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ELDER CARE

A Resource for Interprofessional Providers

Communicating with People Who Have Hearing Loss

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Age-related hearing impairment, also known as presbycusis, affects some 30% of adults aged 65-74 and almost half of those over 75. The hallmark of age-related hearing loss is that speech is not clear. An on-line simulator that shows what hearing is like for a person with hearing loss (PHL) is available on the website of the Better Hearing Institute (see resources list on next page).

Hearing loss impairs ease of communication, not only for the person with hearing loss (PHL), but also for individuals communicating with the PHL. Frustration and even anger may result as communication breaks down. As frustration levels heighten, social activities become more challenging, and the PHL may withdraw or become more isolated because communication is too difficult.

Many of the difficulties involved in communicating with a PHL can be resolved by understanding some key facts about age-related hearing loss, and by following simple communication rules. The goals when speaking with a PHL should always be to (a) increase the likelihood of good communication and (b) decrease the negative emotional responses that occur when communication breaks down.

Key Facts About Hearing Loss

Fact: Age-related hearing loss is typically sensorineural, involving structures in the inner ear or cochlea and/or the auditory pathways to and in the brain. The results are that sound is not loud enough but more importantly, speech is not clear. The person with hearing loss may say, "I can hear you but not understand you." Speaking louder does not necessarily increase clarity and in some cases, may cause further deterioration in understanding of speech.

Fact: The speed of processing speech information slows down. The PHL may always be "catching up," trying to get meaning from a conversation after missing a few key words or phrases. After losing the thread of a conversation, the PHL may try to compensate by bluffing. This allows the PHL

to stay physically present in a conversation, but not be an active participant, which is a dysfunctional avoidance strategy, not a coping strategy.

Fact: Hearing aids will help, but cannot completely solve all hearing-related issues. Even with well-fitting, high-quality hearing aids, most PHLs will experience difficulty understanding speech - especially in poor listening conditions such as background noise.



Image from NIH News in Health, October 2008

Improving Your Communication

Several important behaviors can make a big difference in the success of your communication with a PHL. A few of these behaviors are discussed here, and still others are listed in the table on the next page.

Attention First: Start the conversation by getting the PHL's attention and let them know you are talking to them. Be clear about the topic of conversation, and then speak slowly and directly to the PHL. Tactile or visual cues (e.g., a tap on the shoulder or pointing to something) will assist PHLs to focus on you and better understand what you will say.

Speak Slowly: Slowing down your speech rate helps in two ways. First, it naturally enhances the clarity of what you are saying. Second, it allows the PHL more time to process what has been said, to infer meaning, and to fill in the gaps of what has been heard.

Rephrase: If a communication breakdown occurs and the listener says, "huh," "what," or "I didn't get it," repeat your message once more slowly, then rephrase

TIPS FOR COMMUNICATING WITH OLDER ADULTS WHO HAVE HEARING IMPAIRMENT

- Be sure that the individual with hearing loss has undergone a comprehensive audiological evaluation.
- Before speaking to a person with hearing loss, get the person's attention first.
- Speak slower than usual. When speaking to someone with a hearing aid, it is not necessary to speak louder.
- If the person with hearing loss doesn't understand what you are saying, don't repeat the same thing over and over. Instead, try rephrasing with different words or a different word order.
- Get feedback from the person with hearing loss, to be sure they understood what you have said.

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using different words or a different word order. More than one repetition in exactly the same way will not repair a communication breakdown, and it can lead to frustration for both parties. An example of good rephrasing is shown in the box at right. Note in the example that not only has the communication partner given the PHL a clue, but the words have been changed around and information provided in a different way.

Be Careful about Consonants: Poorer hearing in the high frequencies means that certain consonants (such as, “f,” “s,” “t,” “p”) are not heard well, even with good amplification. Thus, words such as “fan,” “sand,” “tan,” and “pan” may all sound the same. Knowing the topic, having context, and seeing the lips will help the PHL be less confused.

Get Feedback: Encourage PHLs to state what they heard and understood. Specific responses and explanation are preferred to simple statements like “I understand”.

Relax: Remember that the goal is communication, not negative emotions. Even if getting a message across requires spelling out words or writing them down, the goal has been met.

Final Comments

Good communication involves the speaker, the listener, and the environment. In ideal communications, all three

Don't Repeat — Rephrase

Example of Repeating:

Caregiver: I'm going to the store, do you need anything?

PHL: What?

Caregiver: I'm going to the store, do you need anything?

PHL: I still didn't get it.

Example of Rephrasing:

Caregiver: Mary (touching PHL on the shoulder and facing her), I'm going shopping.

PHL: I need milk.

Caregiver: OK.

components are optimized, with both the speaker and the listener sharing responsibility for effective communication.

For older adults with hearing loss, it may be up to a caregiver to assume a greater responsibility for assuring that all three elements are optimized. Even though it may be frustrating at times, the effort is worth it.

Of course, part of communicating well is optimal hearing, so assure that a comprehensive audiological evaluation has been done. It is also essential that hearing aids or other devices have been selected appropriately, fitted properly, are in good working order, and that all persons understand the benefits and limitations of what hearing aids can and cannot do. Hearing aids are discussed in another issue of Elder Care.

Other Recommendations for Improving Communication with Individuals Who Have Hearing Impairment

What to Do	How to Do It
State the topic	Tell the person the topic of the conversation and be clear when you have switched the topic.
Face the person	Be at the same level, facing the person, to provide more visual cues. Don't cover your mouth or chew gum. Speech reading will happen automatically.
Find a quiet place	Move to a quiet location if you can, or reduce the noise as much as possible.
Find a well-lit place	Lighting should shine on your face and not in the eyes of the person needing to see and hear you.
Use paper and pen	If you are unsuccessful with spoken communication, write the information.

References and Resources

American Speech, Language, and Hearing Association. <http://www.asha.org/public/hearing/>

Better Hearing Institute. <http://www.betterhearing.org/>

Hearing Health Foundation. <http://hearinghealthfoundation.org/>

Hearing Loss Association of America. Organization by and for persons with hearing loss. <http://www.hearingloss.org/>

Hearing Loss Simulator. http://www.betterhearing.org/hearing_loss/hearing_loss_simulator/index.cfm

University of Arizona, Department of Speech, Language, and Hearing Sciences Programs. <http://lwhl.arizona.edu/>

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