

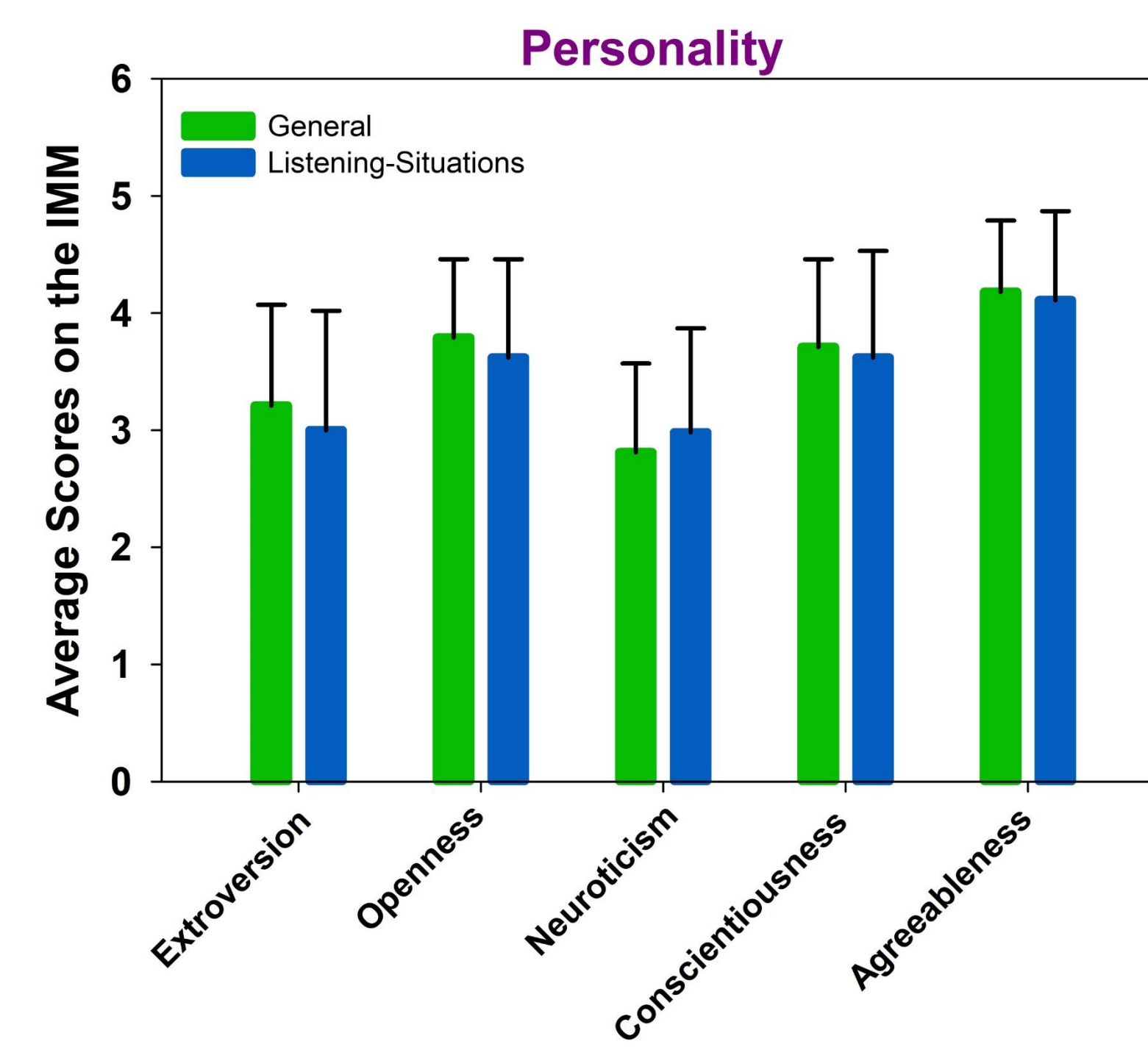
