Hamish is studying for his Higher School Certificate

“I was born at the turn of the century with a bilateral sensorineural profound hearing loss - which means I can't hear. Except I can. While my hearing loss is something that can never be erased, it is an obstacle that hasn't stopped me from achieving everything I have.”

Hearing health an international priority

The World Health Organization wants governments to stem the rise in disabling hearing loss. Some 900 million people could suffer from disabling hearing loss by 2050. The Australian Government can lead by making hearing & wellbeing a National Health Priority.

Indigenous ear and hearing health initiatives

A health department investigation has found serious, systemic workforce problems that undermine Government outreach programs in Indigenous communities.

Touchscreen technology in the retail industry

Consumer advocates fear the new point of sale technology is compromising the privacy, dignity and independence of people who are blind or vision impaired or deafblind.

Libby Harricks Memorial Oration

Deafness Forum of Australia and Audiology Australia present the 20th annual Oration next month in Sydney. Since 1999, the Oration series has raised awareness of key issues relating to hearing loss and deafness in Australia.
World Health Organization calls for action from governments to stem the rise in hearing loss

The Australian Government can lead by making hearing health & wellbeing a National Health Priority.

900 million people could suffer from disabling hearing loss by 2050, according to new estimates released by the World Health Organization on the occasion of World Hearing Day on 3 March.

Currently, 466 million people worldwide suffer from disabling hearing loss, 34 million of whom are children. This is up from 360 million people five years ago.

The main reasons for this increase is a growing ageing population and the persistence of risks such as ear and vaccine-preventable infections like measles, mumps and rubella; the use of medicines that can harm hearing such as those used to treat drug-resistant tuberculosis and malaria; and exposure to loud sounds through personal audio devices and in entertainment venues and workplaces.

"Past trends and future projections predict a vast increase in the number of people with hearing loss," says World Health Organization spokesperson Dr Etienne Krug. "Unless appropriate action is initiated, nearly one in 10 people could have disabling hearing loss by 2050. This will considerably affect their lives and pose a significant cost to health systems. Governments must act now to prevent this rise and ensure people with hearing loss can access the services and technologies they need."

Disabling hearing loss affects people in many ways. It impacts on a person's ability to communicate, socialise, learn, work and enjoy life, contributing to poverty, social isolation and feelings of loneliness. In older people in particular, hearing loss is linked to cognitive decline, increasing the risk of depression and dementia. Unaddressed hearing loss costs countries an estimated US$ 750 billion annually in direct health costs and loss of productivity. Interventions can reduce hearing loss and its adverse impacts.

Overall it is suggested that half of all cases of hearing loss can be prevented; in children, this figure is around 60%. This includes by immunizing children against infectious diseases; screening and treating children who suffer from chronic ear infections; promoting safe childbirth to minimise the risk of asphyxia and neonatal infections associated with hearing loss; avoiding the use of particular drugs harmful to hearing; controlling exposure to loud sounds in occupational and recreational settings; and raising awareness about healthy ear care practices through public health campaigns.

Detecting and intervening early when people do have hearing loss helps to minimise the consequences, especially for children. This is achieved through screening programs. In cases where hearing loss is unavoidable, it is vital to ensure access to appropriate and affordable
assistive technologies such as hearing aids and surgically implanted electronic cochlear implants, and communication services like speech therapy, sign language and captioning.

Governments and partners have a key role to play. To stem the rise in disabling hearing loss, the World Health Organization wants governments and their partners to:

- Integrate ear and hearing care into primary health care systems as part of universal health coverage
- Raise awareness among the public about the prevention of hearing loss
- Ensure services to treat hearing loss, including access to assistive technologies and communication services
- Train hearing care professionals
- Regulate sound exposure on personal audio devices and in entertainment venues and workplaces
- Empower people with hearing loss to overcome stigma and discrimination.

**Time to make Hearing Health a Priority**

Disability should be perceived as a spectrum, writes 17 year old Hamish Fairlie, who gave a presentation to federal parliamentarians at the recent 2018 Power of Speech event. Hamish set the record straight around what deaf people can achieve and spoke about the need for governments to make hearing health a priority.

I was born at the turn of the century with a bilateral sensorineural profound hearing loss - which means I can’t hear. Except I can; for all intents and purposes, I am a hearing, speaking member of society who just happens to be totally deaf. While I can read and talk and write, this has come at the great cost of 17 years of constant therapy and rehabilitation, surgery and advocacy, and is not something that I have taken lightly or come into very easily.

In a world of uncertainty, we are inclined to pathologise and diagnose everything we can. Every idiosyncrasy has a clinical definition in a medical dictionary - and while this categorical way of thinking is valuable in the world of science and medicine, it encourages, a mindset that can encourage misconceptions around what hearing loss means for those living with it.

