



Anxiety and depression in people who are deaf or hard of hearing

People with hearing loss encounter practical and social problems beyond those experienced by people who have their hearing. This may increase the risk of people with hearing loss developing mental health problems.¹

People who lose their hearing may give up interests and activities and this can impact on psychological wellbeing.¹ Hearing loss can have an impact on quality of life and can lead to isolation, anxiety and depression.²

Losing one's hearing due to illness or age may also lead to sadness about the loss of hearing and impact on one's mental health and wellbeing.^{3,4} Poor communication plays a large part in increasing the risk of anxiety and depression in deaf and hard of hearing people. Some deaf people are proactive in finding ways to communicate, such as pen and paper, etc. Other deaf people become shy and withdrawn.

A survey conducted in 2007 found that six in 10 people with hearing loss had displayed some of the symptoms associated with depression.⁵ People with hearing loss experienced the following symptoms of depression:

- one in two had displayed increased irritability and frustration
- one in five had trouble sleeping or experienced restlessness
- nearly 20 per cent showed a loss of interest or pleasure in most activities
- one in seven was described as being sad, down and miserable most of the time

- one in seven had withdrawn from close family and friends.

Being diagnosed, treated for and recovering from anxiety or depression can be difficult for everyone, but it can be even more of a challenge for people who are deaf or hard of hearing.

The good news is that there are effective treatments for anxiety and depression. With careful management, the symptoms of anxiety and depression can be treated so they do not interfere with life.

Risk factors for anxiety and depression in people who are deaf or hard of hearing

People who are deaf may feel anxious, down, isolated and lonely if:

- they think they're not understood by others, and their family members, friends or work colleagues don't know how to communicate with them – this could lead to people feeling confused and detached from what is going on around them
- they don't know how to express themselves and their feelings – this may be because they can't express themselves in words or the person with whom they wish to communicate is having difficulty communicating e.g. shouting, yelling, negative facial expressions
- other people do not understand their communication style or needs e.g. failure of a workplace to provide a staff member with

an Auslan interpreter or to acknowledge that a person with hearing loss may need information repeated, presented more visually, or via a note taker

- they are trying to communicate in loud and congested areas – this applies particularly to people who experience gradual and subtle hearing loss.

What is anxiety?

Anxiety is more than just feeling stressed or worried. Anxious feelings are a normal reaction to a situation where a person feels under pressure and usually pass once the stressful situation has passed, or the 'stressor' is removed.

However, for some people these anxious feelings happen for no apparent reason or continue after the stressful event has passed. For a person experiencing anxiety, anxious feelings cannot be brought under control easily. Anxiety can be a serious condition that makes it hard for a person to cope with daily life. There are many types of anxiety and many people with anxiety experience symptoms of more than one type.

Anxiety is common and the sooner a person seeks support, the sooner they can recover.

Signs of anxiety

The symptoms of anxiety can often develop gradually over time. Given that we all experience some anxious feelings, it can be hard to know how much is too much. In order to be diagnosed with an anxiety condition, it must have a disabling impact on the person's life. There are many types of anxiety, and there are a range of symptoms for each.

Anxiety can be expressed in different ways such as uncontrollable worry, intense fear (phobias or panic attacks), upsetting dreams or flashbacks of a traumatic event.

Some common symptoms of anxiety include:

- hot and cold flushes
- racing heart
- tightening of the chest
- snowballing worries
- obsessive thinking and compulsive behaviour.

There are effective treatments available for anxiety. For more information on anxiety and treatments see the *beyondblue Understanding anxiety* fact sheet or visit www.beyondblue.org.au/anxiety

What is depression?

While we all feel sad, moody or low from time to time, some people experience these feelings intensely, for long periods of time (weeks, months or even years) and sometimes without any apparent reason.

Depression is more than just a low mood – it's a serious condition that has an impact on both physical and mental health.

Depression affects how a person feels about themselves. A person may lose interest in work, hobbies and doing things he or she normally enjoys. Some people may lack energy, have difficulty sleeping or sleep more than usual, while some people feel anxious or irritable and find it hard to concentrate.

The good news is, just like a physical condition, depression is treatable and effective treatments are available.

Signs of depression

A person may be depressed if he or she has felt sad, down or miserable most of the time for more than two weeks and/or has lost interest or pleasure in usual activities, and has also experienced some of the signs and symptoms on the list below.

It's important to note that everyone experiences some of these symptoms from time to time and it may not necessarily mean a person is depressed. Equally, not every person who is experiencing depression will have all of these symptoms. The symptoms will not provide a diagnosis – for that you need to see a health professional – but they can be used as a guide.

