

Accessibility of Audiological Services for Culturally and Linguistically Diverse Communities: A Systematic Review

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BASIC AND TRANSLATIONAL RESEARCH

Abstract

- 1 in 5 people have hearing loss
- Higher rates of hearing loss and lower use of hearing services are seen amongst migrants,.
- Globally, migrant populations are increasing
- Problems with access to hearing health care represents a challenge to sustainable development goals in education, employment, and health.

We conducted a systematic literature review to identify barriers and facilitators to accessing and utilising hearing health services for migrant adults and children across the globe and reported them according to Levesque et al's (2013) conceptual framework for access to health care.

Méthodes et Matériels

- Systematic literature search for articles related to accessing audiology and ethnically diverse communities.
- Descriptive synthesis of articles around barriers and facilitators to accessing hearing services.

Références

- Levesque, J.-F., Harris, M. F., & Russell, G. (2013). Patient-centred access to health care: conceptualising access at the interface of health systems and populations. *International Journal for Equity in Health*, 12, 1-9.

Résultats

Most studies explored hearing healthcare in the USA, Australia, Canada and South Africa. Key barriers and facilitators are outlined below:

- **Personal barriers:** health literacy, health beliefs, stigma and denial, prioritising family needs, place of residence, insufficient finances, poor internet skills, time constraints, and language barriers.
- **Environmental barriers:** location of services, limited interpreters and translated materials, lack of cultural responsiveness experience and training for clinicians, lack of referrals from other health professionals, and direct and indirect costs.
- **Facilitators:** greater awareness of hearing loss impact, information available in languages other than English, outreach, and community health workers engaging with migrant communities.

Conclusion

Perception of hearing loss, need to seek help, and utilisation of services and treatments were hindered by lack of information, language barriers, and stigma. Ability to pay to access specialist services and needed interventions was also reported extensively in the literature. Key facilitators identified included training of clinicians in cultural competency, working with interpreters, and utilising community health workers to overcome barriers of approachability, availability, affordability, and appropriateness.

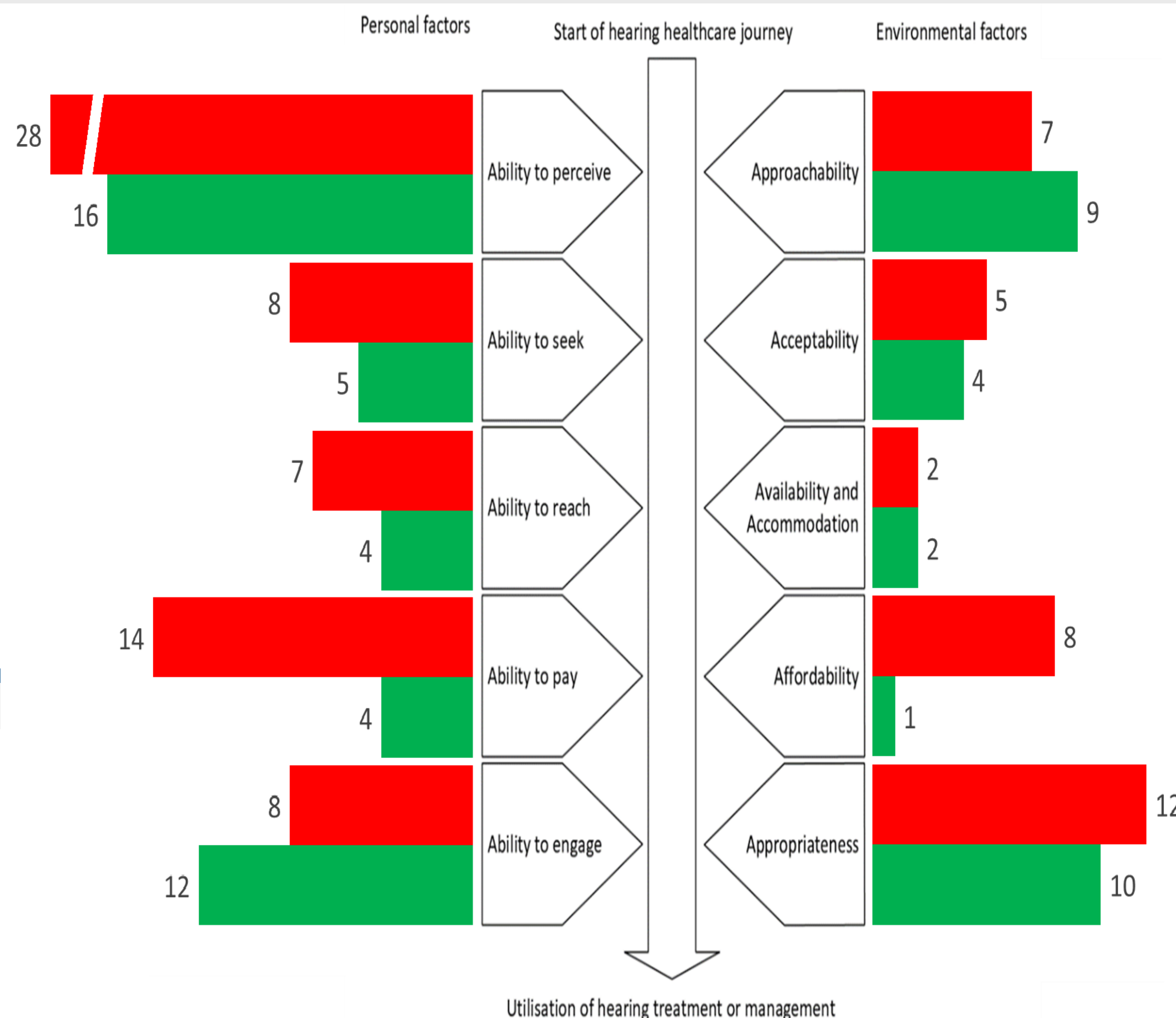


Figure 1. shows the number of mentions mapped to each domain. **Barriers** and **Facilitators** for accessing hearing healthcare were identified at every stage of the hearing health journey, as outlined by Levesque's conceptual framework for access to health care (2013)

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