Sounding Board

Working with hearing impairment in Australia: Policies and their impact

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1. Introduction

Australia is a highly developed country in the Southern Hemisphere. The 6th largest country by total land mass, included amongst its areas of natural beauty are the Great Barrier Reef, alpine heaths and tropical rainforests. A multi-cultural, egalitarian society that prides itself on giving one and all 'a fair go', Australia ranks highly in many international comparisons of performance, including quality of life, health, education, protection of civil liberties and political rights.

A federation of governments, Australia is a member of the United Nations and a signatory to the 'United Nations Human Rights Convention on the Rights of Persons with Disabilities'. With its National Disability Strategy, the Australian Government has articulated that it is committed to improving the lives of people with disability, their families and carers; and providing the necessary leadership for a community-wide shift in attitudes [1]. At the present time, a people's campaign is sweeping Australia, demanding the introduction of a no fault person centred social model of disability reform. The National Disability Insurance Scheme (NDIS), if adopted, will provide a national response to disability, ensuring access to essential disability equipment without relying on the financial support of family or friends.

The Disability Services Act [2] has identified that 'people with disability' includes those with sensory impairment. Australia supports in excess of 22 mil-

lion people [3] with one is six Australians experiencing hearing loss. By 2050, the prevalence of hearing loss is expected to increase to one in four [4].

If the Australian Government is judged by the legislation that is introduced, upheld and enforced, it could be said to be mindful of its obligations to ensure people with disability are included in all facets of life. What this Sounding Board article explores is whether or not the legislation, services and supports that exist, extend to supporting people with hearing impairment in their right to equal access to employment. Further, I will argue that hearing impairment, hearing disorders and their impacts are not well understood by policy makers and as a result, their focus on the distribution of hearing aids is misdirected and often times ineffective. If people with hearing impairment are to be allowed the opportunity to fully participate in society then a holistic response to hearing impairment must be developed.

Mindful of the social model of disability [5], it is acknowledged that each of us is a person first and the people being discussed happen to have a characteristic in common, hearing impairment. In this article, at this time and in this culture, terminology is used in the following way: for those who view Deafness as a culturally and linguistically diverse experience and prefer the capital 'D', your preferences when describing those who communicate primarily via Australian sign language (Auslan) are acknowledged. For those who have a pre-lingual hearing impairment, since nothing has been lost, the term 'hearing loss' is understood to

be inappropriate. For those who prefer the term 'hard of hearing', while your right to use that terminology is accepted, I choose not to use that term – for me, that language harkens back to a time when my grandmother, with ineffective aids attempted to manage her sudden onset hearing impairment with little success. All that is asked is that you respect my right to describe hearing impairment as it appears appropriate to me. Where I have quoted directly from a source, I have been faithful to the terminology the author has chosen to use.

2. The impacts of hearing impairment in the workplace

In Australia, people with hearing impairment are 6.8% less likely to be in paid employment than those without hearing impairment [4]. Moreover, people with hearing problems are more likely to retire earlier from the workforce and have reduced working hours (part-time rather than full-time employment). The South Australian Health Omnibus Study reports that people with hearing impairment are 25% less likely to be earning high incomes than people without hearing impairment [6]. These figures suggest that research needs to be undertaken to identify the barriers experienced by people with hearing impairment in obtaining and retaining employment and to explore why few people with hearing impairment manage to secure employment in the high income brackets. At the present time, with a skills shortage in Australia it would be of great benefit to the nation to increase the supply of skilled workers from the underutilised group of people with hearing impairment.

The Disability Discrimination Act (DDA) [7], provides a legal framework that addresses the physical and attitudinal barriers that prevent people with disability in Australia from fully participating in the community. Part of the DDA specifically addresses the issue of discrimination in employment. In an email from S. Leang in June 2012 [8], on behalf of the Disability Discrimination Commissioner, the Disability Rights Team acknowledged limited research into the general public's awareness or acceptance of the legislation. If we assume there is little general public awareness of the requirements under the DDA [7] it would not be surprising that in 2010–11, 31% of all complaints [9] received under the DDA [7] related to employment.

The Attorney General's department has the ability to set standards relevant to the DDA [7] and provide additional detail and clarity on the specific rights and responsibilities as required by the legislation. Such disability standards have been developed for education; premises; and accessible transport. Similar standards have not been introduced for employment as discussions between industry representatives made it clear that there was no consensus on what should be included in any proposed employment standard [10].

3. Hearing services

In 1974 the Australian Government instituted an authority to provide a universal public funded health care system. The authority originally named Medibank and later changed to Medicare is currently funded through an income tax surcharge on all citizens and residents of Australia. The program looks after the health of its residents by providing affordable and accessible treatments from doctors, specialists, allied health professionals and free treatment and accommodation as a public patient in a public hospital.