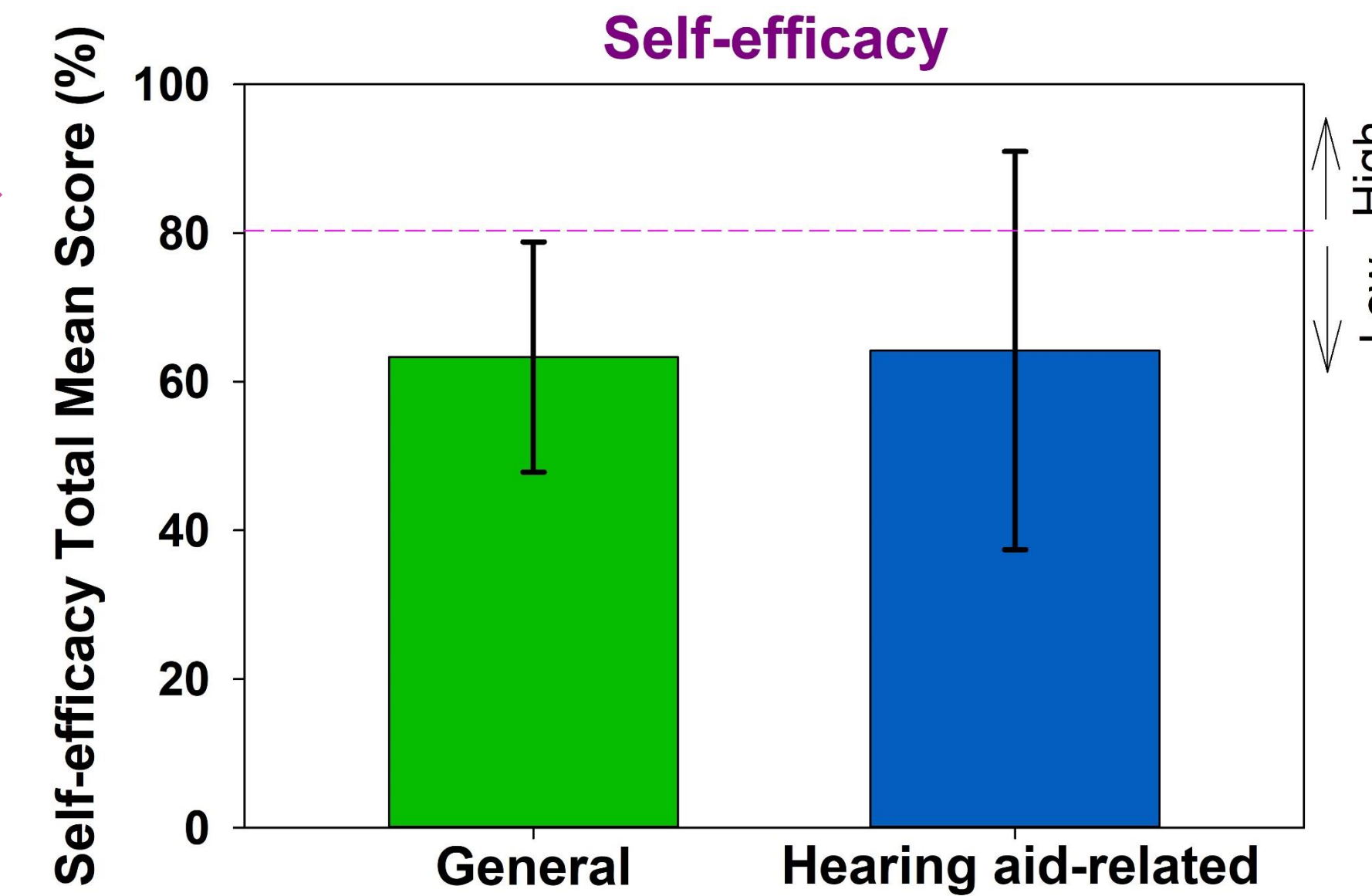
## AUDIOLOGIC INTERVENTION

