The perceptions of socially active elderly about disadvantages caused by hearing loss

Percepção de idosos socialmente ativos quanto às desvantagens causadas pela dificuldade auditiva

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ABSTRACT

Objective: To determine how socially active elderly who complain of auditory difficulty perceive the disadvantages associated with their auditory condition. Methods: A total of 59 socially active elderly were questioned about hearing difficulties. In 2005, they participated in “Acampavida”, an event organized by Universidade Federal de Santa Maria, to provide senior citizens the opportunity to participate in workshops and lectures, and to socialize. We selected those, who answered that had had some hearing difficulty. They were invited to identify the disadvantages caused by hearing loss and answered the Portuguese version of “The hearing handicap inventory for the elderly – screening version”, comprising ten questions (possible answers: “yes”, “no” and “sometimes”). Results: From 59 elderly people interviewed, 32 reported hearing difficulty. Six were male and 26 were female. The age range was 60-88 years. The question that led to more (75%) positive answers (“yes”) was: “Does a hearing problem cause you difficulty when talking in noisy environments?” The “no” answer, predominated in the questions “Do you feel that any difficulty with your hearing limits or hampers your personal or social life?” (84.4%) and “Does a hearing problem cause you to attend religious services less often than you would like?” (90%). The option “sometimes” was answered in less than 26% of cases. Conclusions: Although the elderly studied reported some hearing difficulty, they felt such problem did not prevent them from going to church and it did not restrict or interfere in their individual and social lives. Communication in noisy environments was the disadvantage more often reported.

Keywords: Auditory perception; Deafness; Aged

INTRODUCTION

Aging is a progressive and degenerative process that occurs in all species, and is characterized by reduced functional efficiency and weaker defense mechanisms. Many are the variables associated with this process, such as the environment, exposure to toxic products,


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accidental physical injuries, nutrition and genetic programming(1-2).

The physiological hearing loss that stems from aging is called presbycusis(3-6), characterized by slowly progressive, symmetrical and bilateral hearing loss, which starts around the third or forth decades of life(2). Presbycusis alters the entire auditory system, and the higher frequencies are the most affected, impairing speech understanding(7).

It is known that hearing loss brings about communication difficulties at any age; however, in the elderly, it becomes one more factor associated with social seclusion(7).

This study is justified by knowledge to be acquired regarding hearing complaints from socially active elderly, in order to better educate this population regarding the need for periodic hearing assessment and, if necessary, to use a hearing aid to better socialize and enjoy their activities.

OBJECTIVE

To investigate the disadvantages reported by socially active elderly regarding their hearing difficulty.

METHODS

Data was collected during three consecutive days at the 7th Acampavida, an annual event held by the Centro de Educação Física e Desportos da Universidade Federal de Santa Maria (CEFED-UFSM) and the Núcleo Integrado de Estudos e Apoio a Terceira Idade. Undergraduate students and professionals from several courses of the university participated. The goal of the event was to gather individuals aged 55 years or older, from different areas of the country, for fellowshipping, workshops and lectures.

The elderly who participated in the workshop, offered by the Speech-Language-Hearing Program of the UFSM, were interviewed by undergraduates who introduced themselves and explained the purpose of the study. A total of 59 senior citizens agreed to participate in the study.

To make up the sample, it was selected only the individuals who complained of hearing difficulties, corresponding to 32 elderly, six males and 26 females, age range of 60-88 years (mean age of 71.16 years).

After being informed and signing the informed consent, the subjects were individually interviewed and answered a self-assessment questionnaire regarding their hearing performance. We used an adaptation of “The hearing handicap inventory for the elderly – screening version”, proposed by Ventry and Weinstein(1). The questions in the questionnaire were used only as a script for the interview and we did not apply the scoring criteria to the answers, that is why it is unnecessary to validate this questionnaire for the Brazilian Population.

After the interview, the participants were informed about the signs and symptoms of hearing loss resulting from aging, as well as about the resources available to reduce its effects.

RESULTS

Out of 59 elderly interviewed, 32 reported hearing difficulty. There were six men and 26 women, age range of 60-88 years (mean of 71.16 years). The question that led to more (75%) positive answers (“yes”) was “Does a hearing problem cause you difficulty when talking in noisy environments?”. The “no” answer prevailed for the questions: “Do you feel that any difficulty with your hearing limits or hampers your personal or social life?” (84.4%) and “Does a hearing problem cause you to attend religious services less often than you would like?” (90%). The “sometimes” answer was observed in less than 26% of cases.

Table 1 shows the answers obtained.

