well as the perceived conflict in information services between various institutions is a serious concern to members.

4.1 The adequacy of access to hearing services, including assessment and support services, and hearing technologies

Members experiences with Australian Hearing and the voucher system of hearing aid distribution indicate mixed feelings on the success of the initiative. Whilst there is a wide variety of clinical services and practitioners available in the Newcastle area, members are concerned about the varying level of qualification of between hearing health practitioners.

There are many members who do not use the hearing aids issued by audiologists because, despite assurances to the contrary, the devices do not work as promised. Filtering irregularities between background noise and conversation is the most common problem, as well as constant whistling in either one or both ears. These issues are experienced less by those who have the resources to supply their own hearing aids, indicating that the technology that could help the hearing impaired exists, yet the Hearing Services Program does not make such technology affordable. The system is inadequate in addressing the specific needs of some sufferers of hearing impairment.

The standard of hearing aid offered at no cost is not acceptable to many pensioners leading full lives. Live music and some outdoor activities are hampered by hearing aids which cannot cater for the dynamic sounds their users require. Whilst the Hearing Services Program is not directly to blame for an incorrect diagnosis or prescription, it is responsible for putting consumers in a situation where they are required to choose from a list of products that do not meet personal requirements.

Quality of product is the top concern amongst the elderly in the market for hearing aids. Imported hearing aids manufactured in countries with dubious levels of industry regulation have flooded Australian markets, and have put the price of

Australian made hearing aids beyond the reach of many people.

The provision of assisted listening technologies is inconsistent and often difficult to access. Simple activities such as dealing with Telstra for the provision of a cordless, hearing impaired friendly phone become a struggle with an inflexible bureaucracy, and can be costly for a consumer.

4.1.1 Summary

- ❖ Members are concerned by the variety of qualifications practitioners have
- ❖ Standard issue hearing aids are often inadequate for use in all situations
- ❖ There can be extreme bureaucratic and financial hurdles to pass through in the provision of assisted listening devices
- ❖ Many members are frustrated at the complex and often inflexible nature of the services provided

4.2 Recommendations

The current criteria for the Hearing Services Voucher needs to be adapted to better reflect the enormous range of people who suffer from hearing impairment. Automatic cover to persons on either a disability or aged pension, as well as cover for persons under 21 reflects the government's obligation to protect the most vulnerable in society, however it ignores the fact that there are also others in great need that do not qualify for a voucher and cannot afford to fund their own hearing aid purchase. The voucher system should be means tested; not a single person with a need for hearing services should be left behind.

Currently those eligible for a Hearing Services Voucher have the option to contribute to the cost of their hearing aids if they wish to use devices of a higher quality and cost than the government provides. This system should be adapted so that the most appropriate hearing aid, regardless of the cost, is provided to those who need it.

The Office of Hearing Services, the agency responsible for the issue of hearing aids under the voucher system will not provide both hearing aids and assisted listening devices; the current system allows for one or another. This must be adapted if the Hearing Services Program is to be more successful. It must support through subsidisation the use of hearing aids in conjunction with assisted listening devices for maximum effectiveness.

There must be greater support for domestic manufacture of hearing aids to ensure that consumers can take full advantage of Australia's high standards. Again, subsidisation is the key to the implementation of this recommendation.

5.1 The adequacy of current hearing health and research programs, including education and awareness programs

As discussed above, the current strategy and voucher system does not reflect the increased incidence of hearing impairment in the wider community. The voucher system is reactive rather than proactive; the system waits for a person to come to them to commence the process of support. The result is the under diagnosing of hearing impairment in the community.

This is hindered further by a lack of promotion of new products and technologies from unbiased agencies. Many members report not being 'in the loop' with the latest technologies because they have no impartial catalogue through which they can gain a true understanding of their options. Whilst major audio clinics offer extensive product lists, these are tainted by commercial motives and are designed to further the interests of the business rather than the user. A direct dialogue between government agencies and consumers must be opened to maximise access to information.

