



Connecting Adults with Hearing Loss And Their Communication Partners: Isolation To Communication

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Abstract:

As baby boomers enter the late adulthood stage of life, hearing loss continues to be one of the most prevalent chronic and isolating conditions facing older adults today. While research has focused on the negative consequences of hearing loss on the health and well-being of the person with hearing loss (PHL), it is equally important to recognize that hearing loss also leads to communication loss. The resulting social isolation of the PHL and the collateral effects of hearing loss on the communication partner (CP) is the focus of this mixed-method study that explores the hearing loss-related quality of life (HLQoL) of both PHLs and their CPs. Cognitive and HLQoL assessments were completed with the four couples (4 PHLs and 4 CPs) prior to conducting in-depth conjoint interviews using a 40-item content-valid questionnaire. A phenomenological approach was used to learn more about the participants' lived experience of their HLQoL. Assessments revealed that CPs significantly ($p = .011$) underrated their PHL's activity limitations and participation restrictions compared to their spouses' ratings. Six overarching themes with related thematic categories emerged from the analysis, presenting salient features of the HLQoL experience of both PHLs and their CPs: (1) Gradual Hearing Loss is Not Visible: Double Stigma of Aging and Hearing Loss, (2) Change is Difficult: Communication Conflicts Associated with Hearing Loss, (3) Learning as We Go Along: Communication is Challenging, (4) Being in the Same Room: Communication Advocacy and Support, (5) It Is What It Is: Hope and Resiliency, and (6) The Elephant in the Room: Benefits of the Interviews. The findings suggest that the participants' journeys have been shaped by the challenges of living with communication loss as exacerbated by hearing loss. The participants remarked that the interview process served to increase their awareness of needed communication strategies to reduce social, emotional, psychological, and communication isolation, and improve HLQoL.

