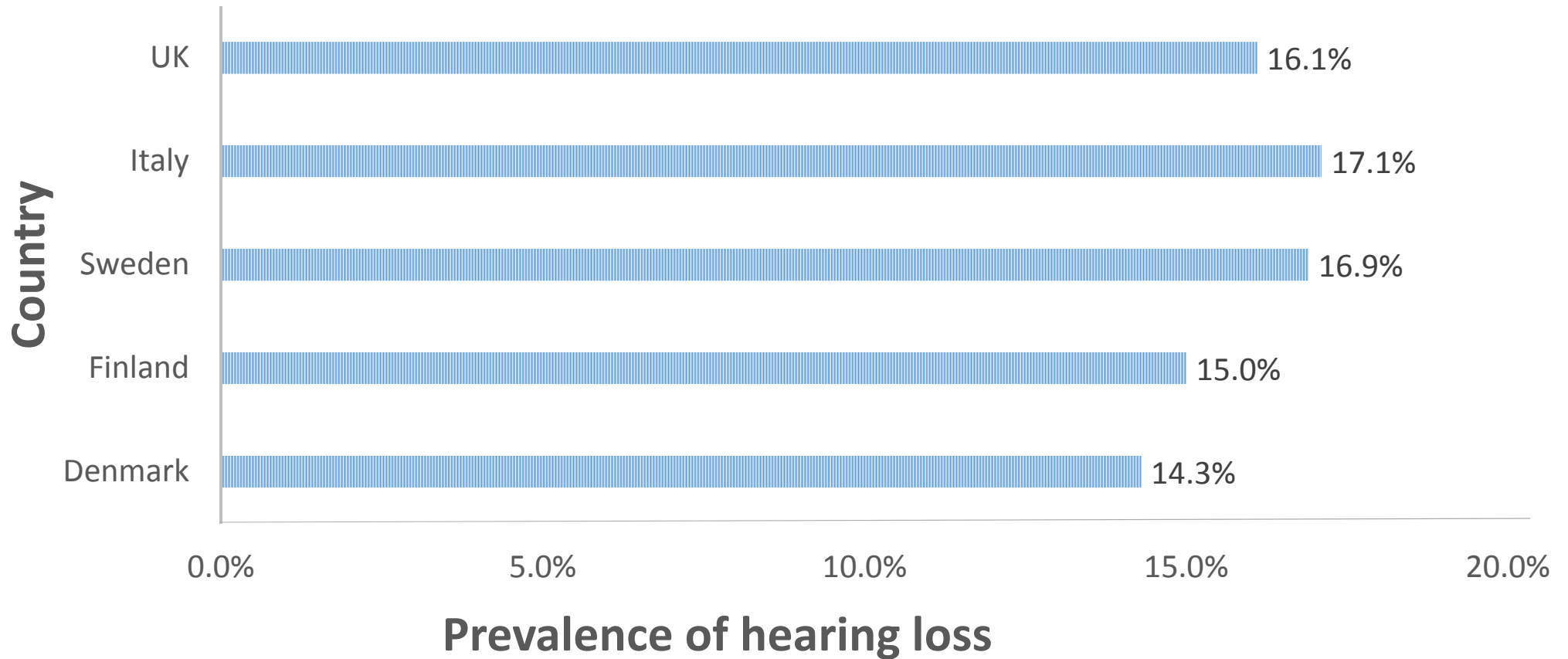


Does deprivation affect access to  
health care services for hearing  
impairment?