Medicare requires the registration of health professionals and provides a schedule of benefits that dictates which health services are free to Australian citizens. One of the mysteries of the Australian public funded health care system is why audiologists were until recently excluded while other sensory health professionals, such as optometrists, have long been included. Recent changes to the scheme have made it possible for audiologists to have limited access to Medicare funding where patients are referred by a general practitioner. The result? People with hearing impairment, aged between 26 and 65 who are not in receipt of a government pension card are required to fully fund the purchase of hearing aids, repair and maintenance costs and fully fund any aural rehabilitation services. I would argue that this system with its financial burdens creates a disincentive for people with hearing impairment to participate in the workforce.

When one speaks of hearing services in Australia, it is not possible to overlook the significant influence that the government supplier 'Australian Hearing' has on the sector. The organisation has a very specific mandate, i.e. to provide hearing services to children and young adults less than 26 years of age, Aboriginal and Torres Strait Islander people aged over 50 years or who are participating in the Community Development Employment Project Program, people with Veterans Affairs cards and aged pensioners including those with complex communication needs. As the largest single

employer of Audiologists, 'Australian Hearing' develops the expertise of its staff in the areas of its focus. The organisation not only provides services including hearing assessment, the selection and fitting of hearing devices and aural rehabilitation including training to improve listening and communication skills to this cohort but also invests significant monies into research focused on the needs of the specific group. Of course, the flip side of that situation is that little money has been invested into research outside the boundaries of the government service provider and as a result there is a paucity of information that has been gathered on the needs of the working age population.

By all reports, 'Australian Hearing' is well regarded [11] and has a respected reputation as an innovative and world leading provider of hearing services. The high level visibility and presence of such an organisation means that most would believe that people with hearing impairment are supported by Australian Hearing and have access to all the services and supports they could require. The reality is, for those of working age, who are not eligible for Australian Hearing services, there is a competitive sales based market that purports to meet the need.

In 1997, legislation was passed that changed the landscape in Australia, placing the government owned Australian Hearing in direct competition with over 200 commercial service providers. An Office of Hearing Services was instituted to develop government policy, fund and monitor a community service obligations program and ultimately to provide payment for the delivery of hearing services to eligible clients. Once an individual was deemed to meet the eligibility criterion which includes where a person is currently accessing a government pension concession, is in receipt of sickness benefits, a member of the Australian Defence Forces and/or participant in a Disability Employment Service they are able to access a Hearing Services voucher. With voucher in hand, the person is then free to attend any of the available service providers to redeem their vouchers and access to specific and limited services including hearing assessments, the cost of hearing devices and their fitting. For the individual, this voucher system allows them choice of service provider. What this voucher system does not do, is provide the opportunity to access a wide range of solutions to hearing impairment that may or may not include the provision of hearing aids.

Hearing impairment is not just about the inaudibility of sound. Depending on the nature of hearing impairment, abnormal sensitivity to loudness, distortion

of sound and temporal discrimination are all common experiences of hearing impairment. It would appear a little known fact amongst policy makers that conductive, sensorineural and central hearing impairment all require different responses in dealing with the specific issues experienced. Advocacy organisations, hearing professionals and the deafness sector more generally surely have a significant responsibility to increase the community's knowledge and understanding of hearing impairment and the challenges that can be experienced. Promotion and support for the wide range of technologies and access to qualified professionals that are able to provide assistance to the individual with hearing impairment is required.

Further, Tye-Murray [12] has discussed the issue of a sales based model of audiology, taking the position that such a model is inconsistent with the holistic types of services required in the rehabilitation of people with hearing loss. In the current climate in Australia, it could be argued that the focus of audiologists is on the lucrative provision of aids rather than the rehabilitation of people with hearing impairment. Upfold [13] states that '.... It is also widely argued among audiologists in private practice that their private clients are expected to pay more than appropriate for hearing aid services to compensate for the low rates paid by government, forcing additional commercial decisions to be made.'

In the absence of commercial services, the delivery of aural rehabilitation then is most often left to wellmeaning individuals and organisations that would be best described as self-help entities. The services available, such as speech reading workshops and communication strategy seminars are heavily reliant on discussions of personal experience rather than evidence based information supported by a professional presentation. The target market for those existing services are most often elderly people with acquired hearing impairment with vastly different needs from people with pre-lingual or sudden onset hearing impairment. The age and experiences of the presenters and most attendees excludes any meaningful discussions of the current experiences of people with hearing impairment in the communication intense workplace environment.