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Presented at the Annual Meeting of the American Auditory Society, February 2022

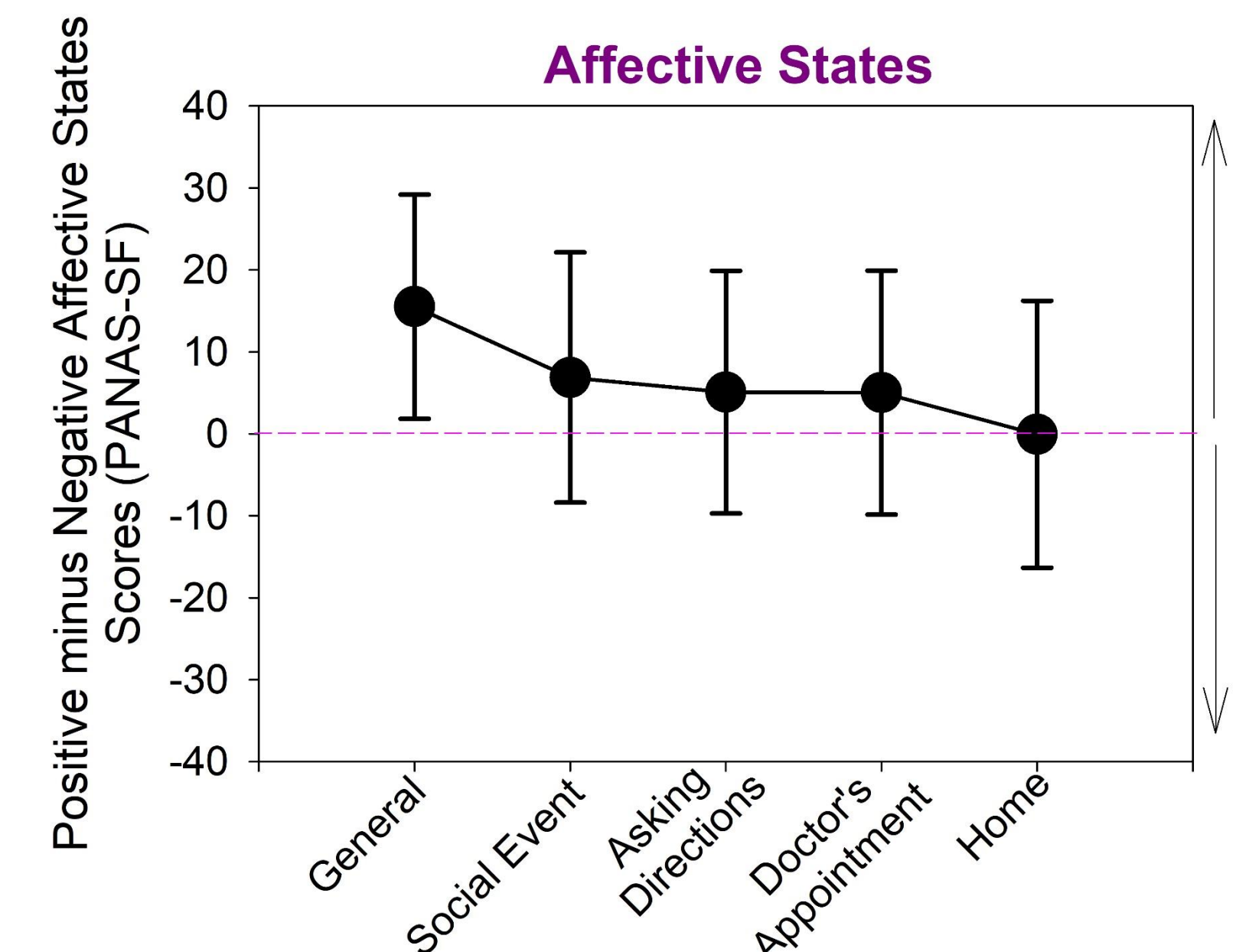
### Step 1. Comparing reported patient traits in general and listening situation-dependent contexts.

- On average, participants reported self-efficacy lower than the established cutoff (80%; West & Smith, 2007).
- Paired *t* tests showed no significant differences in the average scores of general and hearing aid self-efficacy ( $t=-.46, p=.65$ ).

