Towards a personalised communication strategies guide: Part 1: The use of communication strategies by people with hearing loss and communication partners and recommendations by healthcare professionals

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Background

While communication strategies are sometimes proposed by hearing care professionals (HCPs), we lack knowledge about which strategies are used effectively by people with hearing loss (PHL) and their communication partners (CPs).

The ultimate aim of this project is to develop a personalised communication strategies intervention.

Part 1:
Identification of communication strategies used by PHL and CPs, and communication strategies recommended by HCPs. Exploration of perceived utility of different types of strategies across the different groups.

Part 2:
Refinement of the list of communication strategies by asking PHL which strategies they are using or not using but would be willing to try (and why they were not willing to try some suggested strategies).

Part 3:
Development of a strategies booklet and evaluation of a personalised intervention to deliver communication strategies advice.

Methods

Participants were recruited via social media. Surveys were completed using Qualtrics.

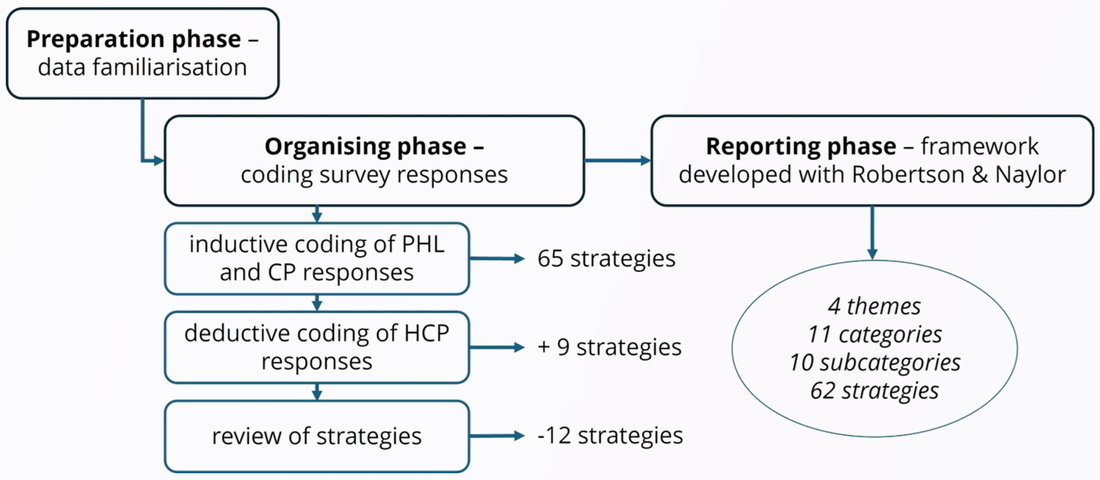
Online surveys - Key questions

PHL (n = 95) : What communication strategies do you use? What do others do during communication that you find most/least helpful?

CPs (n=49): What strategies do you use when communicating with PHL? What do you think they find most/least helpful?

HCPs (n=86): What communication strategies do you typically recommend? What strategies do you think PHL find most helpful?