<table>
<thead>
<tr>
<th>Questions</th>
<th>Yes</th>
<th>No</th>
<th>Sometimes</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does a hearing problem cause you to feel embarrassed when you meet new people?</td>
<td>12</td>
<td>16</td>
<td>4</td>
<td>32</td>
</tr>
<tr>
<td>Does a hearing problem cause you to feel frustrated when talking to other people?</td>
<td>10</td>
<td>19</td>
<td>3</td>
<td>32</td>
</tr>
<tr>
<td>Do you have difficulty hearing when someone speaks in a whisper?</td>
<td>11</td>
<td>13</td>
<td>8</td>
<td>32</td>
</tr>
<tr>
<td>Do you feel handicapped by a hearing problem?</td>
<td>11</td>
<td>19</td>
<td>2</td>
<td>32</td>
</tr>
<tr>
<td>Does a hearing problem cause you difficulty when visiting friends, relatives or neighbors?</td>
<td>5</td>
<td>24</td>
<td>3</td>
<td>32</td>
</tr>
<tr>
<td>Does a hearing problem cause you to attend religious services less often than you would like?</td>
<td>1</td>
<td>29</td>
<td>2</td>
<td>32</td>
</tr>
<tr>
<td>Does a hearing problem cause you to have arguments with family members?</td>
<td>5</td>
<td>23</td>
<td>4</td>
<td>32</td>
</tr>
<tr>
<td>Does a hearing problem cause you difficulty when listening to TV or radio?</td>
<td>10</td>
<td>16</td>
<td>6</td>
<td>32</td>
</tr>
<tr>
<td>Do you feel that any difficulty with your hearing limits or hampers your personal or social life?</td>
<td>3</td>
<td>27</td>
<td>2</td>
<td>32</td>
</tr>
<tr>
<td>Does a hearing problem cause you difficulty when talking in noisy environments?</td>
<td>24</td>
<td>75</td>
<td>2</td>
<td>32</td>
</tr>
</tbody>
</table>
DISCUSSION

Presbycusis is one of the chronic problems most frequently found among the elderly and tends to increase with age. It affects 33% of individuals between 65 and 75 years, 45% between 75 and 85 years and 62% of those above 85 years (6). Considering the mean age of the group studied, we noticed that the rate of hearing difficulty complaint was higher than that reported in the literature.

The occurrence of hearing loss complaint was similar in both genders, contrary to the findings of Lewkowicz (8) and Veras e Mattos (9), who found more frequent hearing difficulties in elderly men.

Hearing loss in the elderly is associated with a reduction in communication and auditory handicap, related with the difficulty to understand speech in noisy environments.

In the present investigation, most elderly subjects complained of difficulties to communicate in noisy environments and more than 30% reported embarrassment, frustration and difficulties to listen to the radio and/or the television. One of the greatest impacts of hearing loss found by Ferreira and Signor (10), was also the difficulties in engaging in social activities, reported by 57.14% of individuals.

One of the complaints from the elderly who took part in the present study is related to the difficulty in speech discrimination in noisy environments, which is corroborated by the findings of Pickles (11). The drop in discriminatory efficiency is associated with loss of sensitivity in high frequencies (12), making it difficult to perceive consonants, especially when the conversation happens in noisy environments (13). However, Tanaka, Araújo and Assencio-Ferreira (14) observed that in 71.42% of institutionalized elderly, mild to moderate hearing loss in high frequencies did not compromise their communication.

In the elderly population, the association of hearing loss, depression and dementia deteriorated even further their general health status. Hearing loss would be associated with an increase in physical and psychosocial dysfunction in the elderly (15). Communication limitation may inhibit daily activities. Nonetheless, in the present investigation only a handful of subjects reported that hearing loss impaired their social or personal lives, and very few reported less frequent church attendance. Such result may be a particularity of the group studied: active senior citizens. As they are inserted in family and social groups, the elderly have the opportunity to exchange experiences that foster their personal development and create possibilities to address their problems and better socialize them (16).

We highlight that the elderly, even when limited by routine and automatism, can and must have control over all aspects of their lives, performing creative activities and making their own decisions. Activities such as “Acampavida”, which led to this study, are in agreement with what Penteado proposed (16), that is, when inserted in family and social groups, the elderly have opportunity to exchange experiences that foster personal development.

Auditory rehabilitation programs that offer complementary strategies for elderly communication are as important as the fitting of hearing aids to reduce the psychosocial reactions stemming from the hearing impairment (17). For Ruschel, Carvalho and Guarinello (18) bringing back the elderly to their social relations can be facilitated, when family and the elderly themselves are engaged in the rehabilitation process.

CONCLUSIONS

Although complaining of hearing difficulties, the studied elderly neither refrain from going to church nor had any other limitation in their personal or social lives. The difficulty to communicate in a noisy environment was the disadvantage mentioned by a high number of subjects, followed by situations of embarrassment and/or shame when meeting new people.

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