

Does the current Outreach
program meet hearing-service
needs in Aboriginal and Torres
Strait Islander populations?

Executive Summary

The objectives of this study were to compare the current hearing services provided in the ASPHIA program to estimated hearing-service needs in the Aboriginal and Torres Strait Islander population in Australia, with the intention of raising awareness of the mismatch between service provision and service needs in this population, and to inform policy making. Information from analysis is important to help ensure that resources are directed towards effective interventions to improve outcomes.

Key findings

Of the 77,162 estimated to have a hearing loss, 10,669 (13.8%) received hearing services through the funded program administered by Australian Hearing in 2017-18.

Eligibility criteria for Australian Hearing services include children under 26 years of age, and adults over 50 years of age. Of people with hearing loss, 48.3% of eligible children and 11.3% of eligible adults received hearing services in the past year.

Extending the program funds would reduce the mismatch between current services and needs. Increased funds directed to the 0-4 year group (current shortfall of 56%) would capitalise on the '0-6 years Hearing Assessment Program' to enable children diagnosed early to receive intervention early so that their language and educational outcomes can be improved.

Extending the program eligibility criteria to young adults between 25 and 49 years of age would improve their employment outcomes.

Methodology

This includes comparing the number of clients served by Australian Hearing over the past 12 months by the Australian Hearing ASPHIA program with estimated number of people with hearing loss in the Indigenous population. Data from the Australian Bureau of Statistics (Census of Population and Housing 2011 and 2016) were used to estimate population size, and prevalence rates of hearing loss in children below 26 years of age were derived from on-line data on Ear Health from the Australian Institute for Health and Welfare, and Torres Strait Islander Health Performance Framework 2017.

Prevalence rates of hearing loss for adults aged over 50 years were drawn from the published rate in the general population in the Access Economics Report 2017. The only published data on prevalence of hearing loss in Indigenous adult populations were those based on self-report of ear or hearing problems from the Australian Institute for Health and Welfare (Table 1.15.4). As the self-report data are not specific in regards to presence of hearing loss, the published rate of the general population was adopted for the 50+ age group. This is a conservative estimate, given the much higher prevalence of hearing loss in Indigenous children compared to the general population.

Comparing current services and estimated needs

Table 1 shows the estimated number of cases of hearing loss with the prevalence rates of hearing loss (better ear) by age group, and the number of cases self-identified as Aboriginal and/or Torres Strait Islander who received services from Australian Hearing (AH) service program in 2017-2018.

Age (Yrs)	2016 Population size (n) ^(a)	Est proportion of population with hearing loss (%) ^(b)	Est no. of persons with hearing loss (n) ^(c)	AH Outreach 2017-18 (n)	AH Main-stream 2017-18 (n)	AH Total 2017-18 (n) ^(d)	AH Total (%) ^(e)	Total shortfall requiring services
0 - 4	73,262	3.0 [^]	2,198	466	502	968	44.0	1,230
5 - 11	104,955	3.0 [^]	3,149	1,957	672	2,629	83.5	520
12 - 17	83,669	3.0 [^]	2,510	610	381	991	39.5	1,519
18 - 24	82,214	3.0 [^]	2,466	203	191	394	16.0	2,072
25 - 49	197,298	11.7 [!]	23,084	566	166	732	3.2	22,352
50+	107,771	40.6 [#]	43,755	2,156	2,799	4,955	11.3	38,800
Total	649,169		77,162	5,958	4,711	10,669	13.8	66,493

Notes:

a) Source: Australian Bureau of Statistics, Census of Population and Housing 2011 and 2016. Compiled and presented by .id, the population experts (<https://home.id.com.au/demographic-resources/>)

b) Source: Australian Institute for Health and Welfare, Aboriginal and Torres Strait Islander Health Performance Framework 2017 online data tables, 1.15 Ear Health. (<https://www.aihw.gov.au/reports/indigenous-health-welfare/health-performance-framework/data#page2>)

[^] National Estimates from the AIHW as reported in Source (b) in Tables 1.15.3 and 1.15.9.

