Dual sensory impairment (DSI): a practice and policy challenge for aged care

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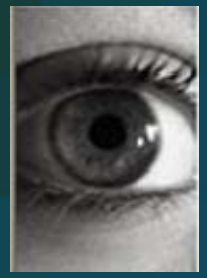
Causes & Prevalence of DSI

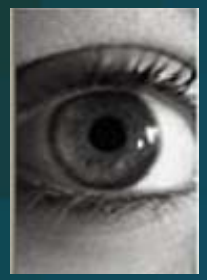


- By 2050 over 1.1 million people (3.7%) are expected to have DSI
- Prevalence of DSI is between 6-13%
- DSI is often unrecognized and under-reported
- Common hearing disorders: presbycusis, noise induced hearing loss & otosclerosis.
- Common vision disorders: cataract, AMD, glaucoma & diabetic retinopathy

Impacts of DSI

- Vision loss appears to dominate the negative impact of DSI
- Communication problems and isolation from social activities
- Depressive symptoms are more frequent in older persons with DSI than in those with vision or hearing loss alone
- Cognitive impairment
- Decreased health & quality of life

Current challenges for DSI

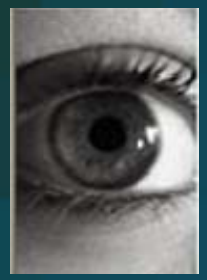


1. **Low use of rehabilitation services**

2. **Poor efficiency in provision of services to older persons with DSI**

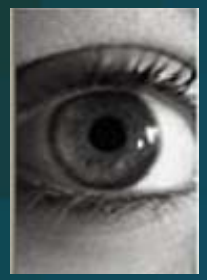
3. **Poor recognition of sensory impairment in health policy**

Low use of rehabilitation services



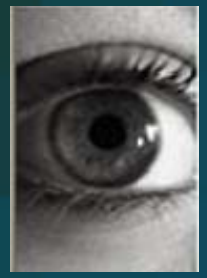
- Australian & international data show high levels of unmet need for hearing services and poor use of hearing aids
- Those who experience hearing loss after onset of visual impairment are less likely to see a hearing specialist
- Trends of low use of vision rehab services reported, with many visually impaired older people unaware of services

Poor efficiency in provision of services



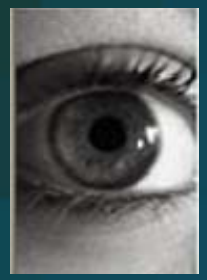
- Services for people with sensory impairment are delivered across multiple care system
- Vision and hearing specialists are trained and employed to concentrate upon their own specialised area
- Comprehensive holistic assessment and rehabilitation involving a multidisciplinary approach is required

Poor recognition in health policy



- Unifying sensory loss rehabilitation services requires commitment from several organisations
- Sensory impairment has received little attention in either Australian state or federal health policy
- Sensory impairment needs to be more broadly embraced as a National Health Priority Area, alongside arthritis, asthma, cancer, CVD health

Possible ways forward in DSI

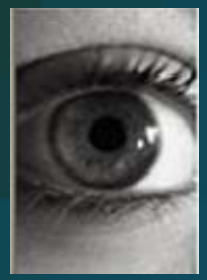


1. **Raising awareness among the older population**

2. **Capacity building among professionals**

3. **Improving access to care systems and assistive technologies**

Raising awareness

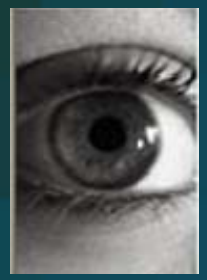


- Importance of eye & hearing checks needs to be promoted among the older population
- Early & systematic detection of DSI could be pursued through better integrating:

  (i) eye & hearing health education with other health promotion activities;

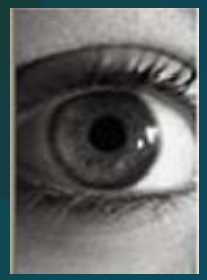
  (ii) incorporating eye & hearing checks into mainstream primary healthcare services for case-finding, referral & follow-up.

Capacity building



- Specialist health professionals working in separate hearing or vision rehabilitation fields require skills to detect and treat DSI
- Health professionals in general practice or aged care, dealing with older people require education on the characteristics of single & DSI
- Better support & motivate those affected to access appropriate services

Improving access



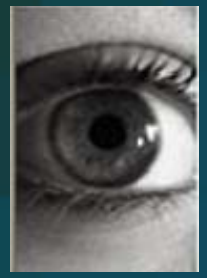
- Government policies are required that encourage more widespread use of assistive listening devices and aids. This requires:

  (i) identifying people in need & providing rehab & training

  (ii) considering the cost-benefit of providing greater subsidies for aids

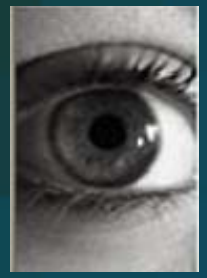
  (iii) developing government-funded research into rehabilitative technology

Conclusion



- DSI remains an under-recognized challenge both in terms of aged care health service provision and policy
- Increased awareness of & case-finding for DSI among older persons
- Capacity building among both the generic & specialist health workforces
- Greater support for use of assistive technologies & better integration of complex & currently separate care systems.

Acknowledgements



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