Content analyses



Examples - Responses and strategies

PHL

"move closer to the person who is speaking"
PROXIMITIY – AUDITORY SIGNAL

"Have an agenda beforehand"
PLAN IN ADVANCE – PREPARATION & RECUPERATION

CP

"Actively engaging him through jokes and other modes"
USE HUMOUR – RELATIONS

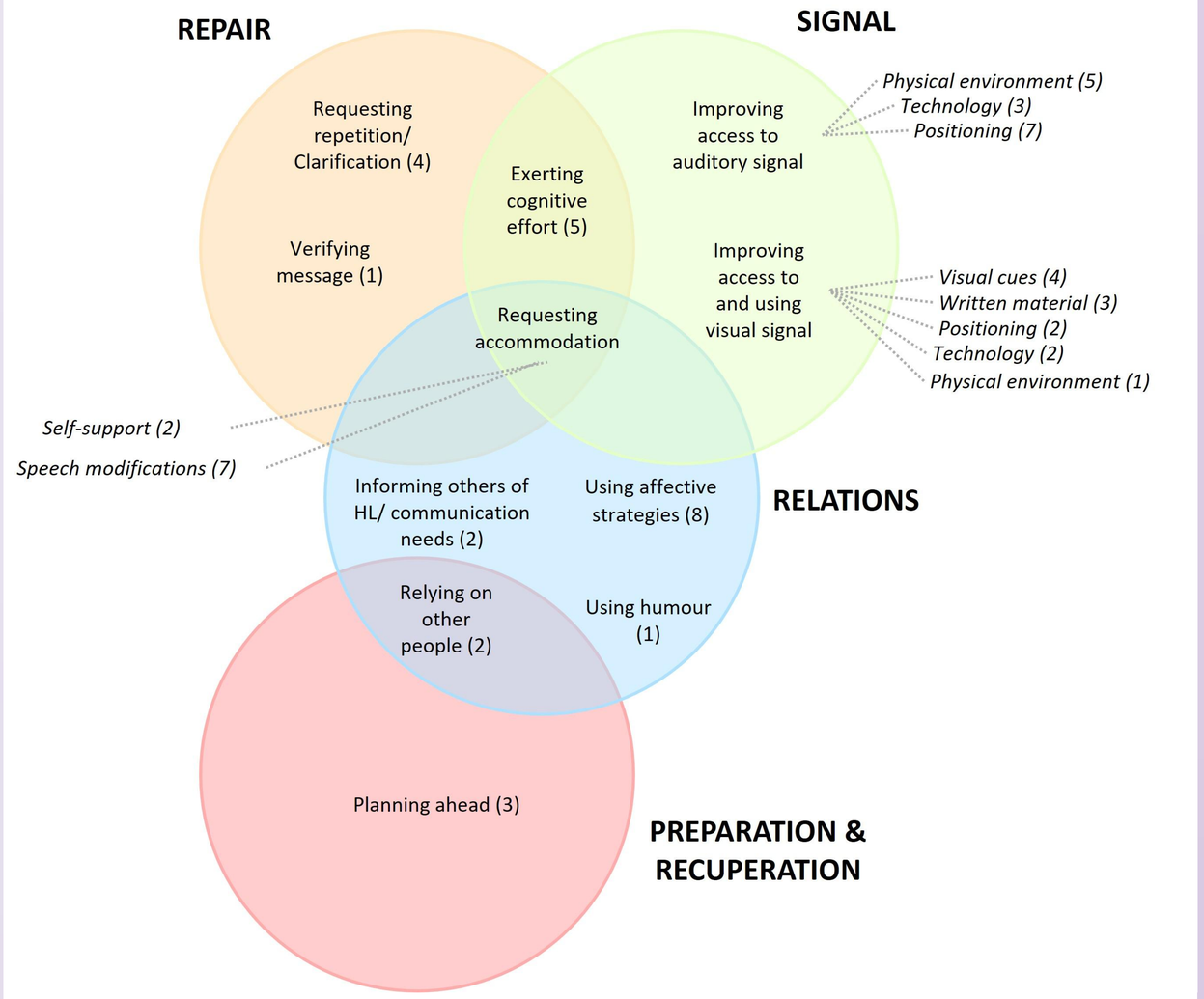
"We tend not to talk in the car as it can be too frustrating"
SELF DIRECTED STRATEGIES – REQUESTING ACCOMMODATIONS

HCP

"Be aware of furnishing e.g. soft furnishings reduce echoes"
PHYSICAL ENVIRONMENT – AUDITORY SIGNAL

