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Ear and hearing health of Aboriginal and Torres Strait Islander people 2023: children aged 0-14

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First Nations people have excessive rates of preventable ear and hearing problems, with very high rates of middle ear infections and related hearing loss among children.

Chronic or recurring middle ear infections can affect young children's hearing, which can have a big impact on their speech, language, thinking skills and social development. These in turn can affect schooling and lead to mental health and behaviour problems and social isolation. As children grow up, these issues can make it difficult for them to be part of community, culture, and work and may contribute to antisocial behaviour and contact with the criminal justice system.

Identifying and treating ear and hearing problems can be challenging

Otitis media, or middle ear infection, is the main condition contributing to hearing loss among First Nations children. Middle ear infections are preventable and treatable.

First Nations young children and babies need regular ear and hearing health checks. Identifying and managing chronic and recurrent middle ear infections depend on children being checked when needed and referred to relevant services.

Navigating the complex hearing health system can be difficult for families. Patients may need to access multiple services for screening, diagnosis, treatment, and rehabilitation services. Patients may fall out at critical points along this care pathway if there are difficulties or delays accessing or receiving care.

For First Nations people, systemic barriers to accessing ear and hearing health services can make it more difficult to navigate an already complex health system. Access may be affected by limited availability and accessibility of culturally appropriate health services, a lack of continuity of care, or racism or discrimination from health care providers.

This In Focus report presents a selection of key findings from the report *Ear and hearing health of Aboriginal and Torres Strait Islander people, 2023.*



3 in 10

First Nations children aged 7–14 had measured hearing loss in 2018–19



4 in 10

First Nations children aged 7–14 living in remote areas had measured hearing loss in 2018–19



Nearly 9 in 10

ear-related
hospitalisations
among First Nations
children aged 0–14
were middle-ear
related, from July 2020
to June 2022

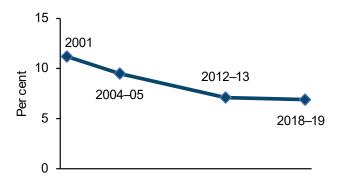




Reported ear and hearing problems

The proportion of reported ear and hearing problems among First Nations children aged 7–14 fell from 11% in 2001 to around 7% (19,100 children) in 2018–19.

Reported ear and hearing problems, First Nations children aged 7-14



Sources: ABS National Health Survey 2001, National Aboriginal and Torres Strait Islander Health Survey 2004–05, Australian Aboriginal and Torres Strait Islander Health Survey 2012–13 and National Aboriginal and Torres Strait Islander Health Survey 2018–19.

Information about reported ear and hearing problems underestimates the prevalence of these conditions.

Screening and diagnosis



Hearing screening rates of First Nations babies are very high

In 2021–22, screening rates were:

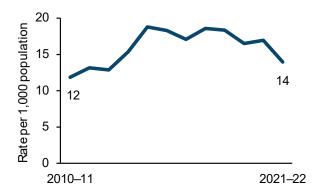
- Victoria 98% (1,142 babies)
- Queensland 97% (6,269 babies)
- Western Australia (public hospitals) 97% (2,193 babies)
- South Australia 91% (1,002 babies)

Sources: AIHW analysis of The Royal Children's Hospital Melbourne data (unpublished), Queensland Health data (unpublished), Western Australia Department of Health data (unpublished), South Australia Women's and Children's Health Network data (unpublished).

Audiology services are needed to diagnose, treat and manage ear and hearing conditions.

The rate of audiology services for First Nations children aged 0–14 increased from 12 per 1,000 population in 2010–11 to 14 per 1,000 (around 4,000 children) in 2021–22.

Audiology services for First Nations children aged 0-14



The HAPEE program provides free ear health checks and diagnostic hearing assessments for First Nations children aged under 6 not yet attending full-time school.

- In 2021–22, around 7,000 ear health checks and diagnostic hearing assessments were provided through this program (58 per 1,000 population)
- 1 in 5 First Nations children (1,451 children) who received a HAPEE diagnostic hearing assessment had a hearing impairment. Intervention and treatment.

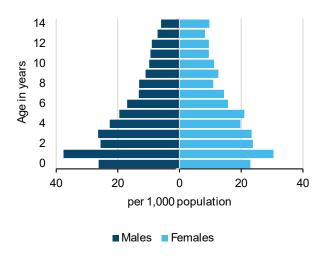
Intervention and treatment

Hospital emergency departments attend to people who need urgent medical care.

Emergency department presentation rates for ear or hearing problems for First Nations children (July 2020 to June 2022) were:

- higher among those aged 0–4
- highest for one-year-olds.

Emergency department presentation rates for First Nations children aged 0-14, Jul 2020-Jun 2022

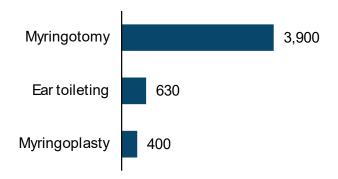


Nearly 6,000 First Nations children aged 0–14 had an ear or hearing related hospital procedure from July 2020 to June 2022.

