

Wait, so no loud music at all?

What's the problem with loud music? Like sunshine, overexposure can lead to harm. So what can we do, short of throwing away our headphones and avoiding clubbing and live music? First, just like with the sun and skin, we need to be aware of the risks to our hearing and take the necessary steps to protect ourselves.



Hearing tests in noisy workplaces

It is important to test a worker's hearing at the commencement of their career to provide a baseline measurement as a reference for future audiometric test results. Once this is done, early identification of changes to hearing caused by noise is the most effective way of assessing the effectiveness of any control measure in place and in turn preventing hearing loss.



Halving the rate of hearing loss of First Nations Children by 2029

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Bringing musicals to Auslan users

When the Moulin Rouge musical cast finished belting out their act one show-stopper during a recent Sydney performance, a group of viewers closest to the stage didn't clap.

Annual General Meeting

The Annual General Meeting of the members of Deafness Forum Australia will be held online on Wednesday 30 November 2022.

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.

Pumping loud music is putting more than a billion young people at risk of hearing loss

From [The Conversation](#). By [Robert Cowan](#), Professorial Research Fellow, Audiology and Speech Pathology, The University of Melbourne.



Music is an integral part of human life. It's all around us, just like sunshine, lifting our mood. We enjoy it so much that many of us take it with us everywhere on our phones or we spend weekends hitting the club scene, live-music venues or concerts.

Meanwhile, many of us may have felt annoyed by loud sound from music venues or remarked on sound emanating from someone else's headphones. We're probably aware we should prevent hearing loss from loud industrial noise at work or from using power tools at home.

A systematic review released in [BMJ Global Health](#) reports unsafe listening practices in adolescents and young adults from using personal listening devices (such as phones or digital music players) and going to loud clubs and gigs are common, and could be a major factor contributing to hearing loss.

In fact, the authors estimate the pumping tunes could be placing up to 1.35 billion young people at risk of hearing loss worldwide.

What the study looked at

Systematic analysis involves looking across multiple studies to identify consistent findings. In this study, the authors included 33 peer-reviewed studies published between 2000 and 2021, involving over 19,000 people, aged 12–34.

In the study, unsafe listening was identified as listening at levels above 80 decibels for over 40 hours per week. For context, this is the level above which most Australian states [require industry](#) to implement noise protection processes such as use of hearing protectors.

The study confirms the rate of unsafe listening practices is high in adolescents and young adults: 23.81% of them were listening to music on personal devices at unsafe levels and 48.2% at loud entertainment venues (though this rate is less certain). Based on global estimates of population, this translates to up to 1.35 billion young people at risk of hearing loss globally. The World Health Organization [estimates](#) over 430 million people worldwide already have a disabling hearing loss and prevalence could double if hearing loss prevention is not prioritised.

The results tally with our previous studies conducted by Australia's National Acoustic Laboratories and HEARing Cooperative Research Centre.

More than a decade ago we [reported](#) a high potential for hearing loss from attendance at nightclubs, pubs and live concerts in young Australians aged between 18–35 years.

Back then, we found 13% of young Australians (aged 18–35) were getting a yearly noise dose from nightclubs, concerts and sporting activities that exceeded the maximum acceptable dose in industry. In 2015, the WHO launched the [Make listening Safe](#) initiative to encourage young people to protect their hearing.



You can monitor safe listening levels on your device. [Pexels/Burst, CC BY](#)

Why it's bad for your hearing

So what's the problem with loud music? Like sunshine, overexposure can lead to harm.

Loud noise, including music, can [kill off hair cells and membranes](#) in the inner ear (the cochlea). Once hearing is lost, a person mightn't be able to hear or understand speech or sounds around them.

