



# Age-related hearing loss

## SOCIAL ISOLATION

This evidence theme on age-related hearing loss is a summary of one of the key topics identified by a scoping review of the social isolation research.

### Key points

- Age-related hearing loss is hearing loss that happens gradually as a person gets older.
- In 2017, about 14.5 % (3.6 million) of the Australian population have mild hearing loss and over 75% of this are people over 60 years of age. Age-related hearing loss can result in poor health outcomes and withdrawal from social activities.
- Hearing loss if not managed leads to lower levels of social engagement due to communication challenges and contributes to social isolation among older people in the community.

### What is age-hearing loss in older people?

Age-related hearing loss (also called presbycusis), is hearing loss that happens gradually as people get older. [1] In 2017, about 14.5% (3.6 million) of the Australian population have mild hearing loss and over 75% of this are people over 60 years of age. [2] Signs of age-related hearing loss include hearing difficulties during phone conversations or in noisy environments, a frequent need to turn up the television volume, and occasionally missing the doorbell or phone ringing. [1, 3]

Age-related hearing loss is found to be independently related to poor health outcomes such as rapid cognitive decline, [4] dementia, [5] and poorer physical functioning. [6] Hearing loss in older people also often lead to communication challenges, frustration or embarrassment and consequently, social withdrawal. [1,7]

## What is known about age-related hearing loss in relation to social isolation?

We found two reviews that focused on hearing loss in older people. [7,8] One review focused on community settings [7] and the other on residential aged care settings. [8]

### Findings reported were:

- Hearing loss increased social isolation in older people in the community. Women who experienced hearing loss were more likely to be socially isolated. [7] The review authors explained that women depend on verbal communication for social connection more than men. Therefore, experiencing hearing problems makes communication more challenging and consequently making them less socially connected.
- Hearing loss often led to social isolation and limited opportunities for older people in residential aged care settings to engage in social activities. Residents experienced communication difficulties especially if engaging in group conversations. Due to hearing loss, residents kept to their room and avoided social interactions. Staff members attending to their needs became the only people residents engaged with, but only for a limited time. However, staff members were not adequately trained to communicate with residents with hearing problems. [8]

## Limitations

This evidence theme has been informed by the results of a scoping review intended to map the published research in this area. Our findings reflect the current state of the evidence which we note is limited in breadth and quality.

## What can an individual do?

- Assess reasons why older people suddenly confine themselves to their rooms.
- Look for signs of hearing loss in older people; refer them to their General Practitioner (GP) and/or audiologist for assessment and management.
- Be aware of the noise around older people with hearing loss. Where possible, limit the noise in the environment or choose a quiet place or spot in the room for them.
- Face older people with hearing problems when speaking to them to make sure they hear you.
- Speak clearly; remove masks if needed to support communication.

- Ensure effective management of hearing aids for people who have them, including ensuring the person is wearing their hearing aid, that the batteries are charged, and that the hearing aid is being used to its maximum capacity such as pairing with smart devices and use of hearing loop.
- Enable subtitles on TVs and other audio devices, making use of amplification technology as appropriate.
- Promote the importance of preventing and treating hearing loss to maintain brain health and reduce risk of dementia, including the concept of use it or lose it.
- Address the safety issues of hearing loss in both residential and community.
- When planning social activities in residential or for community clients, always consider noise levels. Choose social venues with lower ambient noise, choose outdoor dining where noise is lower, choose off peak times to dine when noise is lower. Ensure people are seated close together to maximise hearing.
- If running events with guest speakers (very common in community aged care) ensure amplification and choose venues with a hearing loop.

## What can an organisation do?

- Minimise noise in the facility by having multiple quiet spaces for residents to engage in conversation.
- Consider environmental modifications or install hearing enabling technology so residents can engage with staff and other residents.
- Ensure annual hearing checks for older people. Have a GP referral process in place and improve hearing services and referral to audiologist for older people who have hearing loss.
- Provide best practice communication strategy training to staff members so that they can communicate with older people who have hearing loss.
- Provide training for staff members in managing hearing aids in residential settings so they can ensure hearing aids are worn, adjusted and charged.
- Promote the importance of treating hearing loss to reduce risk of dementia.
- Develop policies and procedures to ensure events for community clients are as inclusive as possible for people with hearing loss and promote that these events are hearing inclusive.
- Prioritise the safety of community clients with hearing loss by systematically encouraging purchase of assistive technology from home care funding such as visual smoke alarms, phone ring amplifiers and flashers etc.

## References

1. Health Direct Australia [Internet]. Australia: Government of Australia; 2023 [cited 2023 Oct 25]. Available from: <https://www.healthdirect.gov.au/hearing-loss>
2. Kiely KM, Anstey KJ. Putting age-related hearing loss on the public health agenda in Australia. *Public Health Res Pract.* 2021;31(5):e3152125.
3. National Institutes of Health National Institute on Deafness and Other Communication Disorders [Internet]. United States of America; 2023 [cited 2023 Oct 25]. Available from: <https://www.nidcd.nih.gov/health/age-related-hearing-loss>
4. Lin FR, Yaffe K, Xia J, Xue QL, Harris TB, Purchase-Helzner E, Satterfield S, Ayonayon HN, Ferrucci L, Simonsick EM; Health ABC Study Group. Hearing loss and cognitive decline in older adults. *JAMA Intern Med.* 2013 Feb 25;173(4):293-9.
5. Gallacher J, Ilubaera V, Ben-Shlomo Y, Bayer A, Fish M, Babisch W, Elwood P. Auditory threshold, phonologic demand, and incident dementia. *Neurology.* 2012 Oct 9;79(15):1583-90.
6. Chen DS, Betz J, Yaffe K, Ayonayon HN, Kritchevsky S, Martin KR, Harris TB, Purchase-Helzner E, Satterfield S, Xue QL, Pratt S, Simonsick EM, Lin FR; Health ABC study. Association of hearing impairment with declines in physical functioning and the risk of disability in older adults. *J Gerontol A Biol Sci Med Sci.* 2015 May;70(5):654-61.
7. Shukla A, Harper M, Pedersen E, Goman A, Suen JJ, Price C, Applebaum J, Hoyer M, Lin FR, Reed NS. Hearing Loss, Loneliness, and Social Isolation: A Systematic Review. *Otolaryngol Head Neck Surg.* 2020 May;162(5):622-633.
8. Ludlow K, Mumford V, Makeham M, Braithwaite J, Greenfield D. The effects of hearing loss on person-centred care in residential aged care: a narrative review. *Geriatr Nurs.* 2018 May-Jun;39(3):296-302.

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