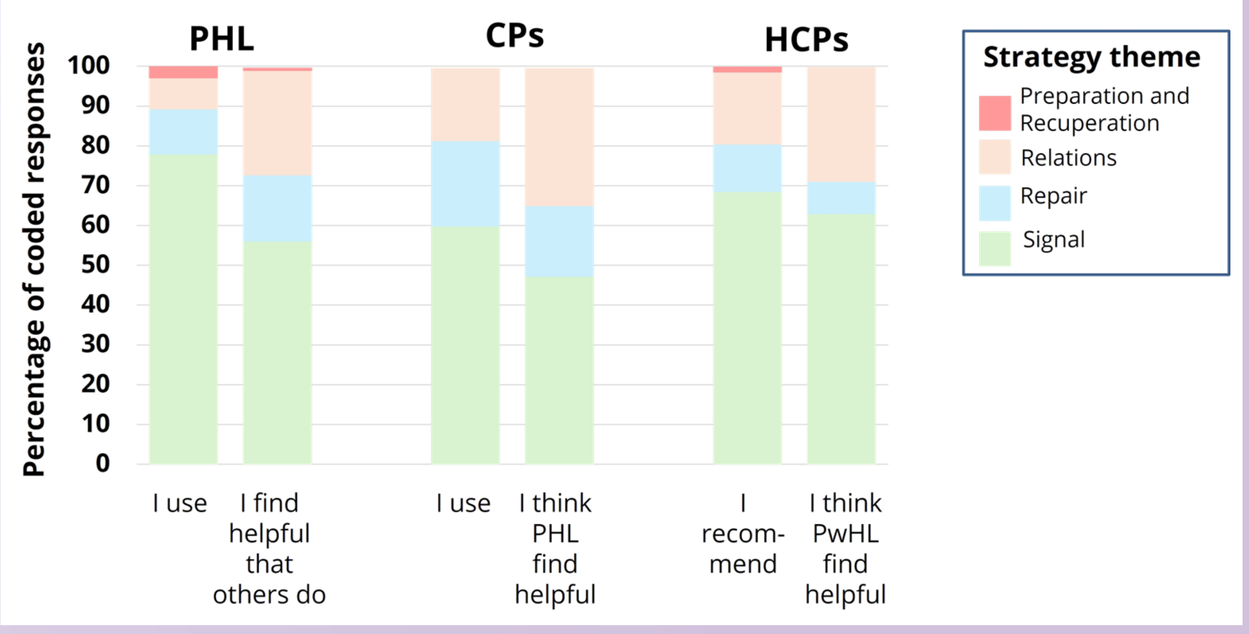
"Repeat back to check understanding"
VERIFICATION - REPAIR

Results: 1/ Framework



SIGNAL: strategies to improve access to or enhance either the auditory or visual signal
RELATIONS: strategies that change the dynamics between communication partners in a conversation
REPAIR: strategies to repair misunderstanding in the content of a conversation
PREPARATION & RECUPERATION: strategies used in anticipation of a challenging communication situation.

Results: 2/ Group comparisons



(1) Each group reported a similar spread of strategies over the four themes

(2) PHL **use** many signal strategies. The strategies they found most helpful **that others use** showed an increase in relations-themed strategies. This is unsurprising in the main, as it is understandably straightforward to make adjustments to improve access to the signal as an individual, however PHL could be encouraged to request CPs use Relations-themed strategies more often.

(3) A lower proportion of strategies recommended by HCPs fall into the Relations theme than the proportion of strategies they think PHL find helpful, again indicating HCPs could encourage PHL to ask for these Relations-based strategies to be used more often.

Conclusions

The development of a framework which describes both novel data collected from our respondents together with data from a systematic review of existing literature in the area provides a solid basis for further work. The framework could be used to guide further work in this area, and in addition could help plan evidence-based rehabilitation/counselling programs for PHL.

Next steps

Part 2: Online study asking people with hearing loss which strategies they are using or would be willing to try (and why they were not willing to try some suggested strategies).

Result: Help from others ('Relations') found valuable but rarely used because of concerns that such strategies will impact others – suggesting alternative ways of providing communication strategies counselling are needed.

Part 3: Intervention study in 3 steps (data collection ongoing)

i. Patient identifies listening situations in which additional support is needed
ii. Audiologist identifies suitable strategies for those situations
iii. Patient selects and 'contracts' to using agreed strategies in those situations

We hypothesise this approach will lead to increased use of strategies that are helpful yet underutilised, and better associated hearing outcomes.

Acknowledgements: The framework developed was result of a collaborative effort, with substantial input gratefully acknowledged from Graham Naylor and Lucy Robertson at the Hearing Sciences – Scottish Section of the University of Nottingham, UK. Please see their companion poster.

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