# Hearing loss in UK adults



## Hearing health inequalities

*Higher incidence of hearing loss among;*

- *Men*<sup>6-9</sup>
- *Persons with cardiovascular risk factors*<sup>10-14</sup>
- *Ethnic minorities*<sup>15</sup>
- *Persons of low socioeconomic status (SES)*<sup>6,7,13,15,16</sup>

# Relationship between SES and hearing loss

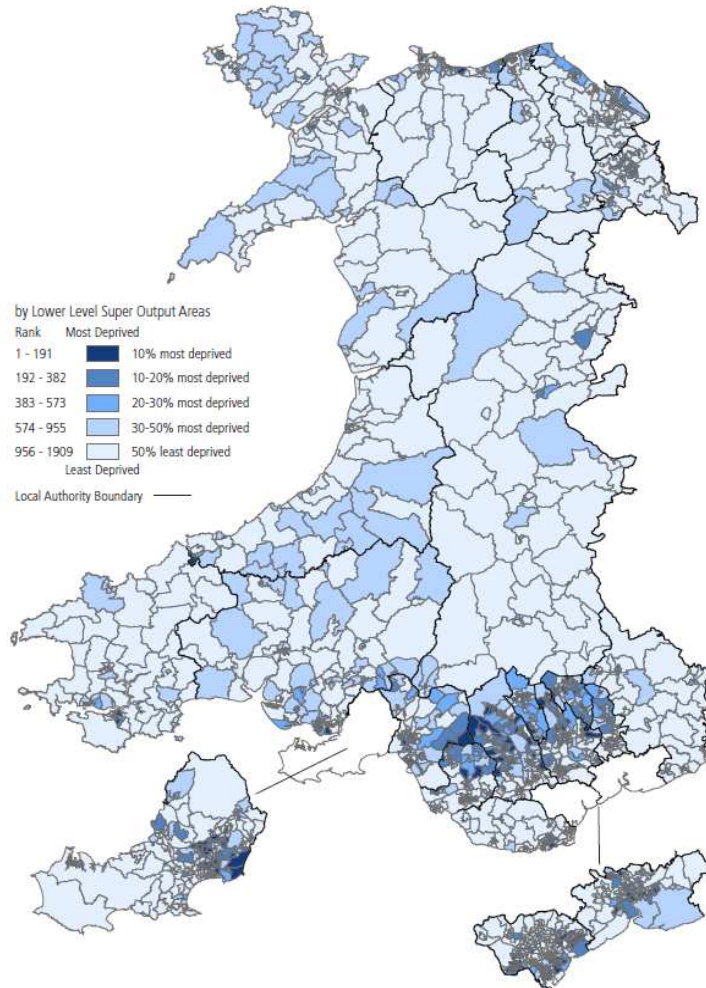
*Low SES is associated with;*

- *Unhealthy behaviours <sup>17,18</sup>*
- *Manual labour / industrial occupation <sup>19,20</sup>*

