

Silent Risk: Most Parents & Teens Not Talking About Noise-Induced Hearing Loss

According to national estimates, 1 in 6 US adolescents has high-frequency hearing loss. This type of hearing loss can be caused by extended listening to loud noise (for example: loud engines or music) for long periods, or even by brief exposure to extremely loud sounds (for example: explosions).

Noise-induced hearing loss is often unnoticed in its early stages. With continued hazardous noise exposure, high-frequency hearing loss may progress to affect the ability to understand speech, which can have a negative impact on school performance and social interactions for teens. Currently, high-frequency hearing loss may be related to the growing popularity of personal, portable listening devices such as MP3 players.

In September 2011, the National Poll on Children's Health asked parents of teens age 13-17 about noise-induced hearing loss.

Talking with Teens About Hearing Loss

Over two-thirds of parents (69%) reported that they had not talked with their teens about noise-induced hearing loss, with no difference between teen boys and girls. Among those who had not discussed hearing loss, 78% believe their teens are not at risk for this problem. When parents did talk about hearing loss, their conversations were prompted by:

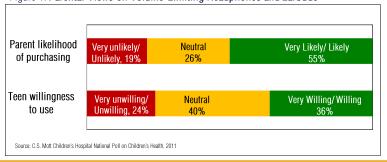
- 70% Teen playing music too loudly
- 34% Parent's personal experience
- 16% Parent read/saw information about hearing loss
- 4% Doctor or other health professional brought it up

Volume-Limiting Headphones

Only 32% of parents were aware of volume-limiting headphones or earbuds that can prevent listening devices from reaching potentially damaging noise levels.

When parents were informed about volume-limiting headphones/earbuds and their typical price (\$15-\$30/pair), over half said they would be likely to purchase them. However, only about a third of parents think their teens would be willing to use them (Figure 1).

Figure 1. Parental Views on Volume-Limiting Headphones and Earbuds



Report Highlights

Two-thirds of parents have not talked with their teens about hearing loss; most of these parents believe their teens are not at risk.

About one-third of parents are aware of volumelimiting headphones and earbuds.

Over half of parents would be likely to buy volumelimiting headphones or earbuds, but only about one-third of parents think their teens would be willing to use them.

Implications

Although 16% of teens in the US have high-frequency hearing loss, results of this Poll indicate that the majority of parents have not discussed this risk with their teens and do not believe their teens are at risk. High-frequency hearing loss may not be detected until the hearing damage has significantly progressed to a point where it begins to affect teens' school performance and daily interactions. Researchers are still working to link the rise in adolescent high-frequency hearing loss with typical adolescent hazardous noise exposures. An apparent recent increase in high-frequency hearing loss may be partially attributed to the popularity of MP3 players for adolescents. Such devices are used widely by teens today, and many teens and their parents are unlikely to consider the longterm consequences of noise-induced hearing damage.

Noise-induced hearing loss is not reversible, but it is preventable. Following the lead of about one-third of parents in this Poll, parents can talk with their teens about hearing loss. In addition, doctors and other health professionals can play a role by introducing this topic routinely with both parents and teens, during preventive care visits.

Both parents and teenagers can take some simple steps towards hearing conservation. Most volume-limiting devices look like regular headphones or earbuds, but constrain sound to 85 decibels or less, a reduction of up to 40% in maximum volume output. Use of volume-limiting headphones or earbuds may be a strategy for parents to consider in preserving teenagers' hearing for the future.

A publication from C.S. Mott Children's Hospital, the University of Michigan Department of Pediatrics and Communicable Diseases, and the University of Michigan Child Health Evaluation and Research (CHEAR) Unit.



This report presents findings from a nationally representative household survey conducted exclusively by Knowledge Networks, Inc. (KN), for C.S. Mott Children's Hospital via a method used in many published studies. The survey was administered in September 2011 to a randomly selected, stratified group of parents age 18 and older (n= 725) with a child age 13-17 from the KN standing panel that closely resembles the U.S. population. The sample was subsequently weighted to reflect population figures from the Census Bureau. The survey completion rate was 58% among parent panel members contacted to participate. The margin of error is ± 3 to 8 percentage points

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