

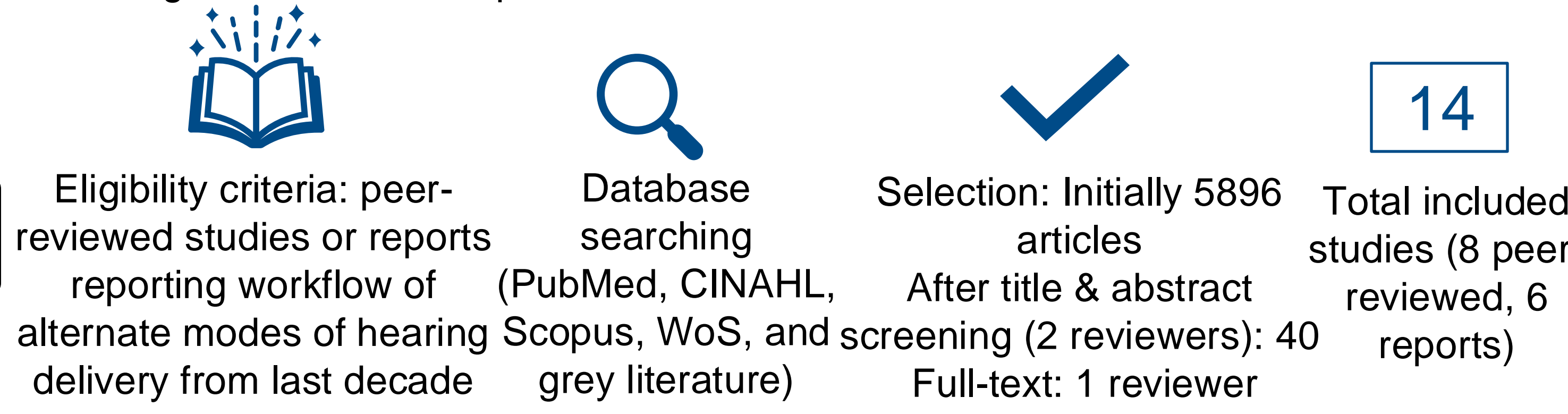
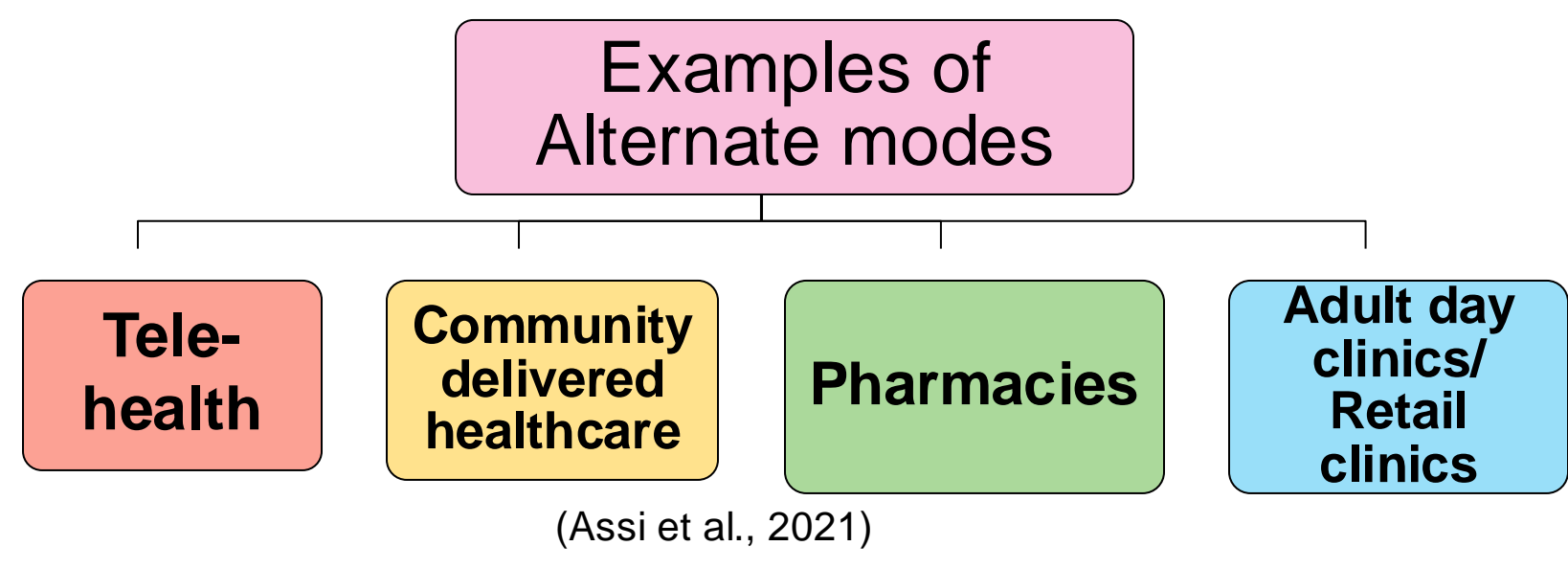
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BACKGROUND

- ❖ Despite the growing need, hearing aid adoption remains low due to high costs, limited insurance coverage, and lack of resources like transportation and guidance from healthcare providers (1,2)
- ❖ These barriers exist even in countries with insurance coverage for the majority of individuals (2)
- ❖ Emerging alternate service delivery models hold promise in addressing these disparities, but they are still under-researched and face their own set of challenges (3)
- ❖ This study is an initial approach to explore the barriers and opportunities in this alternate modes of hearing service delivery.