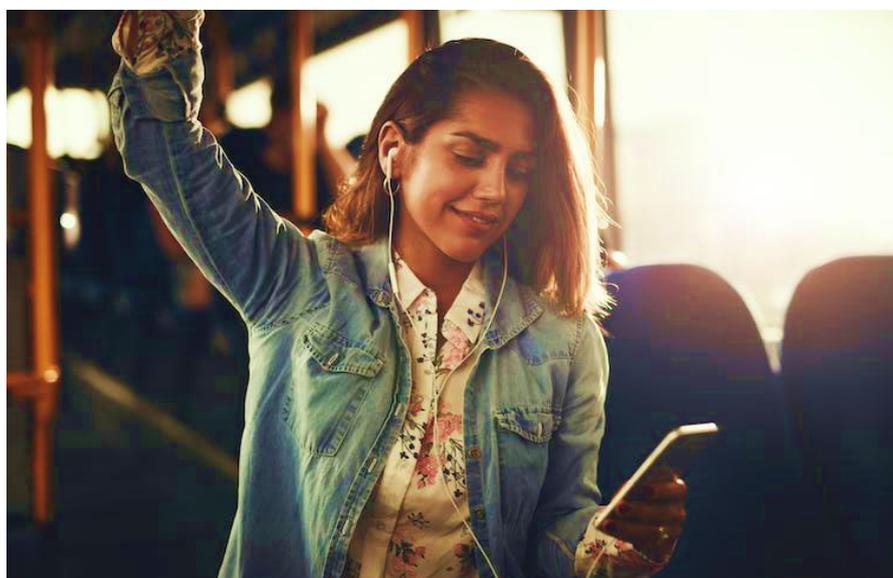
[Research](#) shows hearing loss results from a combination of sound being too loud (and it doesn't need to be painful to cause hearing damage), listening to loud sound too long (and the louder the sound, the less time you can listen before your hearing is at risk) and how often you are exposed (and hearing damage is cumulative over time).

A good “rule of ear” is that if you hear ringing in your ears at or after listening, you are at risk of damaging your hearing. This type of hearing loss is [permanent](#) and may require use of hearing aids or cochlear implants.

Wait, so no loud music at all?

So what can we do, short of throwing away our headphones and avoiding clubbing and live music?

First, just like with the sun and skin, we need to be aware of the risks to our hearing and take the necessary steps to protect ourselves. We need to be aware of how loud sound is around us and how to keep our exposure within safe levels. We can do this by using personal hearing protection in clubs (such as [ear muffs or ear plugs](#) that are fit for purpose), or limiting how often we visit noisy music venues or how long we stay at really loud ones.



Young people might damage their hearing with unsafe listening. [Shutterstock](#)

In Australia, people can access a free [noise risk calculator](#) to calculate their personal risk using an online sound level meter, and to explore how changes in lifestyle could protect their hearing while still allowing them to enjoy music.

Most phones now come with software that can [monitor safe listening levels](#) and limit exposure.

Hearing protection at the venue level is more challenging and may require regulatory and industry-based approaches. Our [2020 research](#) identified hazard controls for entertainment venues, such as alternating volume between louder and softer levels, rotating staff, providing quiet rooms, and raising speaker locations above head height. We also showed DJs and venues were open to initiatives aimed at reducing the risk of hearing loss for their patrons and [staff](#).

Compromises are possible and they could enable enjoyment of music at live-music venues, while still protecting hearing. That way everyone will be able keep enjoying music for longer.

Bringing musicals to Auslan users

By Kat Wong for [The Islander](#)



Auslan interpreter Brendan McQuiggin at the Capitol Theatre in Sydney. (AAP Image/Dean Lewins)

When the Moulin Rouge musical cast finished belting out their act one show-stopper during a recent Sydney performance, a group of viewers closest to the stage didn't clap.

Instead, the audience members stretched up their arms and waved open palms at the actors in a show of Auslan applause.

"10-15 years ago, Deaf people had to seek out the production company and organise and pay for their own interpreters, but now that's changed," interpreter Brendan McQuiggin tells AAP.

Auslan is a form of visual communication used by 16,000 members of the Deaf community nationwide. Want to know more? Read the [Deaf Census snapshot](#).

While it routinely features at leaders' COVID-19 press conferences or natural disaster briefings, many people are less familiar with its use in non-emergency situations.

During the Auslan-interpreted performance of Moulin Rouge! The Musical, Mr McQuiggin and colleague Rosemary Profilio translated multiple characters at once, switching personalities from the sleazy duke to the boyish protagonist. They moved from complementary to synchronised signs as singers shifted between melodies and harmonies.

The Auslan interpreters deferred to the stage during dance numbers, but for the rest of the three-hour performance, they translated the musical's lyrics, dialogue, context and emotions into sign language.

"It's about equivalence. We're not an additional performance to the performance, we're just language experts who are delivering language to an audience that otherwise cannot have access to something they're passionate about."

Hearing tests in dangerously noisy workplaces

Prevention of noise induced hearing loss is a priority for national action under the Australian Work Health and Safety Strategy 2012-2022 due to the severity of consequences and the estimated number of workers affected. Despite this, control measures to successfully reduce noise levels in many industries are failing, insufficient or non-existent.

Occupational hearing loss and deafness is a completely preventable injury. It is a serious injury that has a profound impact on an individual's quality of life.

