



HEARING HEALTH

CARING FOR EAR HEALTH AND HEARING

The Greens' plan to invest in hearing health

One in six Australians suffers from some degree of hearing loss, and this number is expected to increase to one Australian in four by 2050. By making hearing health a priority, the Greens will improve the lives of millions of Australians, their families and loved ones.

An important parliamentary inquiry was held into hearing health in Australia in 2009. The inquiry found that, despite representing significant social and economic costs, and touching the lives of most Australians in one way or another, hearing health was not ranked as a national health priority. The Greens want to change that.

> OUR PLAN FOR HEARING HEALTH

Hearing loss costs Australia almost \$12 billion a year.ⁱ Hearing loss reduces a person's capacity to communicate and participate in social situations and can affect their education and employment opportunities. It has been estimated that almost 160,000 people are not working because they can't hear well enough.ⁱⁱ

The Greens want to see real action taken to tackle hearing health in Australia. That's why we're announcing our comprehensive suite of initiatives fully costed at \$368.2 million over three years. The elements of our plan are:

- **Extending the eligibility for the Australian Government Hearing Services program** to everyone subject to a means testⁱⁱⁱ and to those who do not meet the means test on a fee-for-service basis (\$274.2 million over three years)
- **A national database to track children with a hearing impairment** (\$2 million)
- **Early evidence-based language and communication intervention** for all children with hearing impairment prior to them starting school (\$45 million over three years)
- **Sound field systems for new classrooms**, and in all existing classrooms where there is a significant population of Aboriginal or Torres Strait Islander children (\$12 million over three years)

- An exemplar multidisciplinary **project to address the incidence and impact of otitis media** in Aboriginal and Torres Strait Islander communities (\$5 million over 2 years)
- COAG (the Council of Australian Governments) to **prioritise hearing screenings and follow up for all Aboriginal and Torres Strait Islander children** from remote communities prior to commencement of school
- A \$30 million fund (over three years) for **induction programs for teachers** posted to schools in Aboriginal and Torres Strait Islander communities

The causes of hearing impairment are varied. Hearing impairment can develop because of an inherited condition, problems during pregnancy and delivery, disease, neurological disorders, injury or excessive noise, or develop over time with age. Hearing loss can result if there's a problem at any point in the hearing pathway – in the outer, middle or inner ears, or in the complex auditory nerve pathway to the brain. The most significant single cause of hearing loss in Australia is exposure to loud noise, with 37% of hearing loss due to excessive noise exposure.^{iv}

> IMPROVED ACCESS TO THE AUSTRALIAN GOVERNMENT HEARING SERVICES PROGRAM

Hear Us, the 2010 parliamentary inquiry report, made 34 recommendations to address significant gaps in hearing services and supports across Australia. Despite the old parties supporting the report's findings, too many of these recommendations have not been acted upon.

The inquiry found that many people suffer significant distress and financial hardship because of a lack of access to services



and supports. Essential services and equipment like hearing aids are expensive, costing between \$3,000 and \$5,000, and requiring replacement every four to five years. This can present a serious financial burden to low income earners.

Access to hearing services and devices under the Australian Government Hearing Services Program is only available to people under the age of 26, Pension Concession Card Holders, people receiving Sickness Allowance from Centrelink, Members of the Australian Defence Force, and some clients of the Department of Veterans' Affairs and the Commonwealth Rehabilitation Service.

A caring society would provide access to publicly funded hearing services and devices to people who need them, rather than abandoning people as they enter the workforce. That's why the Greens will give access to Australian Government Hearing Services to all low income earners, providing a further 133,000 people with access to these vital services.

Our plan will also give optional access on a fee-for-service basis to former Australian Hearing clients who become ineligible for these services when they turn 26. This will allow people to continue to access independent treatment and advice as well as guaranteeing continuity of care. As the cost will be recovered from clients this initiative will not require a funding allocation.

> GIVING CHILDREN WITH HEARING IMPAIRMENT THE BEST START

The welcome introduction of universal newborn screening across Australia has resulted in increased early diagnosis of children with hearing impairment. In order to realise the substantial long term benefits available from newborn screening we must ensure early intervention programs are provided to those children who are diagnosed with hearing impairment.

Early intervention is important for later development of language and communication skills and it is vital to enable children to have the best opportunity to succeed in education and go on to fulfilling lives. Successful early intervention also has implications for lifelong social inclusion for people with hearing loss.

The Greens want all children diagnosed with hearing impairment to have the best possible start in life. That's why we are providing \$45 million over three years to fund early evidence based language and communication intervention for all children with severe hearing impairment who require hearing aids or Cochlear implants prior to starting school.