## Pilot study

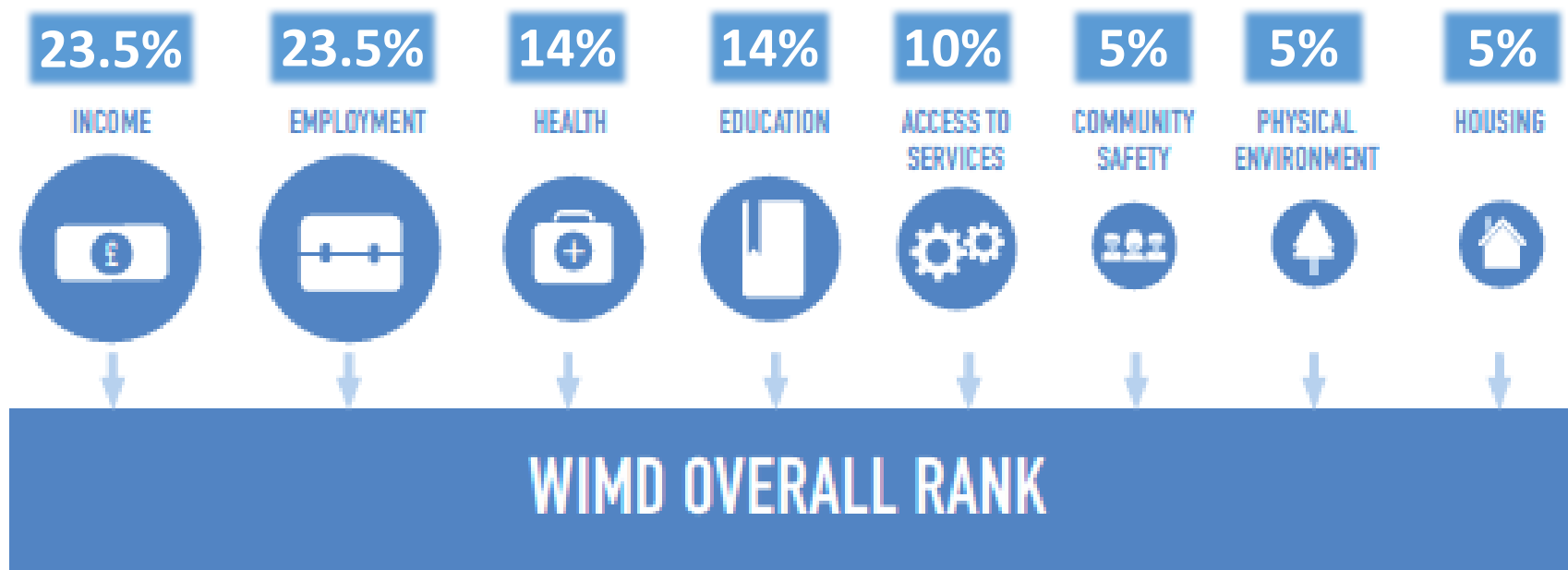
- *First hearing aid fitting appointments*
- *Retrospective analysis between 2015-18*
- *Compare by age and SES*
- *Welsh Index of Multiple Deprivation as a surrogate for SES*