It can impair a person's ability to detect warning signals on the job and in everyday life, to comprehend speech, and to localise sound sources to gauge the direction or the distance of the sound. Many occupations such as firefighters require these skills. The occupational risk of hearing loss from continued exposure to noise is well established.

Unions NSW, Deafness Forum Australia and the Australian Workers Unions NSW Branch collaborated to highlight the need for active measures to prevent industrial hearing loss and to promote hearing health in the workplace.



The Australian Work Health and Safety Setting

It is important to test a worker's hearing at the commencement of their career (within three months of the worker commencing a role where hearing protection is required), to provide a baseline measurement as a reference for future audiometric test results. Once this is done, early identification of changes to hearing caused by noise is the most effective way of assessing the effectiveness of any control measure in place and in turn preventing hearing loss.

Follow-up testing should occur every two years. Testing should occur well into the work shift so that any temporary hearing loss can be picked up. More frequent audiometric testing may be needed if exposures are equal to or greater than 100dB(A).

The requirement for businesses to regularly test the hearing of workers exposed to high levels of noise has been in the Work Health and Safety Model Legislation since 2011.

The NSW Government initially gave businesses a two year transition period in 2011 to prepare for audiometric testing to be put into place for workers at the commencement of jobs in high-noise environments. Since then, the government has placed a continuous exemption for businesses on this requirement. A decade later, we think it is time the exemption was ended.

You can read our joint submission to the NSW Government [here](#).

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Read Our Lips Australia is a self-paced e-learning platform. Each of the 8 lessons includes a warm up zone, a teaching Lesson, Word Practice, Sentence Practice, and a chance to test your skills.

[Read Our Lips Australia](#) was made possible by funding from the [Department of Social Services](#).

Predicting 9-Year Language Ability from Preschool Speech Recognition in Noise in Children Using Cochlear Implants

The presence of congenital permanent childhood hearing loss has a negative impact on children's development and lives. However, there is a lack of clear evidence for a longitudinal relationship between early speech perception abilities and later language skills.

This study by [Teresa Ching](#), [Linda Cupples](#) and [Vicky Zhang](#) addressed the evidence gap by drawing on data collected as part of the Longitudinal Outcomes of Children with Hearing Impairment (LOCHI) study.

Data from 56 children using cochlear implants were analysed. Researchers found that preschool speech perception in noise was a significant predictor of language ability at school age, after controlling for the effect of early language.

The findings lend support to early intervention that targets the improvement of language skills, but also highlight the need for intervention and technology to enhance young children's auditory capabilities for perceiving speech in noise in early childhood so that outcomes of children with hearing loss in school can be maximised.

WA Parliament is listening



Deafness Forum Australia's board member in Perth, Raelene Walker (at left) is photographed at the Parliamentary Friends of Deaf and Hard of Hearing event at Parliament House.

Rae is with Martin Pritchard and Sophia Moermond from the Upper House of the Parliament of Western Australia.

MED-EL presents *ideas4ears* and calls for child inventors to aim high for people living with hearing loss

MED-EL, a leading provider and inventor of hearing implant systems, launched its annual worldwide search for inventions of the future, [ideas4ears](https://www.ideas4ears.org).

The contest invites children aged 6-12 years old from around the world to create an invention to improve the quality of life for people with hearing loss. Entries can be sent via a video, drawing, or sculpture, but the most important factor is for young people to think big and channel their ideas to support those who cannot hear.

"To all the children out there who have hearing loss and want to find a better solution for themselves, I say never give up inventing, believe in yourself, keep trying, go for your dreams, and as Winston Churchill said never give up, never, never!" Head Judge of the contest is Geoffrey Ball said.

The *ideas4ears* contest celebrates children's creativity and aims to improve understanding of the challenges associated with hearing loss as well as the benefits of treatment.

Parents interested should visit www.ideas4ears.org/enter to submit their child's entry.

Halving the rate of hearing loss of First Nations Children by 2029

The Hearing Australia Action Plan for Improving Ear Health and Hearing Outcomes for Aboriginal and Torres Strait Islander Children outlines how Hearing Australia will work with its partners to halve the rate of hearing loss in Aboriginal and Torres Strait Islander children by 2029.

Across Australia, chronic otitis media (inflammation and infection of the middle ear) is far more frequent and serious in Aboriginal and Torres Strait Islander children compared to non-Indigenous children. In fact, one in three Aboriginal and Torres Strait Islander children experience this disease, making it difficult for them to hear, learn and yarn. Studies show Aboriginal and Torres Strait Islander children experience up to 32 months of conductive hearing loss, compared to just three months among non-Indigenous children.