As members of the heterogeneous community, people with hearing impairment who engage in oral communication become invisible to policy makers, service providers and health professionals, left to deal with communication challenges that arise as best they can. With few, if any, professional sources of information and without social connections with others in the co-

hort, there are limited opportunities to learn from professionals or from one another. In the first instance, a professional information hub could be developed, delivering current and informed knowledge to those who request that. The information should be delivered in a variety of communication methods and languages to encompass as many people as possible across the deafness sector. In addition, a review of the financial reimbursement available to professionals is required, any changes that allow for the reimbursement of time and expenses while engaging in aural rehabilitation and other interdisciplinary problem solving communications, would be welcomed.

4. Workforce support services

The Australian government continues to work towards a society where equality in the workplace in the experience of all people with disability. Previously known as the Commonwealth Rehabilitation Service, CRS Australia is the Australian government provider servicing people with disability and providing employment services that assist people to secure and retain employment. In addition CRS Australia provides a range of services including professional vocational rehabilitation in the workplace. The service provides generalised knowledge but does not strive to retain therapists with skills in particular disabilities. As a result of this generalisation, the assistance a person with any particular disability receives is equivalent to the therapists' knowledge or exposure to that disability. In the case of people with hearing impairment, CRS Australia therapists without specific knowledge of the advanced hearing technologies or qualified professionals who may be able to assist can join the chorus of people who choose to ignore the stigma experienced by many people with hearing impairment, an issue which needs to be both acknowledged and addressed in the Australian community.

The Employment Assistance Fund (EAF) provides assistance to employers of people with disability by reimbursing employers for the costs involved in work related modifications [14]. Again, therapists with generalised knowledge are available but those persons rarely have specific knowledge of hearing impairment. In 2011 revisions, the Australian government has chosen to specify that equipment provided must be required for exclusive use in the workplace and as a consequence have excluded cochlear implants and hearing aids [15]. So while assistive listening devices such as

hearing loops, modified telephones and flashing lights can be provided through the EAF, hearing aids or the first level of assistive equipment required is denied. The person with hearing impairment is by law, provided equal access to the workplace. In practice, as long as they are able to fund their own 'medical' assistive equipment that equality is available. The government policy and service that elsewhere promotes hearing aids and relies on them to provide all the required assistance to the person with hearing impairment, fails dramatically to deliver the promoted product or solution when it is a person in the workplace who requires assistance.

As the name implies, the EAF is available to a person with disability who is engaged in meaningful employment. For the person with hearing impairment, who experiences reduced opportunities for employment, voluntary work is one way in which the person may attempt to maintain social links and contribute to the broader society. The EAF is not able to provide the necessary assistance for workplace modifications in a voluntary arrangement and therefore the person with disability is often excluded from an activity available to others.

My questions for policy makers, employers and the general community then are: do you believe in work-place equality and all that entails? Do you believe that people with hearing impairment, like people with other disability have a right to social inclusion? If you responded to those questions with a "yes" as I hope you will, then I follow those questions with a challenge to you: are you doing everything you can to ensure people with hearing impairment are included in the workplace and in social activities? And I ask you to consider, what more can you do to ensure workplace events and activities are accessible to the people with hearing impairment in your community?

CRS Australia and the EAF lack specific expertise in hearing impairment. At the same time, audiologists are not provided access to financial reimbursement for offering aural rehabilitation services to people of working age with hearing impairment. This combination results in people with hearing impairment being unable to access the expertise or services that would provide them with the necessary support to further their career choices and continued employment.

Given all of the injustices as outlined above, I strongly advocate for the engagement of specific disability knowledge based professionals in both CRS Australia and the EAF. An equally valid alternative option to the complex social problems experienced by

hearing and associated communication needs includes the utilisation of inter professional teams within these organisations. In the case of working with people with hearing impairment, that may include a team of audiologists, speech pathologists, counsellors and rehabilitation specialists. Training programs should also be offered that cover the significant issues for all degrees of hearing impairment, not limited to those experienced by Deaf people who communicate through Auslan (Australian Sign Language). Without specific knowledge and information of hearing impairment, the therapists are constricted in their ability to provide quality information or advice and people with hearing impairment are left to find their own solutions to communication challenges in the workplace.