Some common symptoms of depression include:

- not going out anymore, loss of interest in enjoyable activities
- withdrawing from close family and friends
- being unable to concentrate and not getting things done at work or school
- feeling overwhelmed, indecisive and lacking in confidence
- increased alcohol and drug use
- loss or change of appetite and significant weight loss or gain
- trouble getting to sleep, staying asleep and being tired during the day
- feeling worthless, helpless and guilty
- increased irritability, frustration and moodiness
- feeling unhappy, sad or miserable most of the time
- thoughts such as, "I'm a failure", "Life's not worth living", "People would be better off without me".

As with anxiety, there are effective treatments available for depression. For more information on depression and treatments see *beyondblue's Anxiety and depression: An information booklet* or visit www.beyondblue.org.au/depression

What are the treatments for anxiety and depression?

There is no one proven way that people recover from anxiety or depression and it's different for everybody. However, there is a range of effective treatments and health professionals who can help people on the road to recovery. There are also many things that people with anxiety and depression can do to help themselves to recover and stay well. The important thing is finding the right treatment and the right health professional that works for you.

Different types of anxiety or depression require different types of treatment. This may include physical exercise for preventing and treating mild anxiety and depression, through to psychological and medical treatment for more severe episodes.

Psychological treatments

Psychological therapies may not only help with recovery, but can also help prevent a recurrence of anxiety or depression. These therapies help build skills in coping with stressful life circumstances and can be provided by a psychologist, psychiatrist or other trained health professional.

- **Cognitive behaviour therapy (CBT)** is an effective treatment for people with anxiety and depression. It teaches people to evaluate their thinking about common difficulties, helping them to change their thought patterns and the way they react to certain situations.
- **Interpersonal therapy (IPT)** is also effective for treating depression and some types of anxiety. It helps people find new ways to get along with others and to resolve losses, changes and conflict in relationships.

Medication

Antidepressant medication, alongside psychological therapies, can also play a role in the treatment of moderate to severe depression and some anxiety conditions.

Making a decision about which antidepressant is best for a person can be complex. The decision will be made in consultation with a doctor, after careful assessment and consideration.

The doctor should discuss differences in effects and possible side-effects of medications. Stopping medication should only be done gradually, with a doctor's recommendation and under supervision.

A doctor or treating health professional will take into account several factors when suggesting the most suitable treatment. Regular contact with and ongoing assessment by a doctor to check that treatments are working effectively is an important part of becoming and staying well. Most people taking medication will also benefit from psychological therapies, which will reduce the likelihood of relapse after the person has stopped taking the medication.

How to make yourself understood when seeking help for anxiety and depression

Talking about anxiety and depression can be challenging. It can be even more difficult when there are communication barriers to overcome. This can lead to anxiety and depression being undetected, untreated or misdiagnosed.

- When you make the appointment it is important to let the health professional know that:
 - you are deaf or have hearing loss – an accredited Auslan interpreter can be accessed free for private medical appointments through the National Auslan Interpreter Booking and Payment Service (NABS) – refer to back page for more information.
 - you may need a longer consultation so that you don't feel pressured or rushed to explain your communication requirements along with your symptoms.
- If you are using an Auslan interpreter, ask the health professional to talk to you directly, not the interpreter.
- If you don't need an Auslan interpreter, you may want to arrange for someone who can help with communication to attend the appointment with you e.g. a note taker.

- If you require live captioning for your appointment, you can make a booking with your preferred live captioning service provider. Please note there is a fee for this service.
- It may be useful to ask the health professional to assist you in the consultation by:
 - speaking clearly and repeating information you don't understand
 - facing you so you can see each other clearly
 - reducing any unnecessary background noise
 - making sure the room is well-lit and that he or she is not sitting in front of a window so you can see facial expressions and lip read more easily
 - writing down important information for you to take away.

Who can assist?

A General Practitioner (GP) is a good first step to discuss your concerns. Your GP can:

- make a diagnosis
- check for any physical health problem or medication that may be contributing to the condition
- discuss available treatments
- if appropriate, work with the person to draw up a Mental Health Treatment Plan so he or she can get a Medicare rebate for psychological treatment
- provide brief counselling or, in some cases, psychological therapies
- prescribe medication
- refer a person to a mental health specialist such as a psychologist, social worker or psychiatrist.

It is recommended that people consult their regular GP or another GP in the same clinic, as medical information is shared within a practice.

Psychologists are health professionals who provide psychological therapies such as cognitive behaviour therapy (CBT) and interpersonal therapy (IPT). Psychologists are not doctors and cannot prescribe medication in Australia.

Psychiatrists are doctors who specialise in mental health. They

can make medical and psychiatric assessments, conduct medical tests, provide therapy and prescribe medication. Psychiatrists often use psychological treatments such as CBT, IPT and/or medication. If the condition requires hospital admission, a psychiatrist will be in charge of the person's treatment.

Mental health nurses are specially trained to care for people with mental health conditions. They work with psychiatrists and GPs to review a person's mental health, monitor medication and provide information about mental health conditions and treatment. Some have training in psychological therapies.