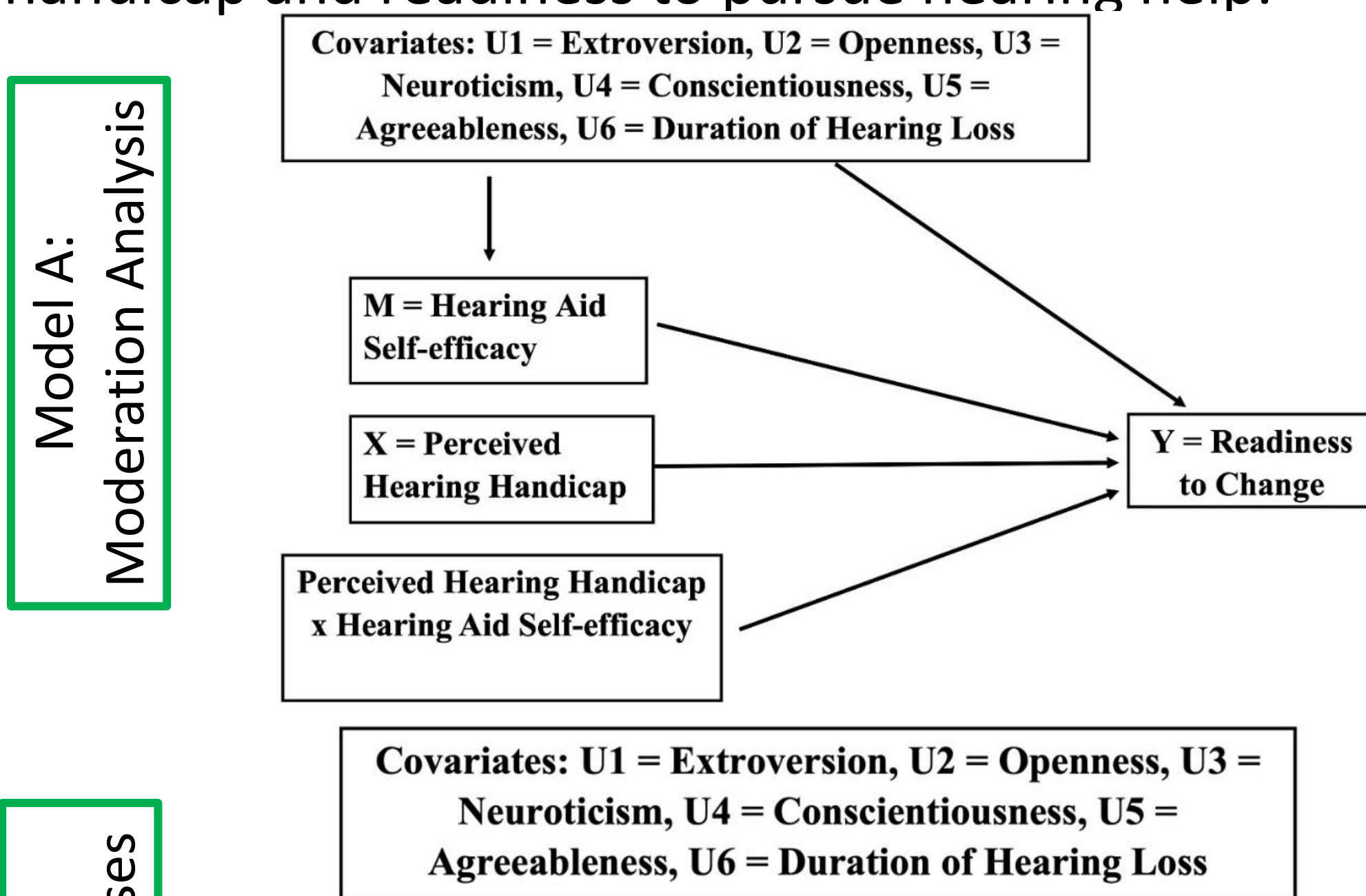


- Paired *t* tests with Holm Sidak corrections showed no significant differences in the average scores of general and situation-dependent scores for any of the personality traits ( $p>.05$ ).

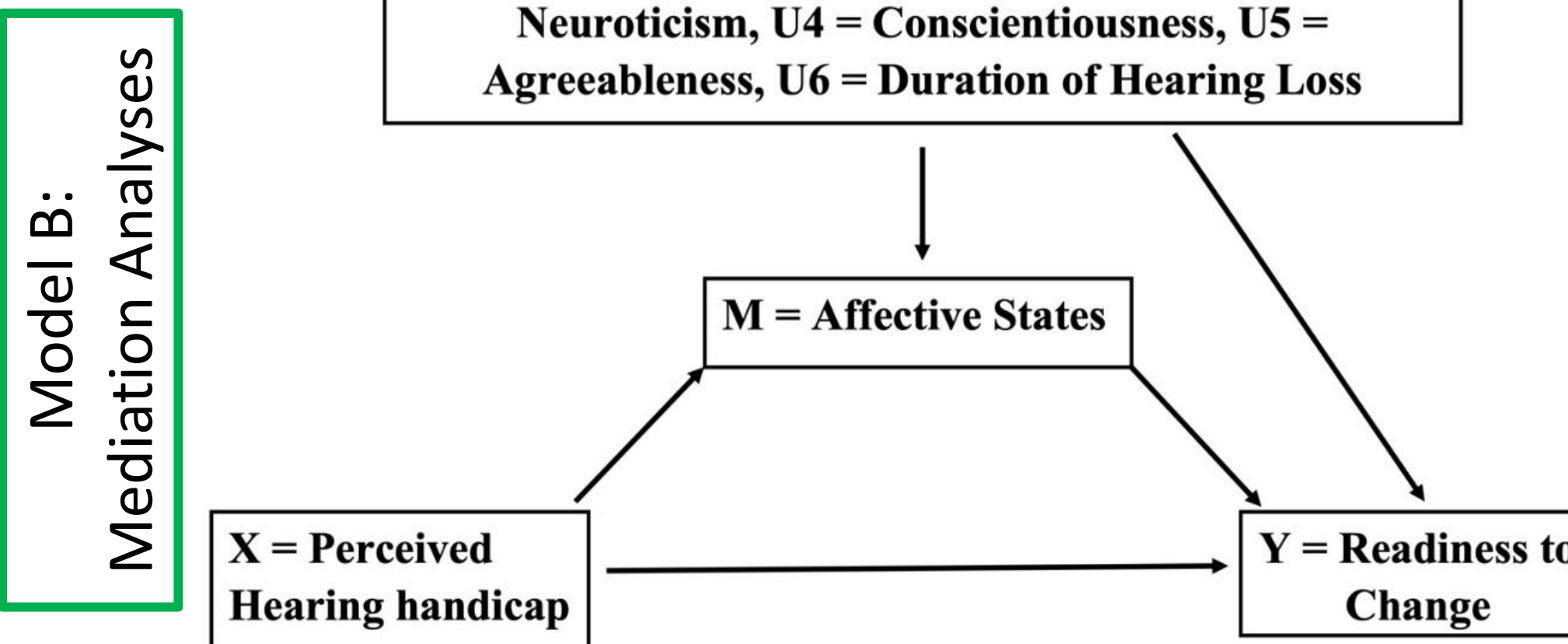
- On average, participants reported more positive affective states in general compared to in the four listening-related situations.
- Repeated measures with Holm Sidak corrections demonstrated that reported affective state:
  - “In General” was significantly more positive than affective state in all the four listening situations ( $p<.001$ ).
  - “At home” was also significantly less positive than for the other listening situations ( $p<.001$ ).



