'I keep away from people'—combined vision and hearing loss is isolating more and more older Australians

July 8 2024, by Moira Dunsmore, Annmaree Watharow and Emily Kecman

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Our aging population brings a growing crisis: people over 65 are at
greater risk of dual sensory impairment (also known as "deafblindness" or combined vision and hearing loss).

Some 66% of people over 60 have hearing loss and 33% of older Australians have low vision. Estimates suggest more than a quarter of Australians over 80 are living with dual sensory impairment.

Combined vision and hearing loss describes any degree of sight and hearing loss, so neither sense can compensate for the other. Dual sensory impairment can occur at any point in life but is increasingly common as people get older.

The experience can make older people feel isolated and unable to participate in important conversations, including about their health.

**Causes and conditions**

Conditions related to hearing and vision impairment often increase as we age—but many of these changes are subtle.

Hearing loss can start as early as our 50s and often accompany other age-related visual changes, such as age-related macular degeneration.

Other age-related conditions are frequently prioritized by patients, doctors or caregivers, such as diabetes or heart disease. Vision and hearing changes can be easy to overlook or accept as a normal aspect of aging. As an older person we interviewed for our research told us, "I don't see too good or hear too well. It's just part of old age."

**An invisible disability**

Dual sensory impairment has a significant and negative impact in all
aspects of a person's life. It reduces access to information, mobility and orientation, impacts social activities and communication, making it difficult for older adults to manage.

It is underdiagnosed, underrecognised and sometimes misattributed (for example, to cognitive impairment or decline). However, there is also growing evidence of links between dementia and dual sensory loss. If left untreated or without appropriate support, dual sensory impairment diminishes the capacity of older people to live independently, feel happy and be safe.

A dearth of specific resources to educate and support older Australians with their dual sensory impairment means when older people do raise the issue, their GP or health professional may not understand its significance or where to refer them. One older person told us: "There's another thing too about the GP, the sort of mentality 'well what do you expect? You're 95.' Hearing and vision loss in old age is not seen as a disability, it's seen as something else."

Isolated yet more dependent on others

Global trends show a worrying conundrum. Older people with dual sensory impairment become more socially isolated, which impacts their mental health and well-being. At the same time, they can become increasingly dependent on other people to help them navigate and manage day-to-day activities with limited sight and hearing.

One aspect of this is how effectively they can comprehend and communicate in a health-care setting. Recent research shows doctors and nurses in hospitals aren't making themselves understood to most of their patients with dual sensory impairment. Good communication in the health context is about more than just "knowing what is going on," researchers note. It facilitates:
• shorter hospital stays
• fewer re-admissions
• reduced emergency room visits
• better treatment adherence and medical follow up
• less unnecessary diagnostic testing
• improved health-care outcomes.

'Too hard'

Globally, there is a better understanding of how important it is to maintain active social lives as people age. But this is difficult for older adults with dual sensory loss. One person told us

"I don't particularly want to mix with people. Too hard, because they can't understand. I can no longer now walk into that room, see nothing, find my seat and not recognize [or hear] people."

Again, these experiences increase reliance on family. But caring in this context is tough and largely hidden. Family members describe being the "eyes and ears" for their loved one. It's a 24/7 role which can bring frustration, social isolation and depression for caregivers too. One spouse told us:

"He doesn't talk anymore much, because he doesn't know whether [people are] talking to him, unless they use his name, he's unaware they're speaking to him, so he might ignore people and so on. And in the end, I noticed people weren't even bothering him to talk, so now I refuse to go. Because I don't think it's fair."

So, what can we do?

Dual sensory impairment is a growing problem with potentially
devastating impacts.

It should be considered a unique and distinct disability in all relevant protections and policies. This includes the right to dedicated diagnosis and support, accessibility provisions and specialized skill development for health and social professionals and caregivers.

We need to develop resources to help people with dual sensory impairment and their families and caregivers understand the condition, what it means and how everyone can be supported. This could include communication adaptation, such as social haptics (communicating using touch) and specialized support for older adults to navigate health care.

Increasing awareness and understanding of dual sensory impairment will also help those impacted with everyday engagement with the world around them—rather than the isolation many feel now.

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