



How easy it is to mistake ear disease for misbehaviour in a child

Conversations about ear disease need to be respectful of the family and the knowledge caregivers have of their child's ear disease. Healthcare providers need to communicate clearly without medical jargon to explain the different treatment options and work with caregivers in the decision-making process of how to best treat the ear disease and hearing loss for their child.



Noise pollution is hurting animals

Better regulation is needed to protect animals from construction work and noisy events. Animals don't have a say in what building projects or music concerts go ahead but they can suffer the consequences.



I finally decided to wear my hearing loss rather than hide it

As a child it was a secret I worked feverishly to hide, and then adult life brought more humiliating encounters. I was born deaf. But adult life also brought more humiliating encounters, especially as I entered the legal profession.



New resources for students with disability

The Department of Education has worked with young people with disability and their parents and caregivers to co-design a new range of resources about their rights under the Disability Standards for Education.

Sign for Human Rights

International Day of Sign Languages on 23 September is a unique opportunity to support and protect the linguistic identity and cultural diversity of all Deaf people and other sign language users.

Currently **one in six** Australians suffer from some form of hearing loss. This may increase to one in four by 2050. Access Economics 2006

Deafness Forum Australia is a Voice for All. It is the peak body representing the views and interests of the [One in Six Australians](#) who live with hearing loss, have ear or balance disorders, people who also communicate using Australian Sign Language, and their families and supporters. Our mission is to make hearing health & wellbeing a national priority in Australia.

Symptoms of childhood ear disease and hearing loss mistaken for misbehaviour



New research has revealed living with childhood ear disease and hearing loss can substantially impact the physical, emotional, and social wellbeing of Aboriginal and Torres Strait Islander children.

Lead author of the study, Letitia Campbell, a community-based Aboriginal Research Officer with Western Sydney University's School of Medicine, says Aboriginal and Torres Strait Islander children have a high burden of Otitis Media in childhood, and she is determined to improve how families can manage the condition and receive better healthcare.

"Caregivers have described how easy it is to mistake ear disease for misbehaviour in a child, and how distressing this is to the children who feel they are always getting into trouble for 'not listening' or talking too loudly when there is a genuine underlying medical reason.

"Symptoms can change and vary between episodes of ear disease in children. Sometimes they can be obvious symptoms such as ear pain, a high temperature, or discharge from the ear; but there are also subtle symptoms which can sometimes be missed such as a child being uncharacteristically quiet or attention-seeking," she said.

The study has also shown that caregivers of Aboriginal and Torres Strait Islander children often fear racial bias and having their child's condition unfairly blamed on their parenting rather than the broader structural factors that impact healthcare access.

Ms Campbell says recognising and considering the experiences of caregivers looking after a child with hearing health problems and helping healthcare providers to better understand and be aware of these issues, is the key to building trusting relationships that lead to positive patient outcomes.

"Conversations about ear disease need to be respectful of the family and the knowledge caregivers have of their child's ear disease. Healthcare providers need to communicate clearly without medical jargon to explain the different treatment options available and work with caregivers in the decision-making process of how to best treat the ear disease and hearing loss for their child."

Noise pollution is hurting animals

Fay Clark and Jacob Dunn writing for [The Conversation](#)



If you don't like noise, imagine how pets and other animals feel about it. Credit: Aleksey Boyko/Shutterstock

From construction projects to busy roads, airplanes and railways, human noise is everywhere. It is an invisible cause of stress, posing serious risks to human health and wellbeing.

However, noise also harms animals living in close contact with humans. A greater awareness and more understanding is needed into how noise harms pets, farm and working animals.

Wild animals suffer chronic stress, fertility problems and change their migration routes in response to noise. In fish, vibrations from extreme noise can damage the swim bladder which in turn impacts their hearing and buoyancy.

Inaudible noise (vibrations) can also hurt animals by physically shaking their internal body parts. Farm animals experience high levels of vibration during transport.

One noisy event such as a local music festival or extreme weather can trigger long-term fear in animals. The link between noise and fear has been well studied in dogs using recordings of thunderstorms. This kind of noise sensitivity, which affects up to 50% of pet dogs, is triggered by unexpected noises. It makes animals hide or seek human comfort.