People tend to view disability as different to “the norm” - the unlucky outcome in the clear-cut binary of typical versus atypical. And while this makes sense scientifically, it does little to raise awareness, empathy and sensitivity to the nuances of disability.
Being born profoundly deaf, I have experienced this binary in action. Because of years of speech and auditory therapy, people tend to separate me from my disability and treat me as a total equal. While complimentary, this treatment tends to disregard my requirements as people assume that I’m somehow not actually deaf or my “level” of deafness is inconsequential.

People assume that I’m joking when I say I can’t hear them, or they don’t understand how I can miss things when I have cochlear implants and auditory therapy. “You’re not deaf, you can hear me right now!” “You don’t need therapy; I can understand you clear as day!” This is because of a black and white mindset around hearing loss – I don’t fit the traditional definition of a deaf person (ie I can speak and hear) and therefore my disability and my ability can’t be reconciled.

Because I can hear, I’ve been told by my peers that I don’t deserve listening provisions for aural exams when I was studying French. They think that because I have the ability to hear, my deafness doesn’t warrant the privilege of being recognised or accommodated. It’s a fair conclusion to make, I think, but one that speaks to stereotypes around disability. People tend to not understand, and view things in a way that rigidly divides disabled and abled.

I believe that disability should be perceived as a spectrum, rather than a matter of black and white. Sometimes I can hear, and sometimes I can’t. I’m a speaking, listening deaf person, which defies all stereotypes but represents a small and under-appreciated minority.

The fact that I can integrate myself into mainstream society should not invalidate my position as a disabled person, and, conversely, people who cannot integrate should not be viewed only on the grounds of their disabilities. Rather, each and every person should be understood on their own terms and through their own identities. Just as a hearing person should not be defined by their ability to hear, so too should a deaf person not be defined by their inability.

While I’ve worked hard to get to where I am, I don’t see this as just my achievement. I see it as the achievement of my countless speech therapists, my audiologists, my itinerant teachers, my school and its support programs, my schoolteachers, The Shepherd Centre, the RIDBC, and my parents most of all (and I’d like to think that I had something to do with it too).

J.R.R. Tolkien said that “we know what we are, but not what we may be”, which is to say that while my hearing loss is something that can never be erased, it is an obstacle that hasn’t stopped me from achieving everything I have. Breaking the mould of the stereotypes that seek to define everyone’s ability is a step closer to understanding us all on a more personal and sensitive level.

About the author: Hamish Fairlie is a graduate of The Shepherd Centre, an early intervention therapy provider for deaf and hearing-impaired children in NSW, ACT and Tasmania. He is currently studying for his Higher School Certificate.
Break the Sound Barrier is the name of the campaign that aims to put Hearing Health and Wellbeing on the national agenda.

One in six Australians has a hearing health and well-being issue.

An estimated 3.55 million Australians experienced some degree of hearing loss, making it a more common health condition than cardiovascular disease, asthma, or diabetes. Due to Australia’s ageing population the number of people experiencing hearing loss is also rising and is expected to reach one in every four Australians by 2050.

People with a hearing loss or who communicate in Auslan are not recognised within the public consciousness as having a serious disability that impacts on almost every aspect of a person’s life.

We need you to share our campaign with your friends, colleagues and family members to encourage them to sign up.

One in six people have a hearing health issue

With millions of Australians affected, hearing health and wellbeing deserves to be a National Health Priority.

www.breakthesoundbarrier.org.au
Community farewells dedicated hearing loss pioneer

Improving the lives of hundreds of hearing-impaired residents of the Queensland Sunshine Coast started with Patricia Butler's desire to help her younger sister.

Mrs Butler passed away recently at age 89.

Her decades of volunteer efforts earned her a Medal of the Order of Australia in 2000, an honour her family said that she didn't like to flash around.

A visit to a doctor in 1981 while supporting her “largely deaf” sister Barbara highlighted a lack of services on the Sunshine Coast.

Mrs Butler learned how to lip read and by 1985 was an accredited Better Hearing Australia teacher and counsellor. Better Hearing Australia officially opened its Sunshine Coast branch the following year. From there, Mrs Butler developed a network of support groups in Gympie, Caboolture, Nambour, Noosa and Maleny- all emanating from the branch's Kawana headquarters.

Former branch secretary Penny Phillips said Mrs Butler worked tirelessly for hearing impaired people for more than 30 years.

"Without her support a lot of people would have floundered with their hearing loss issues. But coming to Better Hearing Australia and with Pat's support they grew in confidence and were able to manage their hearing loss. There are many people that remember Pat's caring and commendable work in making life easier for the hearing impaired on the Coast."

Help promote access and inclusion for EFTPOS

Touchscreen technology has entered the retail industry and consumer advocates fear that it is compromising the privacy, dignity and independence of people who are blind or vision impaired or deafblind.

