

HEALTHY AGEING: PRIORITISING HEARING CARE IN EUROPE'S AGEING POPULATION

In Europe, one-third of people over 60 years are living with disabling hearing loss. By 2050, the global number of people with hearing loss will almost double, which will have a significant impact on individuals, communities, and economies across Europe.¹

The association between ageing and hearing loss is evident. However, national hearing screening programmes and treatment options are proven to help avoid or minimise related comorbidities, social isolation and the imposing financial costs on Europe's social and healthcare system.²



DEMENTIA

Evidence recognises the elimination of 12 potentially modifiable risk factors could prevent up to 40% of dementia cases.³

Hearing loss accelerates cognitive decline and increases a person's risk of dementia by 8%, making it the main modifiable risk factor.⁴ Hearing loss is followed by depression (4%) and isolation in later life (4%) both of which are proven to be greater among people with untreated hearing loss.³



SOCIAL ISOLATION

Hearing loss contributes to social isolation and loneliness due to reduced engagement in activities and smaller social networks.

The WHO highlights the negative effect of social isolation on the psychosocial and cognitive health of adults.⁵ Mental health conditions, such as depression, are 1.5 times as common among those experiencing hearing loss compared to those without.⁶

POLICY IN FOCUS

The WHO's *Global Action Plan for the Prevention and Control of Non-communicable Diseases* (NCDs) recognises hearing loss as a disability of public health importance closely associated with the four major NCDs: cardiovascular and chronic respiratory diseases, cancer, and diabetes.⁷

Seven major comorbidities are associated with hearing loss.⁸



Dementia



Depression



Diabetes



Falls



Heart Disease



Renal Failure



Premature Death

HEARING HEALTH POSITIVITY IMPACTS THE EU'S PRODUCTIVITY

The European Union faces a fast-growing risk of labour shortages due to a shrinking working-age population. The *Strategy for the Rights of Persons With Disabilities 2030* shows that access to the labour market remains one of the main challenges for people with hearing loss.⁹

Working-age adults with untreated hearing loss face a higher unemployment rate,¹⁰ earn statistically less, and retire earlier than hearing people.¹ Hearing aids and implants are proven to help increase participation in the labour market. Clinkard et al. (2015) found that, on average, 6.6 years after receiving a cochlear implant, 31% of recipients reported a significant income increase, enough to move them into a higher income bracket, with an average annual rise of \$10,021.¹¹

POLICY IN FOCUS

The *EU Green Paper on Ageing* emphasizes that enjoying long, healthy, and independent lives extends people's work careers by participating in voluntary activities. Voluntary work adds both societal and economic benefits.¹²



\$224.5
BILLION

According to the WHO, the European Union incurs annual costs of approximately \$224.5 billion due to hearing loss, encompassing healthcare and education expenditures, associated comorbidities, and productivity losses.¹



HEARING SCREENING FOR OVER 55s FOR HEALTHY AGEING

The positive results of hearing aids, cochlear implants, and bone conduction systems are well-known. However, research shows that adults regularly wait up to ten years before seeking treatment for hearing loss.¹³ A pilot project in Malta has been established to provide free hearing screening tests for adults. Reducing the stigma around undertaking a hearing test is one of the project's key goals. The WHO reports that proactive strategies like this are proven to be cost-effective in developed and developing countries.

Therefore, at the Hearing Health Forum EU, we firmly believe that systematic hearing screening is one of the most effective ways to work towards a healthy ageing population.

POLICY IN FOCUS

The WHO's *Guiding Principles of Hearing Screening in Older People* recommend that hearing technology and rehabilitation services must be made available while focusing on a person-centred approach.¹⁴

\$1



\$30

According to the WHO, every \$1 invested in EU hearing care can yield a return of \$30 over a 10-year period.¹



WE CALL FOR A EUROPEAN HEARING HEALTH STRATEGY

Our members and partners urge the European Union to launch a patient-centred European Hearing Health Strategy, affirming its commitment to a Health Union that includes all citizens, especially those living with hearing loss.

We encourage the Strategy to focus on **HEAR** pillars:



Hearing Loss Awareness

Raise awareness of hearing loss and educate populations to reduce stigma and promote social inclusion.



Early Detection and Prevention

Implement effective strategies are put in place at the national level to ensure prevention and detection of hearing loss.



Access and Care

Increase and facilitate access to hearing healthcare, interventions, treatment options and rehabilitation for persons living with hearing loss.



Research and Data

Further support research and the collection of data to facilitate evidence-based policymaking for persons living with hearing loss.



Join our call for a European Hearing Health Strategy and endorse the [Manifesto on Hearing Health](#)

Contact us for questions:
contact@hearinghealth.eu

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