Primates, birds and frogs can adjust in the short term to noisy environments by vocalising louder, similar to raising our voices at noisy parties. But the long-term consequences of animals needing to change their methods of communication hasn't been studied.

If you take care of confined animals, pay close attention to human activities that generate noise, such as cleaning and gardening, and how the surroundings may reflect sound waves.

You can protect your pets during noisy events, like thunderstorms and firework displays, by providing extra spaces to escape noise. Soft furnishings like pillows or blankets inside a den help absorb sounds. A pile of blankets to crawl under will help to block out noise.

Better regulation is needed to protect animals from construction work and noisy events. Animals don't have a say in what building projects or music concerts go ahead but they can suffer the consequences.

Zoom baby-steps toward better accessibility

By [Shari Eberts](#) for [Living With Hearing Loss](#)



Until now, when someone in a Zoom meeting wanted to use auto-captions (and the host hadn't already turned them on), they needed to request that they be enabled. But in Zoom's latest release update, it finally allows people to turn on the captions for themselves as needed. [Zoom's August 7 2022 release notes](#) provide more details.

This is a nice step forward, but the major hurdle remains. Getting the host (or their company) to enable auto-captions in the account's main settings. Without that initial and complicated step, this improved functionality in the meeting won't mean much. If you host Zoom meetings, please do this now. If you attend Zoom meetings, please ask all your hosts to do the same. Only one step is now required at the [account level](#). This step must only be done once.

1. [Log into your Zoom](#) account on a web browser. These settings are *not* in the app (you must login in via the web, so follow this [link](#)).
2. Select "Settings" and scroll down to "In Meeting (Advanced)."
3. Toggle the switch by "Manual captions" and check the two boxes underneath to allow 3rd-party services to add closed captioning (i.e., [CART](#)) or to assign a participant to type.
4. Toggle the switch by "Automated captions." In some version of Zoom, auto-captions will only work if "Manual captions" are also toggled on.
5. Toggle the switch by "Full transcript" to allow people to view the captions in the side panel.
6. Toggle the switch by "Save captions" to allow participants to download the caption transcript for their future use. This will only work if "Full transcript" is also enabled.

Sometimes hosts are unwilling to enable captions because of privacy concerns. Perhaps they don't want the transcript of a brainstorming meeting to circulate afterwards. If a host has these concerns, there is now a solution. Have them enable "Automated captions" but not "Save captions." Then no transcript can be downloaded.

We are happy to see Zoom continue its baby-steps towards true accessibility for people with hearing loss, but will they ever get there? Here's hoping.

Relationship between smartphone use and impulsivity among hearing-challenged youth



Communication and information technologies are hallmarks of contemporary life.

A smartphone is no longer just a mobile phone, but an essential element in our lives. It is not only because of the entertainment it provides but also because of its applications that perform multiple tasks in real time, ability to download numerous applications, as well as being a means of obtaining lots of news and information. However, overusing a smartphone could be a risk factor to an individual's health.

"Nomophobia" is a new term for excessive dependence on a phone. Short for no-mobile-phone phobia, it is characterised by the fear of not having access to a phone. Specifically, nomophobia is used to describe the anxiety, fear, and discomfort caused by loss of communication with others owing to smartphone loss or Internet crashes, especially for individuals accustomed to using these devices.

It is thought that nomophobia is rapidly becoming a serious public health concern. It involves several behaviours and symptoms. An individual begins to worry about forgetting their phone somewhere, running out of battery charge, losing network connectivity, disabling it, and being unable to use it. This constant state of anxiety leads a lack of concentration and problems such as dissatisfaction and loneliness when one is without one's cell phone, frustration, despair, and loss of happiness. Researchers have compared nomophobia with other mental illnesses such as obsessive compulsive disorder and anxiety and depression.

Research suggests that individuals with a high level of impulsivity could experience difficulties in postponing their mobile phone use, especially when experiencing negative emotions, because they tend to rely more on their mobile phones to alleviate such negative emotions in the short term.

For young people who experience hearing difficulties and for those who are Deaf, the use of smart phones is integral to their assimilation into the general community and to communication with their peers. However, excessive use also exposes them to nomophobia and smartphone addiction.

From [Nature.com](https://www.nature.com), Relationship between nomophobia and impulsivity among deaf and hard-of-hearing youth.