The Action Plan commits Hearing Australia to building on its current collaboration with organisations, government and communities to improve the systems, services and policies that contribute to better ear health and hearing outcomes. It's aligned to the objectives of the National Agreement on Closing the Gap and demonstrates Hearing Australia's commitment to ensuring Aboriginal and Torres Strait Islander communities are empowered to share decision-making about how services are delivered.



“Implementing this Action Plan is crucial to help reduce the rate of hearing loss in First Nations children,” says Kim Terrell, Hearing Australia’s Managing Director. “It was co-designed with Aboriginal and Torres Strait Islander health care experts and sets out the actions that Hearing Australia will take, in collaboration with its partners, to improve the ear health of First Nations children.

“This will be achieved by supporting national leadership, accelerating access to care, and building workforce capabilities in primary health care services across Australia. We stand together with our partners in a steadfast commitment to dramatically improve the hearing health of First Nations children.”

Earlier hearing aid fittings

The work of Hearing Australia's First Nations Services Unit, established in 2021, is showing positive results in improving ear health and hearing outcome results, but there is more work to be done.

According to research from the Unit, there has been a reduction in the age Aboriginal and Torres Strait Islander children are receiving hearing aids.

Today, one in five First Nations children who need hearing aids receive them before the age of three – a significant improvement from the one in 20 children in 2008.

Wiradjuri woman and Hearing Australia Acting National Manager Stakeholder Relations, First Nations Services Unit, Sherilee McManus, says the specialist Unit is helping to address the hearing gap.

“Many of the children and adults we see have very complex needs, which means they require specialised services. Because of the relationships we've forged with a range of partners, including peak bodies, health and education services and ear health stakeholders, we're able to provide these specific services, to pick up hearing problems sooner and to fast-track treatment and rehabilitation,” she says.



Hearing loss in a child's early developmental years can delay speech and language development, contributing to greater inequality in education, employment, and overall health outcomes. The most recent National Aboriginal and Torres Strait Islander Health Survey found some 30 per cent of Aboriginal and Torres Strait Islander school-aged children had a measured hearing loss in one or both ears.

“Early identification of otitis media and referral to specialist treatment and support services is crucial for preventing long term speech, language, social and emotional impacts of hearing loss,” says Hearing Australia First Nations Services Clinical Leader, Clare Manhood.

Samantha Smith, mother of six-year-old Maisie, says that the help provided to her daughter through Hearing Australia has made a significant difference to her development.

“Maisie's preschool and I noticed that she had a speech delay and that she wasn't really listening. I had to raise my voice when speaking to her and she looked more for facial cues and would constantly want the TV volume up too loud.

“We got her hearing checked through Hearing Australia which confirmed she had a hearing loss. A subsequent hearing check confirmed that it was continuing to decline and she was fitted with a hearing device.

“The hearing device has been a godsend for Maisie. She wears it every day and it has made a noticeable difference to her hearing in all situations, and it has really helped with her development.

“The entire process with Hearing Australia has been very positive. Maisie and I have been made to feel so comfortable right from the beginning and the staff are so friendly and efficient.”



In the 2021-22 financial year, Hearing Australia supported some 23,000 Aboriginal and Torres Strait Islander peoples with their hearing needs. Around half were young children assessed under the government-funded Hearing Assessment Program – Early Ears (HAPEE), with around 1 in 4 requiring referral to specialist services.

The Action Plan also builds on the success of a suite of existing programs for eligible Aboriginal and Torres Strait Islander peoples, which are fully subsidised by the Australian Government. They include:

- hearing services and devices, provided through the Community Service Obligations component of the Hearing Services Program
- free* hearing checks for young children aged 0-6 not yet attending full time school as well as upskilling and supporting local services to identify ear and hearing problems and refer to specialist services, provided through the HAPEE (Hearing Assessment – Early Ears) and Listen to Learn programs.

Hearing Australia, celebrating its 75th anniversary this year, has a long and proud history of working with Aboriginal and Torres Strait Islander peoples.

“From our first visiting audiology service in the Northern Territory in 1954, we now regularly visit over 220 communities and partner with more than 100 Aboriginal community-controlled health organisations to deliver hearing services,” adds Kim.

To view Hearing Australia’s Action Plan to improve the ear health and hearing outcomes for Aboriginal and Torres Strait Islander children [head to this link](#).

Shepherd Centre announces

Dr Jim Hungerford will complete his role in January as [The Shepherd Centre](#)'s chief executive.

Since his appointment as CEO in 2011, Dr Hungerford has built The Shepard Centre into the leading specialist service provider in NSW, ACT & Tasmania, ranked in the world's top 5 percent.