The 3 most common were:

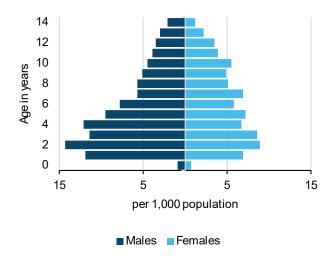
- Myringotomy (65%) incision of the eardrum to drain fluid, may involve inserting a ventilation tube or grommet to prevent fluid build-up
- Ear toileting (11%) clearing wax or debris from the ear canal, often to treat recurring ear canal infections
- Myringoplasty (7%) repair of a hole in the eardrum that can be caused by repeated ear infections or a grommet.

Most common ear or hearing related hospital procedures, First Nations children aged 0-14, Jul 2020-Jun 2022 - number



Around 3,400 First Nations children underwent a **middle ear related hospital procedure** from July 2020 to June 2022.

Middle ear related hospital procedure rates for First Nations children aged 0-14, Jul 2020-Jun 2022



Middle ear procedure rates for First Nations children were:

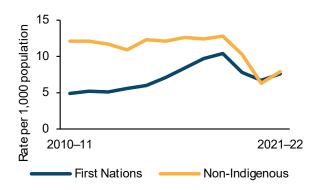
- higher among those aged 1–4
- highest for 2-year-olds.

Among First Nations children aged from 1 to 6, middle ear procedure rates were higher for boys than girls. The reasons for this pattern, which has been observed in other populations, are not well-understood.

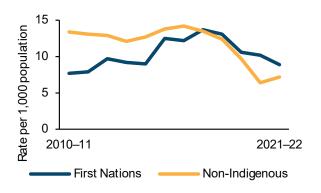
Rates of middle ear procedures for First Nations children in age groups from 0–6 increased overall in the decade to 2021–22.

This was despite declines starting in 2017–18 or 2018–19 (depending on the age group). Further investigation is needed to understand what might be driving these trends.

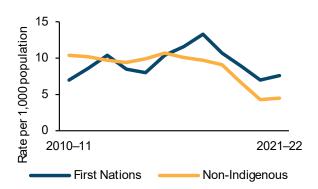
Middle ear related hospital procedure rates for First Nations children aged 0-2



Middle ear related hospital procedure rates for First Nations children aged 3-4



Middle ear related hospital procedure rates for First Nations children aged 5-6



Information about how long it takes for patients to access health services they need is important for improving the provision of health services.

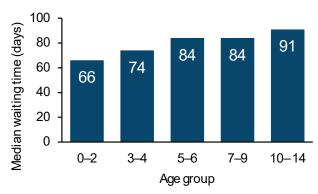
The patient pathway through the ear and hearing health system is often complex. Patients may need to access a range of different services, from screening to diagnosis, medical interventions such as surgical procedures, to rehabilitation services, including hearing devices and allied health services such as speech pathology.

There is a lack of information about how long patients wait from the start of this process to the point where they have access to the services they need.

Available information about waiting times refers only to the time between when a patient is placed on a waiting list for a medical procedure, to when they are admitted to hospital for that procedure.

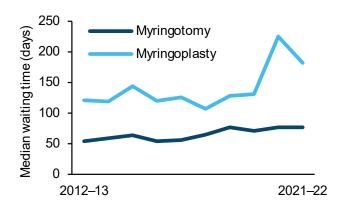
From July 2020 to June 2022, a myringotomy were performed on around 3,900 First Nations children. The median waiting time for a myringotomy increased as children got older, for procedures performed from July 2020 to June 2022.

First Nations children, median waiting time for a myringotomy



For First Nations people of all ages, waiting times for myringotomy and myringoplasty procedures increased over the decade to 2021–22.

First Nations people, change over time in median waiting time for common ear procedures



Rehabilitation



Early fitting of hearing aids or cochlear implants is related to better speech and language development

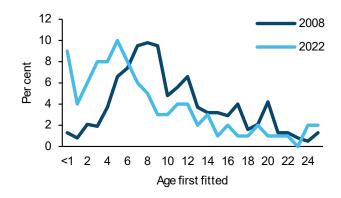
About 1,300 First Nations children aged 0–14 were clients of Hearing Australia, as at December 2022. Of these:

- 1,250 had hearing aids (96%)
- 65 had a cochlear implant (5%).

In 2022, First Nations children with hearing devices had their device fitted at a younger age, on average, than in 2008.

The peak age at which the hearing device was first fitted fell from between 7 and 9 years in 2008 to between 3 and 6 years in 2022.

First Nations children and young people, age at first fitting of hearing device



More information

Ear and hearing health of Aboriginal and Torres Strait Islander people, 2023

Queensland's Deadly Ears Program—Indigenous children receiving services for ear disease and hearing loss

Hearing health outreach services for Aboriginal and Torres Strait Islander children in the Northern Territory: July 2012 to December 2022

Aboriginal and Torres Strait Islander Health Performance Framework: 1.15 Ear health

Regional Insights for Indigenous Communities: Ear health



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