Hearing Aids and Older Americans

A subcommittee of the Senate Special Committee on Aging held hearings on September 10th and 11th, 1973. The Subcommittee on Consumer Interest of the Elderly, chaired by Senator Fainch Comfort, heard testimony from several groups. In addition, other groups and professional organizations were invited to submit written testimony relevant to hearing loss and hearing aids for the elderly.

In response to this request, Claude Layes, President of ARA, submitted the following letter. Because the membership of the ARA is interested in this vital issue, the Executive Committee asked that the letter and its acknowledgement be printed in the Journal.
October 5, 1973

Honorable Frank Church, Chairman
Special Committee on Aging
United States Senate
Washington, D.C., 20510

Dear Senator Church:

I wish to express the appreciation of members of the Academy of Rehabilitative Audiology for your invitation to the organization to provide a statement in regard to Hearing Aids and the Older American. Before presenting the statement it might be of value to present a brief description of the Academy. The Academy was founded in 1966 with the purpose of providing a forum for the exchange of ideas, knowledge, and experience in the areas of habilitative and rehabilitative audiology, to foster and stimulate professional education and research in habilitative programs for hearing handicapped persons and to correlate these endeavors for the welfare of the hearing handicapped.

The members are individuals who have graduate degrees in audiology and education of the deaf and who have a background of at least five years of experience in habilitative and rehabilitative audiology or educational programs for the acoustically impaired.

This group with a specialized focus on the rehabilitation of the hearing impaired held a meeting this summer at which time it considered the reports of fourteen task force committees. Four of the reports were: Standards for Hearing Aids, Dispensing of Aids by Audiologists, Plans for Expenditure of Public Funds for Rehabilitative Services in Audiology, and Aural Rehabilitation for Adults. Some excerpts from the reports of these committees may help to indicate some of the concerns and interests of the Academy.

1. Efforts should be made to develop a set of guidelines for the purchase of services for the hearing handicapped on a national level.
2. Develop a better understanding of what a hearing aid really does for the hard of hearing.
3. Develop a good working relationship with hearing aid dealers to help them feel more confident that cooperation with rehabilitative audiologists will ultimately lead to more satisfied customers. As a result the dealers may be more agreeable to making needed changes in aids already purchased and be willing to deduct the cost of aural rehabilitation from the price of the hearing aid.

5
4. Attempt to make service available for hearing impaired senior citizens residing in nursing or residential homes or their own homes.
5. Convince physicians and hearing aid dealers of the need for rehabilitation services for the elderly.
6. Short and long range goals for community programs should focus on the preservation of human resources so that all citizens with hearing impairment may be productive. Communication is the link by which people survive in this society and we would agree that we must work toward improving communication as best as possible for each hearing impaired person.
7. A way must be provided to make rehabilitative services accessible to the elderly citizen.
8. Survey the membership of such organizations as the National Association of Retired Persons to determine the services needed by the elderly.

If the above goals are to be considered and met it will be necessary for the elderly to receive financial assistance, especially in reference to the purchase of hearing aids. As a result the Academy of Rehabilitative Audiology strongly recommends that Medicare coverage be provided for hearing aid evaluations, the purchase of hearing aids and the provision of rehabilitative services as prescribed by a physician specializing in diseases of the ear or by a certified audiologist.

I hope this information will be of help to your committee. Also, we stand ready to provide any further assistance your committee may need.

Sincerely,

Claude S. Haym, Ph.D.
President, ARA

John J. O’Neill, Ph.D.
Chairman, ARA Task Force
November 3, '73

Claude S. Hayes, Ph.D.
President, ARA
1975 Willow Drive
Madison, Wisconsin 53706

Dear Dr. Hayes:

You have been good enough to submit a statement dealing with issues discussed at hearings on "Hearing Aids and Older Americans." Our transcript for that hearing is now in final preparation, and I will make certain that your statement is included.

As Chairman of the Committee and its Subcommittee on Consumer Interests of the Elderly, I am grateful for your cooperation and interest.

Sincerely,

Frank Church
Chairman