Other opportunities may also provide support for workplaces for instance, by addressing the issue of the provision of equal telecommunications access to people with hearing impairment. In research conducted by Tye-Murray, Spry and Mauze [16], interactions via telephone communication was the most commonly cited problematic communication for individuals with hearing impairment in the workplace. The Australian Government initiative, the National Relay Service by providing a text based service goes some way to providing equal telecommunications access to people with hearing impairment. What the National Relay Service does not do for people with hearing impairment who find themselves gainfully employed in the workforce, is provide any type of equitable access when teleconference requirements arise. The reality of workplaces in Australia is that the vast majority of places of business rely on digital telephone systems. For those individuals using analogue handsets with amplification capabilities, teletypewriters, or even the analogue captioned telephones currently being trialled in Australia, none provide assistance to the employee in a digital and modern workplace environment. Understanding the needs of people with hearing impairment in the workplace is important to the development of solutions and approaches that meet the needs of those users.

5. Discussion

Full participation in Australian society continues to be an elusive goal for many people with hearing impairment, despite extensive government efforts to remove barriers by providing early intervention rehabilitation and support services. The intent of this overview is to raise awareness of the barriers faced by people with hearing impairment who are engaged in the workforce.

In working through this article, what becomes clear is that there are a number of ways that policy makers, health professionals, employers and employees can improve on their responsibility to provide opportunities for equality in workforce participation. Amongst the ideas suggested are the development of a holistic response to hearing impairment; increased awareness of the DDA [7]; Medicare rebates to cover the delivery of aural rehabilitation services; increased investment in research of the issues impacting people with hearing impairment in the workforce; the provision of knowledgeable professionals and/or the utilisation of interdisciplinary teams in CRS Australia and the EAF and; training for professionals in all areas of deafness. Finally, the inclusion of people with hearing impairment in policy development is critical to the best possible outcomes and will ensure focus on areas beyond the distribution of hearing aids.

In considering the challenges faced by people with hearing impairment in the workplace in Australia, it is necessary to consider the value of hearing support services beyond those groups neatly defined by government policy or medical intervention. Cross-discipline knowledge is necessary, whether it be general information on legal rights and workplace modification schemes, counselling or assertiveness skills. We must present a holistic response to the person with hearing impairment and consider the knowledge and support they need to actively participate in the workplace and take their rightful place as valued members of society.

6. Author information

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Michele lives with a hearing impairment and is passionate about the range and quality of services delivered to the deafness sector.

References

- Council of Australian Governments. 2010-2020 National Disability Strategy. In: Attorney-General, editor. Canberra: Commonwealth of Australia, 2011, p. 73.
- [2] Disability Services Act 1986, Act 129 of 1986, 1986.

- [3] Australian Bureau of Statistics. Population Clock. Canberra: Australian Bureau of Statistics; 2012 [cited 2012 10 June 2012]; Available from: http://www.abs.gov.au/ausstats/abs% 40.nsf/94713ad445ff1425ca25682000192af2/1647509ef7e25 faaca2568a900154b63?OpenDocument.
- [4] Access Economics. Listen Hear! The economic impact and cost of hearing loss in Australia. Canberra: Access Economics Pty Ltd 2006.
- [5] Oliver M. Understanding disability from theory to practice. USA: Palgrave Macmillan, 2009.
- [6] Wilson DH. Hearing in South Australia: Disability, impairment and quality-of-life. Adelaide: University of Adelaide, 1997.
- [7] Disability Discrimination Act, 1992.
- [8] Leang S. DDA Awareness Research. In: Nealon M, editor. Sydney: Disability Rights Team, 2012.
- [9] Australian Human Rights Commission. Annual Report 2010-2011. Sydney: Australian Human Rights Commission 2011.
- [10] Australian Human Rights Commission. Disability Standards and Guidelines. Sydney: Australian Human Rights Commission; 2012 [cited 2012 11 June]; Available from: http://

- $www.human rights.gov.au/disability_rights/standards/standards.html.$
- [11] Community Affairs Reference Committee. Hear Us: Inquiry into Hearing Health in Australia. Canberra: Senate Committee Report 2010.
- [12] Tye-Murray N. Foundations of aural rehabilitation: children, adults and their family members. 3rd ed. USA: Delmar Cengage Learning, 2009.
- [13] Upfold L. A History of Australian Audiology. Sydney: Phonak Pty Ltd Australia, 2008.
- [14] Australian Government. Employment Assistance Fund. Canberra: Australian Government; 2011 [cited 2012 10 June, 2012]; Available from: http://jobaccess.gov.au/Services/A-Z_list/Pages/EmploymentAssistanceFund.aspx.
- [15] Australian Government. Employment Assistance Fund Guidelines. In: Department of Education EaWR, editor. Subiaco, Western Australia: Australian Government, 2011, p. 26.
- [16] Tye-Murray N, Spry JL, Mauze E. Professionals with hearing loss: Maintaining that competitive edge. Ear and Hearing. 2009; 30(4): 475–84.