[!] Average self-report of Indigenous persons with ear/hearing problems 2012-13 between age groups 25-34years, 35-44 years, 45-54 years. AIHW source (b) Table 1.15.4. *Use estimate with extreme caution.*

[#] National estimates based on Access Economics (2017) The Social and Economic Cost of Hearing Loss in Australia. HCIA Report. Chart 1. Table 3.5 was used to estimate hearing loss, better ear, for ages 50-79. *Use estimate with extreme caution.*

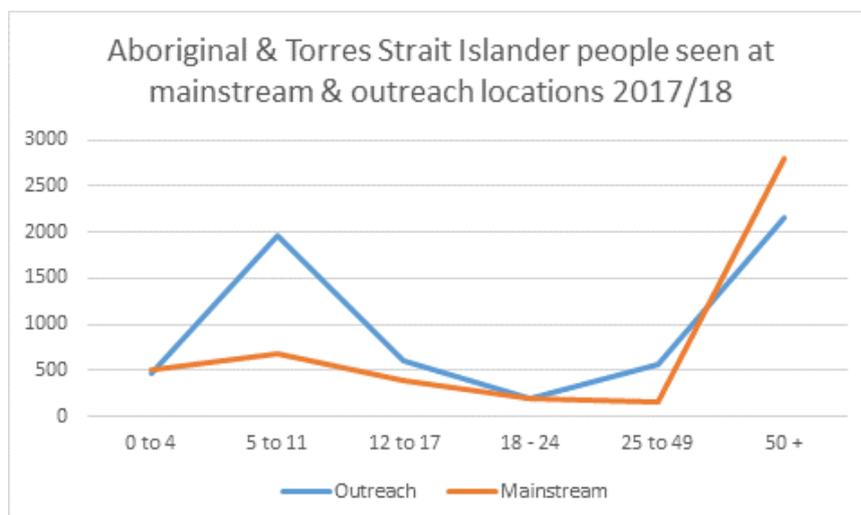
c) 2016 Population size multiplied by estimated proportion of population with hearing loss.

d) Source: Number of cases seen by Australian Hearing, based on CSO client database 2017-2018.

e) Number of cases seen by Australian Hearing in Source (d), as a proportion of estimated needs, expressed as a percentage.

Chart 1 shows the number of people in the respective age groups who received services from Outreach and Mainstream services of Australian Hearing in the year 2017-18.

Chart 1.



There were estimated to be 1,230 children between 0 and 4 years of age who require hearing services but do not currently receive them (Table 1). This represents 56% of children estimated to have a hearing loss requiring intervention, many of whom might not have presented with hearing loss at Australian Hearing, due partly to limitations in current diagnostic services. The 0 to 6-year-old Hearing Assessment program is likely to increase the rate of identification of hearing loss in this young population, and additional funding would be necessary to enable those detected with hearing loss at a young age to receive hearing intervention services. The current cost for servicing each client is estimated to be \$1,275. To meet service needs for this young age group would require an additional funding source of \$1,568,250 per annum.

Australian Hearing programs currently provide services to 83.5% of children between 5 and 11 years of age who require hearing services.

Table 1 shows that the proportion of eligible children receiving hearing services decreases after 12 years of age. The low uptake of intervention in the 18 to 24 year age group is comparable to the general population, and is likely related to psychosocial factors influencing adolescents' uptake of hearing aids. The finding calls for research into facilitators and barriers in hearing rehabilitation for this age group in general, and for Aboriginal and Torres Strait Islander adolescents in particular.

Extending the program eligibility criteria to young adults between 25 and 49 years of age would likely improve their employment outcomes (EHIMA 2015). People in this age group are not eligible for hearing services under the current scheme.

Related issues

Further considerations on funding level need to include,

- The increase in cost of hearing devices over the next financial year, with advances in technology.
- The provision of best-practice service to all communities, including those that currently receive limited services of 2 or less visits in a year. This compromises the effectiveness of rehabilitation for children.
- The provision of tele-follow up services for children in rural and remote communities will increase, proportionate with the increase in number of children to be fitted with hearing aids.

References

Access Economics (2017) The Social and Economic Cost of Hearing Loss in Australia. HCIA Report.

Australian Bureau of Statistics, Census of Population and Housing 2011 and 2016. Compiled and presented by .id, the population experts (<https://home.id.com.au/demographic-resources/>)

Australian Institute for Health and Welfare, Aboriginal and Torres Strait Islander Health Performance Framework 2017 online data tables, 1.15 Ear Health. (<https://www.aihw.gov.au/reports/indigenous-health-welfare/health-performance-framework/data#page2>), accessed August, 2018.

Australian Hearing CSO report, 2017-18.

European Hearing Instrument Manufacturers' Association 2015, *EuroTrak UK 2015*, www.ehima.com/wpcontent/uploads/2016/02/EuroTrak_2015_UK.pdf, accessed August, 2018.

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