Hearing Australia celebrates 75 years of service

For 75 years, Hearing Australia has provided world-leading research and hearing services for the wellbeing of all Australians.



The organisation cares for thousands of children, adults, Aboriginal and Torres Strait Islander peoples, pensioners and veterans every week in our cities, regional centres and some of the most remote parts of our nation.

[Learn more](#) about Hearing Australia's 75th anniversary.

Be part of NAL's mission to improve lives



The National Acoustic Laboratories (NAL) is expanding the reach of its world-leading research studies by enabling people all over the world to participate and make a difference. NAL invites you to join the HEARsearch community.

With HEARsearch, the exciting new NAL initiative, participants can contribute to quality hearing research studies from any location using their computer or smartphone. With a higher number and greater diversity of participants, NAL researchers will be able to discover more valuable insights and translate these into innovative hearing services and technology.

Check out the HEARsearch webpage, www.hearsearch.com.au

Sign for Human Rights



[International Day of Sign Languages](#) is a unique opportunity to support and protect the linguistic identity and cultural diversity of all Deaf people and other sign language users.

The UN General Assembly proclaimed 23 September International Day of Sign Languages in order to raise awareness of the importance of sign language in the full realisation of the human rights of people who are Deaf.

The Day recognises the importance of preserving sign languages as part of linguistic and cultural diversity. It also emphasises the principle of “nothing about us without us” in terms of working with Deaf communities.

In Australia, 16,000 people use Auslan at home, according to the Australian Government’s National Census 2021.

Deaf Connect appoints advertising agency



CEO Brett Casey.

Deaf Connect has appointed MediaCom as its [media agency](#).

MediaCom Brisbane will lead all media strategy, planning and offline buying for Deaf Connect and Deaf Lottery.

Deaf Connect is a NDIS registered service provider, and the largest employer of Auslan users.

It is a nationally recognised provider of in-home care for seniors, and a registered training organisation for accredited training in Auslan.

"We're excited to begin our partnership with MediaCom and to work with the team on bringing the lottery, and the work that we can achieve through our fundraising, to more Australians" said Deaf Connect CEO Brett Casey. The announcement is [here](#) in Auslan.

I finally decided to wear my hearing loss rather than hide it – I was just exhausted

Nick Button writes for [The Guardian](#)



As a child it was a secret I worked feverishly to hide, and then adult life brought more humiliating encounters. I was born deaf. When my mother held me as a baby I would put my fingers around her chin, pulling her face towards me so that I could read her lips.

An early visit to an audiologist confirmed my parents' suspicions. I had congenital, high-frequency hearing loss in both ears. My hearing loss was described as moderate to severe.

"Damaged nerves," the audiologist said. Those two words were a portent for yearly hearing tests, speech therapy at the age of 12 and yearly updates on the latest technologies that might address my physical "deficit"; a "deficit" that took more than half a lifetime to own.

I was in prep. A group of six kids were playing in the big yard, a massive slab of bitumen that hosted games of cricket, soccer and rounders, and was also a site for the brutal resolution of conflicts. We were taunting another boy. We jeered in unison, spoke cruel words. His hearing aids seemed like large pebbles that bulged from his ears with wiring that extended from his aids to under his shirt.

Vulnerable, the boy offered an impotent defence: "Leave me alone!" he cried. His speech was stunted, shaped by discrete sentences that lacked fluidity. He had what Fiona Murphy, in her recent book, *The Shape of Sound*, calls a "deaf accent".

I'd joined the pack of powerful boys. I wore my aggression like a mask. I wasn't like that boy. I desperately didn't want to be that boy. He left the school within months or weeks; I cannot be sure. I didn't even know his name. The memory makes me wince.

One day in grade 6, a well-meaning teacher told me in front of the class that I needed to sit in the front row, taking me away from my best friend. Humiliated, I stormed out of class and went home. Looking back, I know that she was looking out for me.

The following year, my parents sent me to a private school. I suspect this was driven by their anxiety about my deafness. The loving, good intentions of my parents led to me experiencing the most difficult years of my life.

As an adult, hearing loss has affected me in different ways, sometimes with a darkly funny twist.

In my mid-20s, parties sometimes ended in the back of a packed car, headed to a grungy room in some far-flung suburb. Usually with one friend and a small group of strangers, a bong would be passed around the room.