### Step 2. Identifying significant predictors of readiness to pursue audiology intervention and exploring impact of modifiable patient traits on the relationship between perceived hearing handicap and readiness to pursue hearing help.



- Perceived hearing handicap ( $t=7.24, p<.0001$ ), HASE ( $t=2.30, p=.03$ ), Agreeable personality trait ( $t=2.17, p=.03$ ), and duration of hearing loss ( $t=-2.35, p=.02$ ) were significant predictors of readiness.
- Hearing Handicap\*HASE = Not significant ( $p=.81$ ).



- Perceived hearing handicap ( $t=7.93, p<.0001$ ), Conscientiousness personality trait ( $t=-2.53, p=.01$ ), and duration of hearing loss ( $t=-2.76, p=.01$ ) were significant predictors of readiness.
- Bootstrapped confidence intervals for potential mediators' indirect effects demonstrated that none of the affective states were significant mediators of the X-Y relationship.

### Results and Discussion

#### Q.1. When traits were assessed with general and listening situation specific measures, did adults with hearing loss report different:

- Self-efficacy? No.**
  - General and hearing aid self-efficacy were not significantly different. Our participants were in the early stages of their hearing health journey. In these stages, general self-efficacy is more relevant (Rapley & Fruin, 1999) and is correlated with HASE (Dullard, 2014). It is of interest to explore how these associations might vary for those in later stages.
- Personality? No.**
  - Personality traits were not perceived as significantly different in different contexts. This supports the claim that personality is stable over time (Bouchard & Loehlin, 2001).
- Affective States? Yes.**
  - Our participants reported significantly less positive affective states in listening situations compared to general life. This likely reflects the negative psychosocial impact of hearing loss (Picou et al., 2018).

#### Q.2a. Did these patient traits predict readiness to pursue audiology intervention? Yes, but significant predictors varied.

- Both models A and B were able to explain a significant amount of variance in readiness to pursue hearing help (Model A = 58%, Model B = 64%). In both models, individuals with greater hearing handicap and who had their hearing loss for a shorter duration were more ready to pursue hearing help. When HASE was included in model A, having higher HASE and higher Agreeable personality trait scores also independently predicted readiness. When HASE was removed and affective states were considered in Model B, lower Conscientiousness personality trait scores added to the model. This trait has been shown to co-occur with negative emotions (Mill et al., 2018) and our participants reported more negative emotions in listening-related situations.

#### Q.2b. Did HASE and affective states have an impact on the relationship between perceived hearing handicap and readiness to pursue hearing help? No.

- Model A (Moderation analysis) demonstrated that the relationship between hearing handicap and readiness didn't change as a function of HASE, when controlling for personality traits and duration of hearing loss.
- Model B (Mediation analyses) demonstrated that the relationship between hearing handicap and readiness could not be explained by their relationships with affective states, when controlling for personality traits and duration of hearing loss.

### Conclusion

- This study confirms that self-efficacy, certain personality traits, and duration of hearing loss are important variables that motivate people toward or away from becoming successful in their hearing health journey. This study also suggests that context-specific measures of these traits are not required to accurately assess the impact of these characteristics in the early stages of the hearing health journey.
- Future research should explore the associations among these patient traits and their impact on success at different stages of the hearing health journey to determine if an assessment of these factors is warranted.

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