Hearing loss and its impact on the Senior Adult Community in North Carolina Prepared for the Aging Study Commission March 20, 2008

Background

It is common that as people age, sensory and physical capabilities gradually deteriorate. Prevalent among these age-related sensory losses is the decline in the sense of hearing.

When the average American thinks about hearing loss, what typically comes to mind are images such as a person who uses sign language; the older adult who cups his hands behind his ears and continuously asks in a high-pitched, querulous voice, "huh?" or "what's that?"; a child with a noticeable difference in speech patterns. Current studies by the National Institute on Deafness and Other Communication Disorders (NIDCD) estimate that the hearing loss population exceeds 31 million in the United States, approximately 10% of the overall population, an average of 1 out of every 10 people. Because North Carolina has become a haven for retirees, average statistics estimates are higher for the state, both currently and projected. Based on statistics from the 2000 U.S. Census Bureau and the National Center for Health Statistics, it is estimated that over one (1) million North Carolinians have some form of hearing loss. That is one (1) out of eight (8) North Carolinians.

Hearing loss occurs at all ages, encompassing all ethnic and socioeconomic groups. However, it is the older adult population that has the highest percentage of people with some form of hearing loss. The impact of such sensory loss is not only on the senior himself but also on family, friends and caregivers. The National Institute on Deafness and Other Communication Disorders (NIDCD) reports that one (1) out of every three (3) persons by age 65 has some form of hearing loss.

At age 80 and above, the percentage of hearing loss increases to about half of this population. The Hearing Loss Association of America (HLAA) reports that 50% of men and 35% of women 65 and over have some degree of hearing loss.

These numbers are only expected to grow due to baby boomers entering senior adulthood, improved medical treatments resulting in a longer life span, and the continual noise factors to which people expose themselves. The Better Hearing Institute (BHI) reports one (1) in every six (6) "Boomers" have some hearing loss due to the effects of age coupled with years of hearing abuse. AARP reports 10 million persons aged 45 to 64 have hearing loss. By the year 2030, it is projected that 78 million individuals in the United States will have been diagnosed with hearing loss (NIDCD). The Center for Disease Control (CDC) cites 17% of the total national adult population will be impacted by hearing loss.

For the State of North Carolina, projected total population for the year 2030 is estimated to be over 12 million. This would mean an increase in the estimated population with hearing loss to two and one half (2.5) million citizens. That is about one (1) out of five (5), or 20% of the population. Using State Demographic information, the NC Division of Services for the Deaf and the Hard of Hearing estimates the current hearing loss population among senior adults to be 166,420 for ages 65-74 with a projected increase in 2030 to 342,897. For senior adults ages 75 and up, current numbers indicate 207,483 persons with hearing loss and a projected increase to 438,801 for the year 2030.

In the face of these daunting estimates, there is actually very little accurate information in the mainstream media about hearing loss in general. By virtue of its stigma as a hidden disability, with most undergoing a gradual, unnoticed decline, information available on statistics, impact, treatment, adaptive technology, etc. are oftentimes vague and sometimes misleading such as articles about "miraculous" technology that bring people back from a world of silence to one of "perfect" hearing. While some assistive technology is amazing, nobody has yet been able to duplicate the complex ear mechanism with which we were born. No device, regardless of its level of success, will ever restore lost hearing.

The Issues

Misconceptions about hearing loss may be broken down into four categories: a) the nature of hearing loss (briefly described above), b) abilities and self-perceptions of people with hearing loss, c) hearing aids and assistive technology and d) language and communication.

The gradual loss of hearing in most individuals creates a false sense of "normalcy" for the population making it an invisible disability. Unless one is viewed using sign language to communicate or there is a glimpse of a hearing aid, this disability would never be noted. This creates an extremely limited availability of resources for the population dealing with hearing loss, particularly those who are labeled "hard of hearing."

There are some common challenges faced by senior adults who experience hearing loss. These challenges include: a) retaining or regaining a sense of psychological security, or well-being, b) making necessary modifications to daily living skills, c) learning skills of inter-dependency (asking for help), d) learning to adapt to new communication modes, e) maintaining healthy human contact, f) maintaining healthy family dynamics, and g) sustaining economic independence and personal control. Few people are prepared to face these challenges associated with hearing loss. Below is listed a few of the key issues that are faced by senior adults with hearing loss in North Carolina daily:

- 1) Hearing Aids and Limited Insurance Coverage-- One of the first challenges that the hard of hearing person faces is the cost of hearing aids. These devices can often cost several thousand dollars and are rarely covered by any insurance. Neither Medicare nor NC Medicaid offer hearing aid coverage for adults. North Carolina along with bordering states of Virginia, Kentucky, South Carolina, Georgia, and Tennessee are in the list of 16 states that do not provide this coverage. In addition, there is virtually no insurance coverage for hearing aids in North Carolina.
- 2) Many people report difficulty finding a trustworthy professional to assist them with hearing aids. The lack of a 30-day mandated trial period for hearing aids in North Carolina, one of 14 states without such a policy, instills in some individuals this lower level of trust toward the hearing health care professional.
- 3) A myriad of emotional responses resulting from difficulties in communicating often lead to increased mental health concerns for senior adults. Better Hearing Institute reports that hearing loss, particularly in older individuals not using hearing aid or assistive devices, has been directly linked to short-term memory loss, fatigue, anxiety and depression.
- 4) Among senior adults, hearing loss is one of the most prevalent and chronic, but treatable, disabling condition. Hearing loss is ranked third, only behind arthritis and hypertension.
- 5) Hearing loss has also been linked to lower incomes—on average, those with hearing loss but do not wear hearing aids earn up to \$12,000 per year less than peers using hearing aids.

Addressing the Issues

It is critical that these issues surrounding hearing loss be thoroughly studied and based on the information gathered in a comprehensive study, potential solutions be brought forth for legislative consideration. The Department of Health and Human Services would welcome the authority to convene a group of professionals from within the hearing loss field such as direct service providers, audiologists, hearing aid dispensers and fitters, as well as consumers to investigate the impact of hearing loss on North Carolina citizens and to conduct a comprehensive study on the subject. A comprehensive study should contain at a minimum:

1) An evaluation of the extent of hearing loss on North Carolina's population and anticipated future growth in hearing loss.

- 2) A complete description of the impact of hearing loss on the individual as well as the family and community.
- 3) A detailed inventory of the technology available for assisting individuals in dealing with hearing loss, including, but not limited to the costs of such technology, access issues in parts of the state, and availability of qualified service providers.
- 4) A thorough evaluation of potential solutions that could address the resource problems inherent in access to the assistive technology available to address hearing loss.
- 5) An assessment of other surrounding states' processes for dealing with identified issues related to hearing loss.

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