"On behalf of the Board, I would like to acknowledge the tremendous contribution over the past 12 years of Dr Jim Hungerford as outgoing CEO of The Shepherd Centre," said board chair Susan Turner-Kapsanis.

I would like to thank Jim for his enormous contribution to the organisation, and his advocacy for the sector more broadly."



"I've been privileged to lead what I regard as the best charity in Australia, with an amazing group of people who are passionate about transforming children's lives," Jim Hungerford said.

"We are leaders in the sector across every part of our business, whether that be our engagement with donors and supporters; the quality of our management and systems; our early education work; and across the breadth of our clinical and professional activities," said Dr Hungerford.

Dr Aleisha Davis, The Shepherd Centre's current Chief Clinical Officer, takes on the role as CEO in January next year.

"I've been part of this amazing organisation for nearly 20 years and have seen first-hand the profound difference it has made to thousands of children's' lives. I look forward to continuing this work in my role as CEO and shaping the future of this life-changing organisation", Dr Davis said.

World premiere screening celebrates International Day of People with Disability



Image from a video artwork "Places I Go" by Dani Pearce. Photo by Jeremy Rouse.

ArtScreen is a prestigious program supporting artists with disability or who are d/Deaf to develop their creativity and careers through producing new video artworks. ArtScreen aims to broaden engagement with, and appreciation of, the distinctive insights and skills of artists with disability.

"These compelling works make an important contribution to the diversity of cultural expression in Sydney," says Accessible Arts CEO Liz Martin. "Previous ArtScreen work has gone on to be further developed and selected for the Cannes Short Film Festival Independent Film category. We are extremely proud of this program and the opportunities it has created for the artists selected, as well as the audiences who are able to view and engage with the video artworks being created."

"In celebration of International Day of People with Disability and in acknowledgment of the work by artists with disability, the Museum of Contemporary Art Australia is delighted to present ArtScreen 2022, our partnership initiative with Accessible Arts.

We feel honoured to be able to premiere the works of these talented artmakers at the Museum," says Suzanne Cotter, MCA Director.

Artists Dani Pearce and Demon Derrière were selected for the 2022 ArtScreen program. Their artworks will be screened on 3 and 4 December in celebration of International Day of People with Disability. The artworks will be screened on a loop and will feature Auslan interpreted, captioned and audio described versions. There will also be a Q&A Panel with the Artists on Saturday 3 December MC'd by previous ArtScreen artist, Debra Keenahan.

<https://aarts.net.au/news/artscreen-2022-world-premiere-screening-at-mca/>



New Research

- [Early auditory intervention in children with hearing loss and neurodevelopmental outcomes: cognitive, motor and language development](#)
- [Efficacy of steroid treatment for sudden hearing loss in patients with vestibular schwannoma](#)
- [Effects of Captioning Errors Noise and Hearing Loss on Memory for Text-Captioned Speech](#)
- [Effects of reverberation on speech intelligibility in noise for hearing-impaired listeners](#)
- [Hearing aid utilisation in Ontario - a population-based study](#)
- [Hearing impairment and tinnitus among older construction workers](#)
- [Hearing loss, sick leave, and disability pension in Norway: Findings from HUNT follow-up study](#)
- [Hearing loss: The final frontier of pharmacology](#)
- [Hispanic/Latino Perspectives on Hearing Loss and Hearing Healthcare](#)
- [Obstructive sleep apnea risk and hearing impairment among occupational noise-exposed male workers](#)
- [Speech in Noise: Implications of Age, Hearing Loss and Cognition](#)
- [Worsening hearing associated with key markers of Alzheimer's disease in age-related hearing loss](#)
- [Robotics and cochlear implant surgery: goals and developments](#)

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Deafness Forum's Annual General Meeting

The Annual General Meeting of the members of Deafness Forum Australia will be held online on Wednesday 30 November 2022 at 3pm AEDT, 2.30pm ACDT, 12pm AWST.

At the meeting, members will have the opportunity to find out and ask questions about Deafness Forum's operations and finances, and speak about any items on the agenda.

Members will be asked to vote to accept the minutes of the last annual general meeting; to accept the annual report, auditor's report and annual financial statements; to appoint and pay an auditor; and to confirm appointments of directors.

If you won't be able to attend, please exercise your right as a member to vote by using this [Proxy Appointment form](#).

The agenda for this meeting and the associated reports are posted here on our [website](#).

Wherever you are in Australia, you can attend via Zoom. All you need is a phone, laptop, tablet or computer. But you will need to register by going [here](#).

We hope that you will join us and we look forward to welcoming you.



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

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

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