Sound took on a completely new shape, music fused with drowsy voices meant trying to catch phrases to glean their meaning. As people laughed loudly, I would be gripped by nauseating paranoia. In response to a question, I'd embark on an ethereal rant that I would later discover had no relationship to the conversation. More laughter. More paranoia. Time seemed interminable and my thoughts fixated on walking the five meters to the door that led into the night and finding my way to the safe silence of home.

But adult life also brought more humiliating encounters, especially as I entered the legal profession.

The Bendigo magistrates court is a testament to Victorian architecture, a building that carries a sense of grandeur. But its wooden floors and walls make it a difficult place for anyone who struggles to hear.

Some years ago, I appeared as an advocate on behalf of a client who was pleading guilty to a string of offences. My plea in mitigation went well for him and he avoided jail. But as I made my submissions, the magistrate challenged my assertions. I could barely hear him. His words, saturated with irritation, seemed to dissolve into the ceiling, leaving me only with a sense of their aggression.

I explained to the magistrate in front of a full court that I had a hearing loss. "You don't say, Mr Button," he said, his voice laced with sarcasm.

After a few years I left the profession, my decision made on that day in Bendigo.

In my early 30s, I bought hearing aids. At the time, I was working as a community worker. I could no longer muddle through. They were a requirement of the job. I had to acknowledge the need to help myself. For years, contemplating this step only brought shame, but now I was resigned.

I was also exhausted: exhausted at missing out on the nuances of conversation; exhausted from asking people to repeat themselves and always feeling the need to apologise; exhausted at missing out on song lyrics; exhausted by feeling irritated at competing with other voices; exhausted at finding my way through distortions that came with noise in all its shapes.

The decision to wear my hearing loss marked a new beginning and my transition into the world of professional work. It was also the sharing of my secret with the world, a secret that had only ever really existed in my head.

A few years ago, I became a mediator, based in Melbourne. Now my job is to assist separated parents to communicate. In other words, I'm now employed to listen to people, and to help them hear each other.

10% of Dutch think they have a hearing loss



From [Hear It](#)

A survey in the Netherlands found that 10% of all Dutch people say they have a hearing loss. Among the Dutch aged 74 years or older, one in three (33%) say they have a hearing loss.

45% of those who say they have a hearing loss in the Netherlands use hearing aids. 75% of them use hearing aids in both ears. 67% said that they should have gotten their hearing aids sooner - the main reason for this was missing out on social life.

Not to be outdone, in a new [poll](#) 10% of French people think they too have a hearing loss.

Cochlear's record revenue

By Neil Dorgan for [Business News Australia](#)

Hearing implant producer Cochlear achieved record sales revenue of \$1.64 billion in the year ending 30 June 2022, propelled by demand for acoustic implants and sound processor upgrades.

The Sydney-based global leader in implantable hearing solutions increased its net profit after tax by 18 per cent to \$277 million. However, statutory net profit dropped 11 per cent to \$289.1 million, which included a one-off gain of \$12 million primarily related to the re-evaluation of its asset [Epiminder](#).

Cochlear implants continued to experience variability in performance, especially across countries most impacted by COVID, with the UK and Australia still performing below pre-COVID levels.

Emerging markets outperformed developed markets in terms of growth, helped by a strong recovery in China and the Middle East. In the US, where volumes are 20 per cent above pre-COVID levels, Cochlear's partners report strong patient pipelines and growing waiting lists, although access to operating theatres remains constrained due to staff shortages.



Image: Cochlear India.

Information products for students with disability and their parents and carers

The Department of Education has worked with young people with disability and their parents and caregivers to co-design a new range of resources about their rights under the Disability Standards for Education.

The resources provide easy-to-use information about the Standards and offer practical advice on how to navigate the education system.

You can find the resources on the Department's website here: www.education.gov.au/disability-standards-education-2005/students.

These resources are designed to help you:

- understand your rights as a student with disability, or the rights of your child
- work with education providers to make sure you can learn and participate on the same basis as students without disability

Students with disability and their families from across Australia helped to design these resources. These resources were funded by the Australian Government.