> A NATIONAL DATABASE FOR HEARING IMPAIRED CHILDREN

The *Hear Us* inquiry found there are gaps between screening of children and the delivery of follow up services and support to those found to have a hearing impairment. Some children with hearing impairment are 'falling off the radar' and failing to receive appropriate support, treatment and intervention.

The Greens have committed \$2 million to establish a national database to track children through neonatal hearing screening, diagnosis and intervention, and to record and report cognitive, linguistic, social and emotional development outcomes of children diagnosed at birth with a hearing loss.

The database will ensure we can monitor and evaluate neonatal hearing screening programs. It will also underpin the development of a nationally consistent quality and standards framework and allow national and international benchmarking and collaboration. Information recorded in the database could provide an important resource for research into risk factors and health conditions associated with permanent childhood hearing impairment. The database will be expanded in future years to track all children diagnosed with a hearing impairment later in life.

> TOWARDS MORE INCLUSIVE AND ACCESSIBLE COMMUNITIES

Hearing impairment is projected to grow along with Australia's ageing population. It is estimated that 8.75 million Australians will be directly affected by hearing loss by 2050.^v An inability to hear too often excludes individuals from meaningful participation in the social, economic and cultural life of the community. It is therefore crucial that we make changes now to improve the way people with a hearing impairment are supported in our communities. While this change will not happen overnight it is vital we start to prioritise a shift to communities that are more accessible and inclusive of people with hearing impairment.

The Greens are committed to progress towards more inclusive and accessible communities. We know there are a range of barriers preventing the full participation of people with a hearing loss and that many people experience significant social isolation as a result of this. We need more Auslan interpreters, more audio described television content, and the provision of more hearing loops in public shopfronts and facilities.

Government also needs to do a better job at raising public awareness and understanding about hearing loss. Work in this area would serve a dual purpose of creating a more understanding and supportive society, and serving to reduce the incidence of avoidable hearing loss.



The Greens are keeping the issue of access on the agenda with the development of a smartphone app that allows people with disability, their family, friends and the community to report accessibility trouble spots from anywhere around the country. This might include failure to provide adequate signs, captioning, audio loops or Auslan interpreters.

The reports people provide to us will be summarised on our website. We will also make the formal report publically available and provide information to Parliament, governments and other organisations, such as the Australian Human Rights Commission. Access All Areas is available for free for iOS and Android devices and can be downloaded, along with a copy of our initiative paper, from www.rachelsiewert.org.au/access.

> CLOSING THE GAP IN HEARING HEALTH

There is a crisis in ear and hearing health in Aboriginal and Torres Strait Islander communities with rates of ear disease and hearing loss up to ten times those of the wider community.^{vi}

A significant cause of hearing loss in children is a condition called otitis media – a middle ear infection. Otitis media strikes Aboriginal and Torres Strait Islander babies at an earlier age and to a more severe degree than national averages or accepted public health levels. It has been estimated that Aboriginal children experience an average of 32 weeks of middle ear infections between the ages of two and 20 years, compared to just two weeks for other children.^{vii} This represents a serious health and educational issue for Aboriginal and Torres Strait Islander children with significant lifelong implications.^{viii}

Otitis media can cause temporary or fluctuating hearing loss which affects a child's learning, language development and behaviour. Although there is a need for greater research into this area, we know that hearing impairment has a serious impact on educational outcomes, particularly for children from remote areas where English is a second language. Poor educational outcomes, linked to early onset hearing impairment, can lead to increased engagement with the criminal justice system. This is reflected in the high prevalence of hearing loss among Aboriginal and Torres Strait Islander prisoners.

The Greens plan to address the alarming disparities between the hearing health of Aboriginal and non-Aboriginal populations. In order to tackle this multifaceted problem we must take a coordinated approach. By fostering links between successful health, education and family support programs that are already operating in a range of communities we can build on local networks and knowledge to more effectively address hearing health.

That's why the Greens will establish an exemplar multidisciplinary program, as proposed by the Australian Collaboration for Healthy Ears, to provide regular testing and diagnosis, specialised early language and literacy support, and ongoing management, evaluation and reporting to government. Our plan builds on and integrates successful programs to develop comprehensive responses to otitis media in Aboriginal and Torres Strait Islander communities. Our \$5 million commitment will fund the project in up to five communities for two years from January 2014.

> CHILDHOOD CHECKS LEAD TO BETTER LONG TERM OUTCOMES

Newborn hearing screening is identifying children with hearing impairment earlier than ever before. Universal newborn hearing screening has enabled the identification of the between 9 and 12 children per 10,000 live births in Australia who have a moderate or greater hearing loss in both ears.^{ix}

The identification of these children is a very positive development, but it is only part of the picture. The incidence of hearing loss in children doubles by age five and triples by age 10.^x Around a further 23 children per 10,000 will acquire a hearing impairment that requires hearing aids by the age of 17 through accident, illness or other causes.^{xi}

As newborn screening only identifies approximately one third of children who will eventually require intervention, the Greens believe it is essential that we improve the number of older children receiving hearing screening.^{xii}

We know that the earlier a hearing impairment is identified the greater the opportunity to intervene through the provision of treatment, services, supports and early language and communication intervention.