Social workers in mental health are specially trained to work with people who are experiencing difficulties in life. Social workers can help people find ways to manage more effectively some of the situations that trigger these conditions such as family issues, financial problems, work stress and living arrangements. Mental health social workers can also provide focused psychological self-help strategies.

Occupational therapists in mental health help people who, because of a mental health condition, have difficulty participating in normal, everyday activities. Mental health occupational therapists also provide focused psychological self-help strategies.

Aboriginal and Torres Strait Islander mental health workers understand the mental health issues of Indigenous people and what is needed to provide culturally safe and accessible services. Some may have undertaken training in mental health and psychological therapies. Support provided by Aboriginal and Torres Strait Islander mental health workers might include, but is not limited to, case management, screening, assessment, referrals, transport to and attendance at specialist appointments, education, improving access to mainstream services, advocacy, counselling, support for family and acute distress response.

The cost of treatment from a mental health professional varies. However, in the same way that people can get a Medicare rebate when they see a doctor, they can also get part or all of the consultation fee subsidised when they see a mental health professional

for treatment of anxiety or depression. See *beyondblue's Getting help – How much does it cost?* fact sheet at www.beyondblue.org.au/resources

To find a mental health practitioner in your area, visit www.beyondblue.org.au/find-a-professional or call the *beyondblue* Support Service on **1300 22 4636**.

How family and friends can help

When a person is deaf or hard of hearing and has anxiety or depression, it can affect family and friends. It's important for family and friends to look after their own health as well as looking after the person who has anxiety or depression.

- Learn about anxiety and depression and their symptoms to help you recognise warning signs.
- Encourage the person to go to the doctor if their anxiety or depression gets worse. Make sure you seek help if you think you need it, too.
- Encourage the person to do things that they would normally enjoy.
- Look after your own health by eating well, exercising regularly, getting enough sleep and doing things that you enjoy, too.

For more information, see *beyondblue's* free booklet *A guide for carers* available from www.beyondblue.org.au/resources or by calling 1300 22 4636.



This fact sheet was produced in association with Vicdeaf.

References

- ¹ Kvam, M.H., Loeb, M., Tambs, K (2007). Mental health in deaf adults: symptoms of anxiety and depression among hearing and deaf individuals. [Journal Article. Research Support, N.I.H., Extramural. Research Support, Non-U.S. Gov't] *Journal of Deaf Studies & Deaf Education*, 12 (1), pp.1-7 and Aged Care, 1999.
- ² Werngren-Elgstrom, M., Dehlin, O., Iwarsson, S (2003). Aspects of quality of life in persons with pre-lingual deafness using sign language: subjective wellbeing, ill-health symptoms, depression and insomnia. *Archives of Gerontology & Geriatrics*, 37 (1), pp.13-24.
- ³ Ishine M, Okumiya K, Matsubayashi K. (2007). A close association between hearing impairment and activities of daily living, depression, and quality of life in community-dwelling older people in Japan. *Journal of the American Geriatrics Society*, 55(2):316-7.
- ⁴ Chou, K.L., Chi, I. (2004). Combined effect of vision and hearing impairment on depression in elderly Chinese. *International Journal of Geriatric Psychiatry*, 19 (9), pp. 825-32.
- ⁵ Newspoll survey conducted July – August 2007 by telephone among 2401 adults aged 18+ nationally, including 305 who live with someone with hearing loss. Results reported by those who live with someone with hearing loss.

Where to find more information

beyondblue
www.beyondblue.org.au

Learn more about anxiety and depression, or talk it through with our Support Service.

☎ **1300 22 4636**

- Callers who are deaf or have a hearing or speech impairment can call through the National Relay Service (NRS) **TTY: Ph 133 677** and ask for 1300 22 4636
- **Voice-only:** (speak & listen) users: phone 1300 555 727 and ask for 1300 22 4636
- **Internet Relay:** connect to www.relayservice.com.au and ask for 1300 22 4636

✉ **Email** or 💬 **chat to us online** at www.beyondblue.org.au/getsupport

Deaf Australia
www.deafau.org.au

Contact Deaf Australia for information about services available in your state/territory. 271A Stafford Road, Stafford, QLD 4053

- **Email:** info@deafau.org.au
- **Ph:** (07) 3357 8266 **Fax:** (07) 3357 8377 • **TTY:** (02) 3357 8277

National Auslan Booking Service (NABS)
www.nabs.org.au

NABS provides interpreters to deaf and hard of hearing people who use sign language and would like an interpreter for private medical appointments with GPs, psychologists, mental health workers and psychiatrists. This service is free to sign language users and medical practitioners. The NABS website has helpful videos in Auslan on how to book an interpreter.

- **Email:** bookings@nabs.org.au
- **Voice:** 1800 24 69 45 • **TTY:** 1800 24 69 48

Able Australia
www.ableaustralia.org.au

Information, support, case management, community education and recreational services for people with dual sensory loss or deafblindness

- **Voice:** 1300 225 369 • **TTY:** (03) 9882 6786

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