If you and your community would use these products in a different language, please contact DisabilityStrategy@dese.gov.au

Inner ear therapeutics

Highlights from the latest edition of ENT & Audiology News

Genetics in hearing continues to be a hot topic and Emma Burkitt-Wright, Thomas Monk and Manohar Bance share an [update on genomic testing for deafness](#).

John McDermott and Bill Newman write about [rapid genetic testing to avoid hearing loss in neonates](#).

Gerry O'Donoghue contributed to two feature articles: the [Lancet Commission on Hearing Loss](#) and a delightful [interview with Professor Helge Rask-Andersen](#).

We also hear about the [interface of cochlear implants and therapeutics](#), [microneedles for inner ear precision medicine](#), and [cell therapies for hearing loss](#).

David McAlpine (Macquarie University, Sydney) and team advise us to 'mind the gap' in their excellent feature on [developing a sustainable pipeline for inner ear therapeutics](#), and if your mind has been blown by the futuristic and aspirational themes so far, you need only look to where Daniel Ahari reviews the evidence for [intratympanic steroids in Ménière's disease](#). Finally, [Dr Jaclyn Tan interviews her London-based colleagues](#) who share their wisdom on auditory neuropathy spectrum disorder.

By Emma Stapleton and Ralph Holme writing for [ENT & Audiology News](#)

Invisible disability needs to be heard

By [Evelyn Karatzas](#) for [Riotact](#)



ACT Deafness Resource Centre (Canberra) communications and social media officer Jo Symons. Photo: Jo Symons.

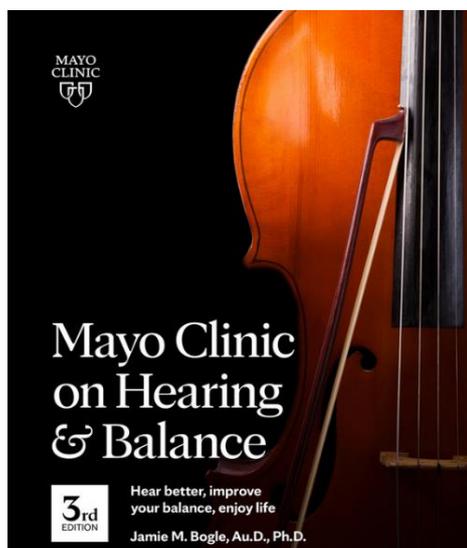
Born deaf with moderate to severe hearing loss, Joe Symons never thought he would be working with people with similar problems.

“Talking with people in the same boat really helped me,” he said. “When I was young, I went to The Shepherd Centre, an organisation that helps children with hearing loss to communicate, speak and form friendships and relationships. That’s how I built my communication skills.”

The [ACT Deafness Resource Centre](#) communications and social media officer said there was a stigma around deafness and people often didn’t know what to do, where to go and how to get information.

“My aim now is to help make hearing loss more visible and advocating about it. I’ve had some great feedback so far and I hope I can help other people like me feel confident and strong.”

Hearing and Balance



A book published by the Mayo Clinic (U.S.) can help you understand what causes hearing loss and balance issues, how they can be prevented, and how you can manage and live well with them.

Dizziness is a common reason adults visit their doctors. Dizziness is more common among older adults, but anyone of any age can experience it.

Your ears are connected to hearing loss and balance disorders. Learn what role you can play in living well with and even preventing hearing loss and balance disorders.

Proceeds from book sales are invested into furthering medical research and education at Mayo Clinic. More info [here](#)



A message to our Member Organisations

Every year, our member organisations nominate people to join the board of Deafness Forum Australia.

The members require competent and committed board members to serve the organisation.

Among a director's responsibilities,

- Good practice governance to oversee and evaluate
- Leadership, in partnership with staff, to guide the organisation's mission and direction
- Stewardship of the organisation's assets to benefit its future

We need directors with skills in Accounting or auditing, Board experience, Communications and media, Business development, Fundraising, Governance issues and practices, Government relations, Marketing, and relevant Legal fields.

We value knowledge in Age-related issues, Children-specific, Disability-specific, Family or carer-specific, Health-specific, Workplace and careers.

Our chief executive can answer your questions and talk aspiring Directors through the role and the process: steve.williamson@deafnessforum.org.au

Nominations must be received by 9 October 2022.

Know someone who deserves their own copy of One in Six?

Drop us a line to hello@deafnessforum.org.au

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