To build on the gains that have been made through the introduction of universal newborn screening we must achieve better rates of screening and diagnosis of children before they begin school. While there are a range of checks available across the states and territories the uptake rates of these are too low. There is also not enough opportunistic screening being undertaken, for example checking a child's ears when they attend a health clinic for another reason.

A young child who does not have their hearing checked misses an opportunity for a problem to be identified, a referral to be made, and treatment and early intervention provided.

Given the crisis in ear and hearing health in remote Aboriginal and Torres Strait Islander communities the Greens believe that the Council of Australian Governments (COAG) must prioritise hearing screenings and follow up for all children from these communities before they start school.



> SOUND FIELD SYSTEMS IN CLASSROOMS

A survey of 29 communities in the Northern Territory found that only 7% of children had bilaterally normal middle ears.^{xiii}

Children who have difficulty hearing what the teacher is saying will struggle to learn. An effective strategy for improving sound quality in classrooms and increasing student comprehension is through the installation of a sound field system. Sound field systems are low power public address systems with a wireless microphone for the teacher. These systems not only make teachers' voices louder, they also improve clarity through the use of strategically placed speakers.

While children with permanent hearing loss may have hearing aids, these can be lost, may break, or children might choose not to wear them because of embarrassment or shame. Children without a permanent impairment may have fluctuating hearing because of temporary illness. Sound field systems deliver significant educational benefits for all children in a classroom, not only those with a permanent hearing impairment, as all children are better able to hear the teacher and are less distracted by noise outside the classroom.

Our plan is to establish a \$12 million fund to supply and maintain sound field systems in classrooms. New classrooms and those where there is a significant population of Aboriginal and Torres Strait Islander students will be prioritised. Information regarding which classrooms utilise sound field systems will be made publicly available to assist families of hearing impaired children in choosing the most appropriate school for their child.

> EQUIPPING TEACHERS TO MEET THE NEEDS OF STUDENTS WITH HEARING IMPAIRMENT

Teachers posted to schools in Aboriginal and Torres Strait Islander communities face classrooms where the students have a very high incidence of hearing impairment. It is therefore crucial that we equip teachers with the knowledge and skills to effectively teach in these environments.

Our plan will provide \$30 million (\$10 million per year over three years) to fund teacher induction for teachers posted to schools in Aboriginal and Torres Strait Islander communities. Induction packages will include training about the effects of hearing health on education, and effective evidence-based teaching strategies to manage classrooms where a majority of children might have a hearing impairment.

ⁱ Access Economics: Listen Hear! The economic impact and cost of hearing loss in Australia, February 2006

ⁱⁱ Australian Hearing, *Hearing Loss in Australia: It's more common than you might think*, available at:

<http://www.hearing.com.au/upload/media-room/Hearing-loss-in-Australia.pdf>

ⁱⁱⁱ The same means test as that applied under the Health Care Card

^{iv} Access Economics, *Listen Hear! The economic impact and cost of hearing loss in Australia*, February 2006.

^v Ai-Media submission to the Senate, Community Affairs References Committee, *Hear Us: Inquiry into Hearing Health in Australia*, May 2010

^{vi} The Senate, Community Affairs References Committee, *Hear Us: Inquiry into Hearing Health in Australia*, May 2010.

^{vii} Australian Bureau of Statistics (ABS), *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, April 2008, p. 134.

^{viii} Australian Hearing, *Hearing Loss in Australia: It's more common than you might think*, available at:

<http://www.hearing.com.au/upload/media-room/Hearing-loss-in-Australia.pdf>

^{ix} Australian Hearing, *Hearing Loss in Australia: It's more common than you might think*, available at:

<http://www.hearing.com.au/upload/media-room/Hearing-loss-in-Australia.pdf>

^x The Senate, Community Affairs References Committee, *Hear Us: Inquiry into Hearing Health in Australia*, May 2010.

^{xi} Australian Hearing, *Hearing Loss in Australia: It's more common than you might think*, available at:

<http://www.hearing.com.au/upload/media-room/Hearing-loss-in-Australia.pdf>

^{xii} Submission to: Senate Community Affairs References Committee, *Inquiry into Hearing Health in Australia*, Australasian Newborn Hearing Screening Committee.

^{xiii} DOHA cited in The Senate, Community Affairs References Committee, *Hear Us: Inquiry into Hearing Health in Australia*, May 2010.