There is growing concern among members that the messages of hearing health are not being heard by young people. Anecdotal evidence suggests that there is a lack of awareness among the youth about the long term impacts of long term exposure to loud music and excessive use of headphones. These trends will need to be addressed in any future strategy; prevention is far superior and less costly than treatment.

5.1.1 Summary

- ❖ The current program is reactive, not proactive, reflecting hearing health's low position in terms of health priorities
- ❖ There is a lack of direct, unbiased access to information targeted to those who have a vested interest in such developments
- ❖ young people are at risk of developing hearing difficulties early due to lifestyle choices

5.2 Recommendations

A more proactive approach to audiometric testing is necessary to provide hearing services to the greatest number of people. One measure which could be adopted to facilitate this is to establish a traveling clinic that could increase awareness of hearing health issues and provide basic assessment to groups such as the NECC and institutions such as aged care facilities. This would promote the hearing health issue and encourage use of clinical services through removing the stigma attached to admitting one has hearing difficulties.

Members report a desire to be kept up to date with the latest technological developments in the field, and there already exist several newsletters and mailing lists targeted at the promotion of health products aimed at the elderly. A regular report issued by a government body into the state of the hearing health industry posted in these newsletters would serve to provide consumers with a greater level of information and allow for a better general understanding of products and resources among key interest groups.

Any future strategy must address the roots of contemporary hearing loss among young people, and focus on prevention of hearing loss rather than treatment of hearing loss that was entirely avoidable. Again, education and awareness is the key.

6.1 Conclusion and final recommendations

This submission has explored some of the causes, extents and impacts of hearing loss and suggested some ways these issues can be addressed. The NECC wishes to emphasise several of the recommendations it feels could provide the greatest benefit to not only the elderly, but to all who suffer from Australia's most common disability; hearing impairment.

- ❖ Hearing health must be acknowledged as an area of national priority, both in terms of funding and awareness
- ❖ The Hearing Services Program needs to be adapted to better reflect the composition of the demographic of the hearing impaired. These changes would start with altering the eligibility criteria through the introduction of a means test, whereby any person with a need for hearing health services could access them
- ❖ Increase the level of technology provided by the government at no cost. This would allow the hearing impaired on fixed or low incomes to achieve the same quality of life as those who can afford higher quality hearing aids
- ❖ There must be a renewed focus on assisted hearing devices and a concerted effort to promote their use in conjunction with, not instead of hearing aids. This could include further support with television subtitles and captions and greater diversity of

'hard-of-hearing-friendly' telephones

- ❖ The relevant government departments need to increase information sharing so as to limit the bureaucracy of the system, and make the program more accessible and streamlined
- ❖ Access to new information from reliable, unbiased sources must be improved to raise consumer awareness about the state of the industry

7.1 References

Access Economics, *Listen Hear! The Economic Impact and Cost of Hearing Loss in Australia* February 2006, p.31

Inquiry submissions referred to:

Warwick Williams PhD, Senior Research Engineer, National Acoustic Laboratories, last accessed 6/05/2010

<http://www.aph.gov.au/senate/committee/clac_ctte/hearing_health/submissions/sub14.pdf>

Robert Dobson, Grant coordinator, Better Hearing Australia, last accessed 06/05/2010

<http://www.aph.gov.au/senate/committee/clac_ctte/hearing_health/submissions/sub07.pdf>

Sharon Everson, CEO, Deaf Society of NSW, last accessed 06/05/2010

<http://www.aph.gov.au/senate/committee/clac_ctte/hearing_health/submissions/sub48.pdf>

Nicole Lawder, CEO, Deafness Forum of Australia, last accessed 06/05/2010

<http://www.aph.gov.au/senate/committee/clac_ctte/hearing_health/submissions/sub34.pdf>

8.1 Acknowledgements

The author would like to thank the Newcastle Elderly Citizens' Centre Board of Management for their support in the compiling of this document, and Centre Co-ordinator Elaine Hutchinson for all her speedy efforts.