The national not for profit organisation Blind Citizens Australia is working hard to address this issue at a national level. It writes:

Perhaps you’ve already encountered an inaccessible touchscreen EFTPOS terminal when trying to pay for a product in a shop or settle the bill at a restaurant. If not, you are bound to come across one in your travels sometime soon. These devices do not have a physical keypad with buttons, and their touchscreen-only interface makes it difficult or impossible for many people who are blind or vision impaired to enter their PIN independently. This often results in a breach of privacy as people are left with no alternative but to divulge their PIN to another person in order to complete their transaction.

We need to make businesses more aware of the impact inaccessible touchscreen devices can have on customers who are blind or vision impaired, but it can be difficult for even the most experienced advocate to get the message across in some of the crowded and noisy environments where these devices are found. This is where our new advocacy tool comes in!

Blind Citizens Australia has designed a postcard to enable any person who is blind or vision impaired who comes across an inaccessible touchscreen terminal to quickly and easily advocate for change. The front of the postcard has the message, “Use touch screen EFTPOS devices, lose touch with your customers”

The back of the postcard has the message, “I want to pay you, but I can’t use your EFTPOS terminal because it does not have physical buttons. The touch screen design means that people who are blind or vision impaired like me cannot enter their PIN independently. I don’t want to share my PIN with you or anyone else - nor should I have to. Please give this card to your manager. Ask them to tell your bank to stop rolling out EFTPOS machines which can only be operated using touch screens and to give you a device with a keypad with buttons instead. This is the only legal and accessible way for a person who is blind or vision impaired to pay.”

These postcards are available at no cost - all you have to do is contact Blind Citizens Australia to have some sent to your nominated address.

Phone 1800 033 660      SMS 0488 824 623      Email bca@bca.org.au
Hearing loss and dementia

The previous edition of One in Six included an article about an association between hearing loss and dementia that was highlighted by the Lancet Commission’s report.

Dementia might be the greatest global challenge for health and social care in the 21st century.

The Lancet Commission’s report concluded that treating hearing loss in mid-life is not only one of nine modifiable risk factors for dementia, but it is a bigger pay-off than not smoking and being educated.

One in Six reader Christopher Whitfeld wrote this opinion piece.

The importance of this association for investigations into prevention of dementia should now be seriously investigated.

However, the articles cited in the report do not show any evidence that hearing aid use can prevent dementia.

There is considerable debate within Audiology regarding this association. On the one hand, neural plasticity suggests that continuously optimising the hearing pathways with appropriate amplification will preserve them for their intended function at a maximal level. On the other hand it is possible that hearing loss and dementia just come together for some people in middle and old age because there are diseases and hereditary factors that cause both problems. But in each case there is no good evidence yet that hearing aids can slow or prevent the onset of dementia.

Of course, people with hearing loss should be offered hearing aids and especially so if they also have signs of dementia. Hearing aids can delay the diagnosis of dementia by keeping people with dementia and hearing loss functioning at a higher level in conversation for longer. But this is different to prevention.

To determine if hearing aids can slow the onset of dementia an important clinical trial is underway in the U.S. (Aging and Cognitive Health Evaluation in Elders-ACHIEVE). Until this trial is published in around 2020, I do not believe it is safe to include dementia prevention in discussions with people considering hearing aids for the first time. Other factors such as the hearing loss and family support are far larger and have good evidence reported in the literature.

Yours sincerely
Christopher Whitfeld
BSc MA (Audiology) PhD Candidate (Macquarie University)
Review of services and technology supply in the Government Hearing Services Program

Media release by Australian College of Audiology

A recent report commissioned by the Australian Government, and conducted by PricewaterhouseCoopers has suggested significant changes to the way Australian Pensioners and Veterans are able to obtain hearing services.

Australia is known globally for having one of the best Paediatric and Adult hearing Rehabilitation services available; however changes proposed by the Australian Government could seriously impact that. There are 13 recommendations in the report conducted by PricewaterhouseCoopers covering everything from the eligibility criteria to receive services, to the devices supplied, and costings for business. One of the recommendations of concern to the Australian College of Audiology greatly would mean that 30% fewer pensioners and veterans would be able to access the government hearing program.

Vice President of the Australian College of Audiology Mr Mark Paton said “the report has recommended that Australian standards for hearing services be brought into line with those the World Health Organisation recommends for developing nations which is of great concern to us, as Australia is a developed country it means our needs differ greatly to that of a developing nation.

“This would mean a significant drop in numbers of who are eligible to obtain services. There are many clinical studies that indicate that early intervention for even mild hearing loss can mean significant improvement in client’s cognitive processing skills as they age and consequent social integration issues, and to reduce services to so many people may have serious consequences for future health costs.”