# Welsh Index of Multiple Deprivation (WIMD)

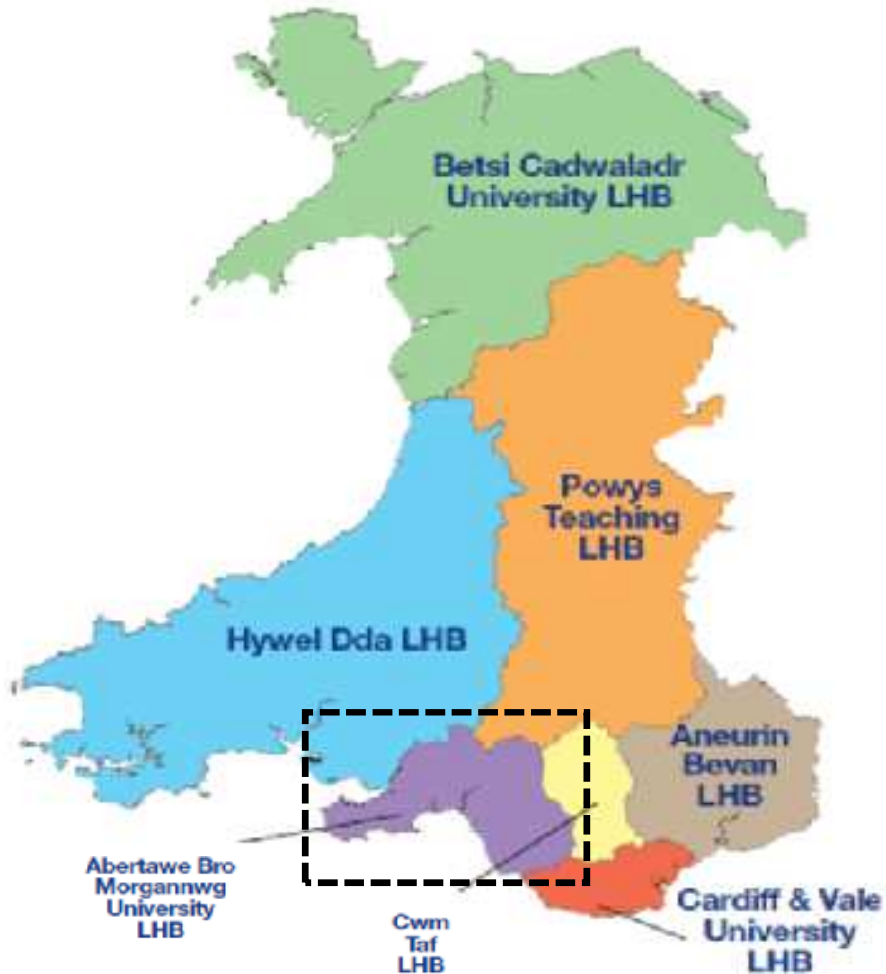


- *Lower Super Output Areas (LSOAs)*
- *1909 LSOAs in Wales*
- *Average population of 1600 people per LSOA*

# WIMD rank



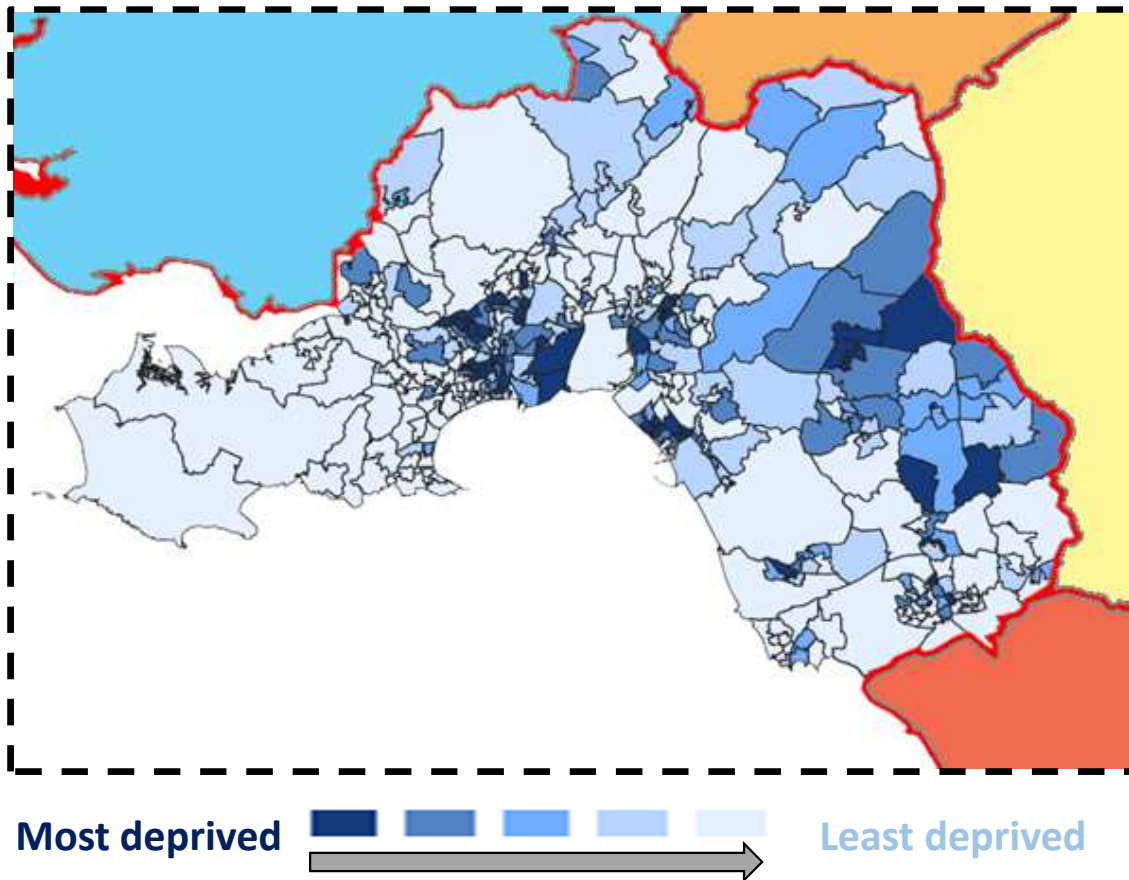
# WIMD by health board



- Seven health boards responsible for all of Wales
- Abertawe Bro Morgannwg University health board (ABMU)



