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A qualitative investigation of the barriers and facilitators to managing hearing loss for older adults living with frailty

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Background and Aims

Background

- Hearing loss and frailty are prevalent in older adults.
- Co-occurrence increases risks of poor quality of life, depression, and falls.
- Little is known about the specific challenges faced by community-dwelling older adults living with both conditions.

Aim:

- **To explore the barriers and facilitators to managing hearing loss for older adults living with frailty**

Research Questions

- Why do they decide to seek help with their hearing (or not)?
- What is their experience of audiology services?
- What is their experience of using hearing aids?
  …and why do some choose not to wear them?
- What is their awareness of other supportive technologies?
- What support is important to manage their hearing loss?

Design and Methods

- In-depth, semi-structured **interviews with at least 25 older adults** (age ≥65 years) living with hearing loss and frailty.
- Up to 10 interviews will be dyadic (including a family member) to understand support roles.
- **Purposive sampling** is focusing on variation in older adults' gender, socioeconomic deprivation, frailty levels, ethnicity and living circumstances.
- Recruitment via a) postal invitations sent to participants of an existing cohort study, and b) contact with diverse community groups.
- Data are being **thematically analysed**, drawing on the **Burden of Treatment Theory** to understand the extra physical or mental effort required by this population to manage their hearing loss.

Intended Impact

- Actionable recommendations - for older adults, audiologists, healthcare practitioners and academics – to better meet the support needs of those living with frailty and hearing loss.
- Foundation for developing new support interventions for older people living with frailty and hearing loss.

Progress

- We have interviewed 20 older people (median age 85) and 4 communication partners from across Yorkshire, Shropshire and Devon (@ 24.09.26).
- Analysis is ongoing, but we can share some early findings below.

What we are hearing so far

- Some older people are proficient, full-time hearing aid (HA) users, motivated by a variety of external and internal factors. They have the physical and mental capacity and skills to manage their HAs easily but still rely on other strategies such as lip-reading and subtitles.
- Others struggle to use their HAs and lack the support, know-how or motivation to optimise their use. Sometimes they give up because the challenges outweigh the perceived benefit.
- Follow-up appointments are expected to be patient initiated, but there is no set schedule or reminders. Some patients don't go, despite having questions or issues with their devices.
- Smartphones as HA control devices are inconvenient. Some people don't own one, choose not to use one regularly, or find them difficult to navigate or manually handle.
- Hearing loss as a problem can be viewed as secondary to 'health' problems amongst those who have multiple health conditions.
- Knowledge of supportive technology is limited and use of it more so. Many older people with frailty prefer low tech solutions to their day-to-day hearing loss challenges.

"Yes, they leave it to you, you know, it's up to you, because sometimes when I've gone they say, "We haven't seen you for a long time" (female, 89)

"Some of the things it can do you need an App, and I can't use a smartphone [..] because my fingers have lost sensitivity" (female, 87)

"They're two different things [health problems and hearing], and one doesn't affect the other" (male, 85)

"I find my wife doesn't want to help me really, because she said I shouldn't have a hearing problem to start with, so she finds all this very irritating" (male, 86)

"If it does not have subtitles on I'm going to get a nod from that chair [wife] within five minutes, and it's off" (male, 85)

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