Government Indigenous ear and hearing health initiatives

The Australian Government is making a significant investment in initiatives to improve the ear and hearing health of Indigenous children and youth.

The Department of Health engaged Siggins Miller Consultants to undertake an examination of these initiatives. The scope of the examination was to:

- Assess the extent to which objectives of the individual activities have been achieved
- Review equity of access to services
- Identify opportunities to improve implementation, linkages and coordination of Australian Government initiatives to enhance efficiency and effectiveness and improve the patient journey
- Consider opportunities for additional Australian Government activity.

The report concluded:

Service providers and planners working in the outreach programs are facing systemic barriers to delivering timely care to children. There are longstanding structural barriers between Federal, State and even regional health authorities, that are impeding access to secondary and tertiary care and to essential data for effectively addressing the burden of ear disease in Indigenous communities.

The potential de-skilling of the primary health care workforce is a risk to outreach programs. Where staff in Indigenous communities are managing multiple visiting teams treating multiple diseases, they risk becoming coordinators rather than health carers. More training and ongoing support in ear health care for health workers in Indigenous communities is essential.

The opportunities of new ear health technology have the potential to change the way care is provided to Indigenous children. These will have repercussions for government investment in the near future.

The system-related issues are considerable and these are addressed in the report’s recommendations.

Deafness Forum of Australia and Audiology Australia present the 20th annual Libby Harricks Memorial Oration next month in Sydney.

Since 1999, the Libby Harricks Memorial Oration series has raised awareness of key issues relating to hearing loss and deafness in Australia.

The 2018 Oration is to be a key-note address on Sunday 20 May during the Audiology Australia 2018 national conference.

Entry to the Oration is free but it does not include entry to other parts of the conference program.

The Orator in 2018, Dr Graeme Innes AM is a lawyer, author, and company director. He has been a human rights practitioner for more than thirty years. Graeme was a Commissioner at the Australian Human Rights Commission for almost nine years, responsible for issues relating to disability, race and human rights.

To see the full program for the Audiology Australia National Conference 2018 goto http://www.audiologyaustralia2018.asn.au/conference.html

If you have questions about the Oration series, email Deafness Forum at hello@deafnessforum.org.au

The Oration series honours the memory of the first President of Deafness Forum of Australia.

For her work on behalf of hearing impaired people Libby Harricks was made a Member of the Order of Australia in 1990.
Have your say about services and the National Disability Insurance Scheme

The University of Newcastle NSW wants to hear from parents and carers of children 0-12 years old with any type of hearing loss (including recurrent ear infections).

Tell them what you think about services in your area; and about your experiences with the National Disability Insurance Scheme, or your expectations of the NDIS if you are waiting for its arrival. The information you provide will help make sure children with a hearing loss in all areas of Australia are receiving quality service. Click here for the parent and carer survey: https://www.surveymonkey.com/r/BQ9RWGD

Want to know more? Watch this 90 second clip: https://youtu.be/hmTicuzbvRQ

The University would also like to hear from any specialist professionals and mainstream teachers working with children with a hearing loss. Click here for the specialist professional (teacher of the deaf, audiologist, speech pathologist) survey: https://www.surveymonkey.com/r/BQLBQPT

Click here for the mainstream teacher survey: https://www.surveymonkey.com/r/BJZNVZC

WORLD DEAF RUGBY 7’s Australia 2018

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Australia vs Wales Test (5pm – 7pm 27 April)

WEBSITE: www.worlddeafrugby7s.com

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**Write to your state or territory Health Minister**

Please write to your local Health Minister and ask them to make a personal commitment to making Hearing Health and Wellbeing a National Health Priority.

We’ve written a letter that you can use or borrow from - download [Letter template Health Ministers - hearing a national health priority](#).

And there are contact details for the politicians you can send it to – download [All health ministers contacts May2017](#).

(You can also access the letter and contact list at [http://breakthesoundbarrier.org.au/resources/](http://breakthesoundbarrier.org.au/resources/))

**Share the campaign on social media**

Social media is a powerful tool. Like and share our [Facebook page](#) and [Twitter](#). Use the #soundbarrier hashtag when posting and tweeting about hearing health and wellbeing.

**Know someone who might like to receive One in Six in 2018?**

To subscribe, drop us a line to [hello@deafnessforum.org.au](mailto:hello@deafnessforum.org.au)

If everyone who reads One in Six and helps fund our work, our future would be much more secure. For as little as $5 you can support Deafness Forum. Thank you. [https://www.givenow.com.au/deafnessforum;jsessionid=FCE09D05AD9BAF110DB95EFDFF6E64AF](https://www.givenow.com.au/deafnessforum;jsessionid=FCE09D05AD9BAF110DB95EFDFF6E64AF)

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