Chapter 6 Conclusion

Conclusion

This background paper has discussed the types of hearing impairment that are most common among elderly people, hearing devices and services that may benefit them, and aspects of the delivery system and third-party reimbursement that limit use of these devices and services. Federal policy options have not been analyzed. However, some of the findings of this paper are relevant to the development and analysis of Federal legislative and regulatory policies. These are listed below:

- Hearing impairment is very common among elderly people and can seriously affect their safety, quality of life, and ability to live independently.
- Most research on hearing impairment has focused on very severe impairments, deafness, and the hearing impairments of young people, rather than the moderate or partial hearing impairments that are common among elderly people. As a result, many questions about the pathology of hearing loss in elderly people remain unanswered. The term presbycusis is used to refer to hearing loss associated with aging, but there is disagreement about the term's meaning. In addition, the causes of presbycusis are not well understood.
- Most research on treatment for hearing impairment has focused on medical and surgical treatments rather than rehabilitative approaches. Yet the latter are generally more effective for the types of hearing impairment common among elderly people. Rehabilitative approaches such as the use of hearing aids, assistive listening devices, and aural rehabilitation services can improve a person's ability to communicate even when the underlying cause of the hearing impairment cannot be cured,
- Third-party reimbursement, including Medicare and Medicaid, is available for medical and surgical treatment but usually is not available for hearing aids, assistive listening devices, and some aural rehabilitation services, Thus, these reimbursement programs fail to fund the treatments that are most effective for elderly people.

- Many people, including the elderly, their families, health care and social service professionals, and others, are not aware of the prevalence of hearing impairment among elderly people; its physical, emotional, and social impact; and the hearing devices and services that can compensate for it. Public education to increase awareness of this problem and training for health care and social service professionals are needed.
- Negative attitudes about aging and the rehabilitation potential of elderly people discourage the use of potentially effective treatments. Public education programs could be designed to counteract these negative attitudes. In addition, they could emphasize that communication is a two-way process, involving both the speaker and the listener. Some of the simplest methods for facilitating hearing, such as the rules for speaking to someone with a hearing loss, require active cooperation by the speaker. Public education programs could emphasize the role of the speaker in facilitating effective communication with hearing impaired people.
- Hearing aids have been helpful for many hearing impaired people, but most hearing impaired people do not buy a hearing aid and some who buy an aid do not use it. Factors that interfere with increased use of hearing aids include problems in the design or function of the aid: problems in selecting an appropriate aid for the individual; inability of the individual to adjust to the aid; and disagreement among hearing specialists about who can benefit from a hearing aid. The frequency with which each of these problems occurs is not known. Developing solutions for them is a potential area for cooperative research by the hearing aid industry and hearing specialists (physicians, audiologists, and hearing aid dealers).
- Assistive listening devices can be particularly beneficial for hearing impaired elderly people because they lessen the impact of background noise, a major problem for many el-

derly people, These devices can be used in public meeting rooms and for interpersonal communication in doctors' offices, hospitals, and nursing homes, and in a variety of social and recreational listening situations. Yet these devices are not widely used. Increasing their use will require recognition of their potential value by hearing specialists (physicians, audiologists, and hearing aid dealers) and efforts by these specialists to promote them.

- Use of the telephone is particularly important for elderly people who live alone and those who have difficulty getting out because of physical impairments. Federal legislation and regulations that affect the availability of telephones compatible with hearing aids and telephone amplification devices for home use should acknowledge the important role the telephone plays in maintaining the safety, independence, and quality of life of hearing impaired elderly people.
- Much is known about environmental design techniques that can reduce reverberations and background noise and thus facilitate hearing. However, this knowledge has not been widely applied. Building design regulations for long-term care facilities and housing for the elderly could incorporate these design techniques.
- Aural rehabilitation services such as hearing aid orientation, auditory training, speechreading, and counseling are frequently not available to elderly people with hearing impairments despite their potential benefit.
- The existing service delivery system is fragmented and does not provide optimal hearing services for elderly people. Rivalry among the three types of hearing specialists —physicians who specialize in hearing disorders, audiologists, and hearing aid dealers-contrib-

- utes to the fragmentation of the delivery system. Any Federal legislation or regulations related to hearing services could be designed to encourage the development of coordinated service delivery systems.
- In some instances, an educated consumer is the best protection against deficiencies in the service delivery system. Self-help groups may be the most effective method for educating consumers,
- Although almost half of all hearing impaired people are over 65, the training of hearing specialists generally has not emphasized the types of hearing impairments that are common among elderly people and the most appropriate treatments for them. Each type of hearing specialist needs training in these areas.
- The impact of hearing impairment on elderly people in hospitals and nursing homes can be particularly severe, limiting their ability to communicate with doctors, nurses, and other personnel, understand their medical treatment, and understand and adjust to facility routines. Federal and State regulations govern many aspects of patient care in hospitals and nursing homes, but few regulations apply to the provision of hearing devices and services for hearing impaired patients.

While hearing impairment is a serious problem among elderly people in this country, partial solutions are available. We now have an increased understanding of the problem and various devices and services are available. Federal initiatives in the areas of research, public education, and improvements in the service delivery system could help solve the problems faced by hearing impaired elderly people and could significantly improve the quality of their lives.