

Clinician perspectives on barriers to hearing instrument uptake and how they might influence decision making.

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Objectives: This study expands on a previous study exploring barriers clinicians cited as impeding patients from adopting hearing instruments. It explores clinicians' perspectives on patients' decision-making about hearing instrument adoption.

Background: Despite well documented risk factors associated with untreated hearing loss, delays in hearing instrument acceptance are lengthy and hearing instrument penetration rates remain low. There is sparse research exploring clinician's perspective on patients' reasonings about hearing instrument adoption. A better understanding of clinicians' perspectives may inform efforts toward patient centered care, clinician training and promotion of earlier acceptance of hearing instruments.

Methods: 10 of 19 clinicians involved in the previous study were interviewed by telephone and asked to describe their approach to communicating recommendations and their perspectives on patients' decision-making processes. These interviews were transcribed verbatim and analyzed using a thematic analysis approach. Codes and themes were related to major clinician ascribed barriers to hearing instrument uptake, determined in the previous study, such as "consulting with significant others", "cost" and "denial."

Results: According to clinicians, patients' significant others could contribute to both acceptance and resistance towards hearing instrument adoption. Clinicians believed cost was the biggest barrier to hearing instrument adoption and related cost to denial and hesitation towards hearing instruments. Some clinicians saw denial as a conversation closer while others delved deeper.

Conclusions: Our findings echo prior research that supports including significant others in appointments while addressing instances in which significant others were both supportive and unsupportive of hearing instrument adoption. While cost was seen by clinicians as a barrier to hearing instrument adoption, our research suggests this perspective might defer deeper examination of why people hesitate to purchase. Similarly, denial is often left unpacked by providers and further could identify opportunities to better understand patients' needs and goals.