METHOD

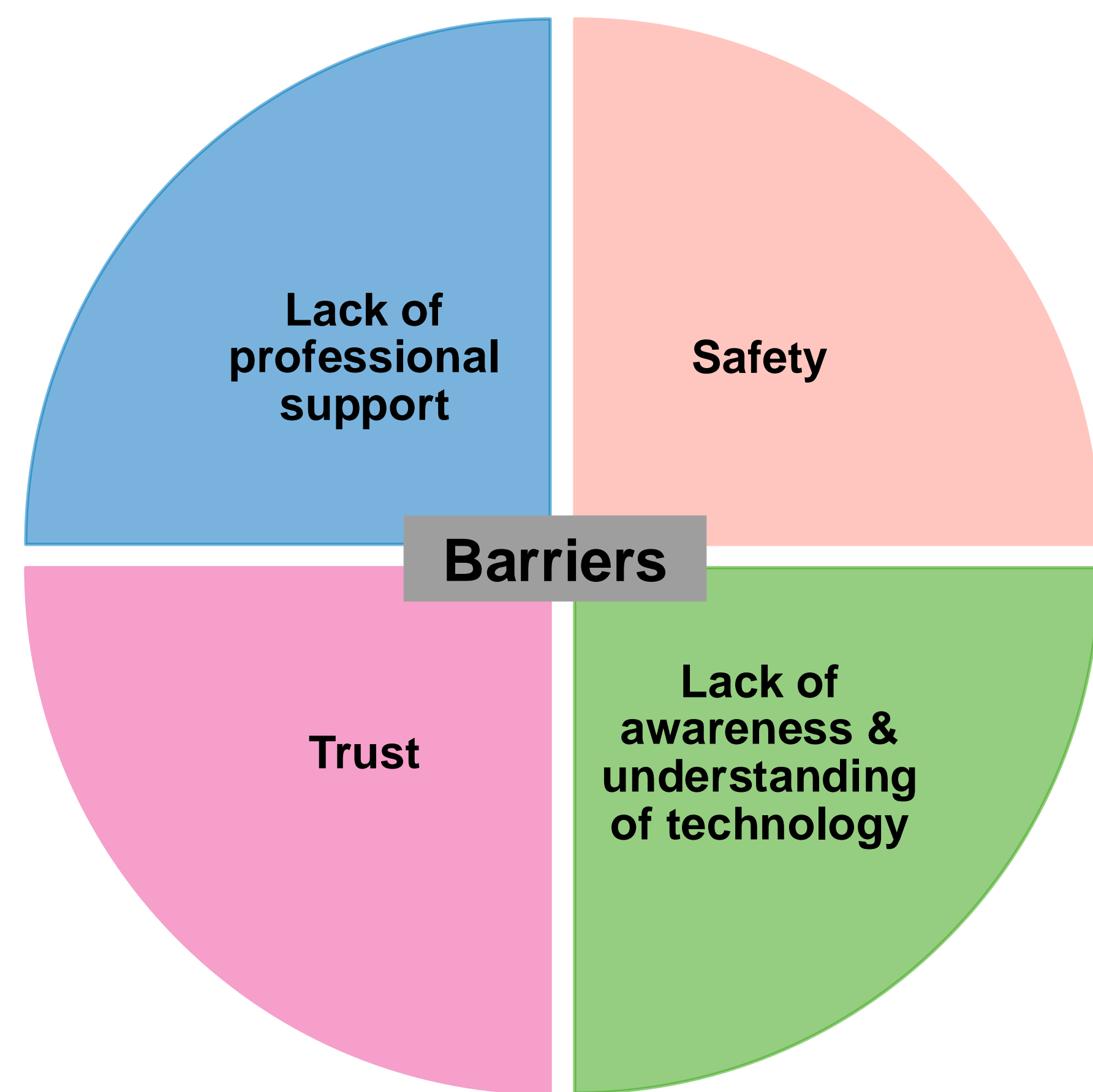
We conducted a comprehensive scoping review of published literature adhering to the PRISMA-ScR guidelines. The steps are illustrated below:



RESULTS

Integration into existing clinical practice (Join with local Hearing Health Professionals to help in identifying “red flag conditions”)
Interprofessional practice (Train other healthcare professionals)

Integration into clinical practice (HHP recommendation)
Interprofessional practice (Local healthcare professionals help)



Integration into existing clinical practice (Engaging HHPs helps address safety concerns)
Interprofessional practice (Educate patients on safe usage)

Integration into existing clinical practice (HHP educates & support patients who opt this model)
Interprofessional practice (Training for other healthcare professionals)
Patient Education (Patient education workshop)

CONCLUSION

- ❖ This study highlights key barriers and opportunities in alternate modes of hearing service delivery, providing a foundation for future research.
- ❖ By understanding these barriers and leveraging opportunities like professional integration and patient education innovative solutions can be developed by taking a crucial step towards making hearing services more accessible and effective globally.
- ❖ Future directions: Stakeholder perspectives, developing hybrid models to involve other professionals and provide holistic rehabilitation.

REFERENCES

1. Assi, L., Reed, N. S., Nieman, C. L., & Willink, A. (2021). Factors associated with hearing aid use among Medicare beneficiaries. *Innovation in Aging*, 5(3). <https://doi.org/10.1093/geroni/igab021>
2. Tsimpida, D., Rajasingam, S., Panagioti, M., & Henshaw, H. (2023). The leaky pipeline of hearing care: primary to secondary care evidence from the English Longitudinal Study of Ageing (ELSA). *International Journal of Audiology*, 63(5), 349–357. <https://doi.org/10.1080/14992027.2023.2186814>
3. Willink, A., Assi, L., Nieman, C., McMahon, C., Lin, F. R., & Reed, N. S. (2021). Alternative pathways for hearing care may address disparities in access. *Frontiers in Digital Health*, 3. <https://doi.org/10.3389/fgth.2021.740323>

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