

Increasing Cross-Sectoral Collaboration in Advocacy Efforts for Ear and Hearing Care Services

March 2025

Executive Summary

Background

Amidst mounting evidence highlighting the critical link between hearing health, cognition, and overall healthy ageing, numerous obstacles hinder older adults' access to essential ear and hearing care (EHC) services. Barriers include the prohibitive costs of hearing care to pervasive societal stigma, limited awareness and information, and logistical challenges like transportation hurdles. Compounding these issues are the intricacies of navigating the complex pathways within the hearing care delivery system.

The global demographic landscape is rapidly evolving, with a significant portion—over 65%—of individuals aged 60 and above grappling with some level of hearing impairment. This demographic reality underscores the urgent need to embed hearing health initiatives within broader health system reforms and prioritize enhancing access to EHC services, especially during the United Nations (UN) Decade of Healthy Ageing.

Research Findings

In response to concerning global trends, the International Federation on Ageing (IFA) launched the initiative Increasing Cross-Sectoral Collaboration in Advocacy Efforts for Ear and Hearing Care Services aimed to empower civil society organizations (CSOs) and stakeholders beyond the realm of hearing health to effectively comprehend, engage with, and advocate for ear and hearing care services (EHC). During the first phase of the project, IFA conducted a comprehensive assessment of National Aged Care Plans and Dementia Policies, across six countries within the World Health Organization (WHO) regions, with the aim of highlighting existing gaps and opportunities that can be leveraged to support and encourage greater engagement and investment in this important issue. The countries of interest included: Japan, China, South Africa, Saudi Arabia, the United Kingdom, and the United States of America.

Across all countries of interest, there were key emergent themes. First, all six countries have rapidly ageing populations with evidence of increased prevalence of both hearing loss and dementia. This finding is crucial in building support for IFA's advocacy calls to better meet the needs of ageing populations.

Despite increasing prevalence of older adults, dementia and age-related hearing loss (ARHL), IFA's research revealed, a lack of inclusion of EHC strategies in National Aged Care Plans and National Dementia Care Strategies. For example, only 5 out of 13 National Aged Care Plans across all countries of interest included mention of ear and hearing care for older adults. Additionally, only 4 out of 9 National Dementia Care Strategies across all countries of interest included mention of ear and hearing care for older adults. These findings further highlight the opportunity to enhance the policy landscape for older adults by integrating healthy aging strategies and preventive measures that incorporate hearing health goals across multiple health sectors.

Finally, IFA's research shows an apparent lack of collaboration between national civil society organizations focused on healthy ageing, brain health and cognition, and overall sensory health. While each country has active organizations and civil engagement, there appeared to be little collaboration across sectors, therefore conversations and tools for advocacy often exist in silos.

The need for increased cross sectoral collaboration was further reinforced in the second phase of the initiative in which semi-structured interviews were conducted with members of academia and civil society across the countries of interest. Research participants provided context on the attitudinal, infrastructural, and access barriers to promoting EHC services, as well as challenges to seeking ear and hearing care. Many interviewees mentioned the difficulties in engaging in advocacy efforts and combatting both the invisibility of the disability, and the ageist beliefs that normalize hearing loss.

“There is a big gap between hearing organizations and dementia organizations, and I dream about how to increase the connection between these groups and strengthen their partnerships. Collaborative programming is beneficial for all.”- Research Participant

Crucially, interviewees mentioned frustrations in the lack of collaboration amongst civil society, despite the interests that associations focused on hearing health, vision health, and brain health shared, such as the shared desire of maintaining and improving sensory function, and social integration.

Amplifying Advocacy and Next Steps

Reflecting on the IFA's commitment to working with partners to improve interdisciplinary collaboration between hearing health and ageing experts, on January 18th, 2025, IFA held a [webinar](#) hosting with experts in healthy ageing and hearing health, to discuss the evidence base for hearing loss and dementia and call for increased civil society engagement. Speakers included: Dr. Kathy Pichora-Fuller, PhD, Professor Emerita of Psychology at the University of Toronto and Adjunct Professor of Gerontology at Simon Fraser University; Dr. Sue Archbold, Co-Ordinator of the CI International Community of Action, CIICA, and Dr. Joshua Chodosh, Clinical Geriatrician and Professor of Medicine and Population Health at NYU Langone Health and NYU Grossman School of Medicine.

The webinar successfully attracted over 700 registrants, from across the six WHO regions and created a platform to further amplify the findings of this project and create a global call to action amongst civil society. Ultimately, the webinar highlighted the importance engaging in collaborative advocacy efforts to unify healthcare messaging and maximize the reach of knowledge and resource dissemination. The IFA remains committed to continuing advocacy work and calling for increased cross sectoral collaborations to advance ear and hearing care services.

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