## LSOAs within ABMU boundary



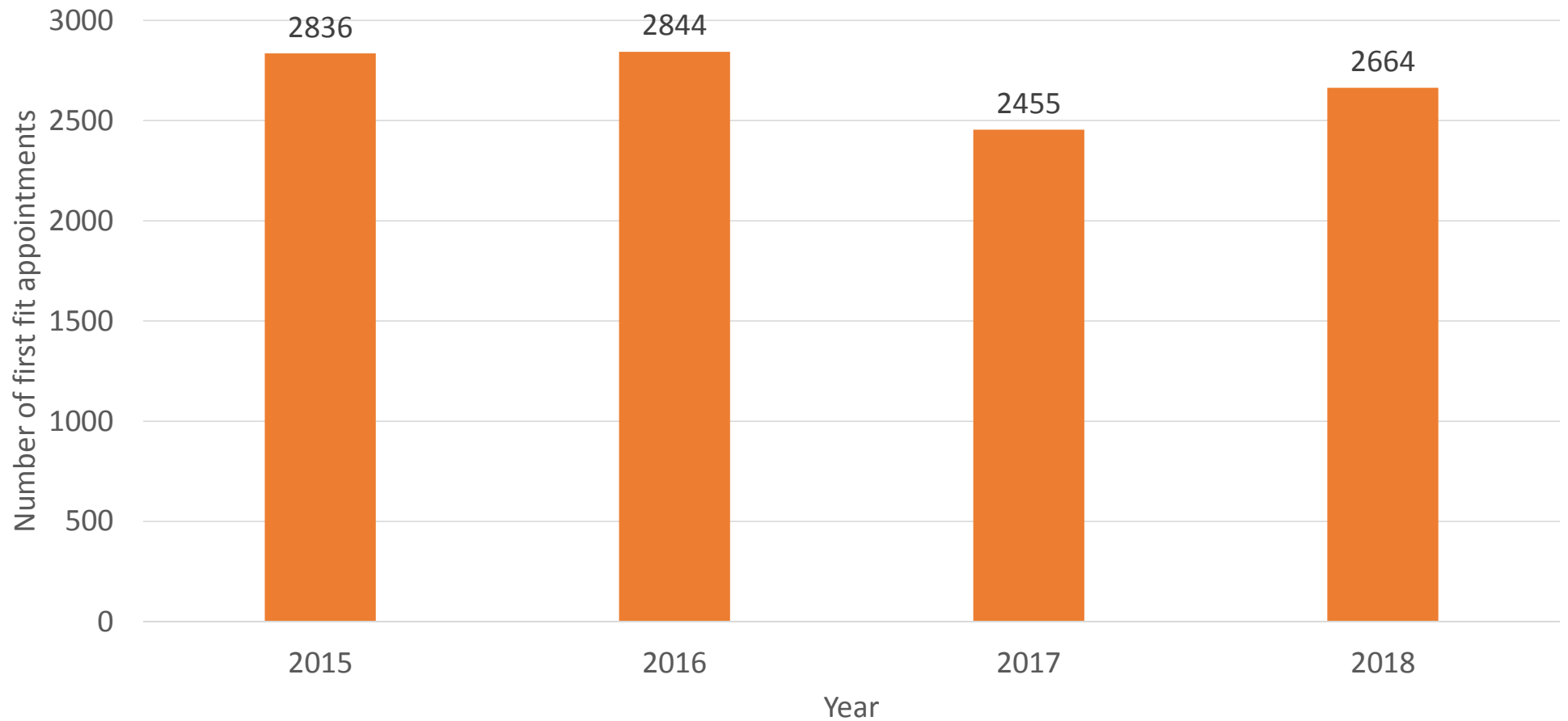
- 327 LSOAs
- *Lowest* = 6
- *Highest* = 1908

## LSOAs within ABMU boundary

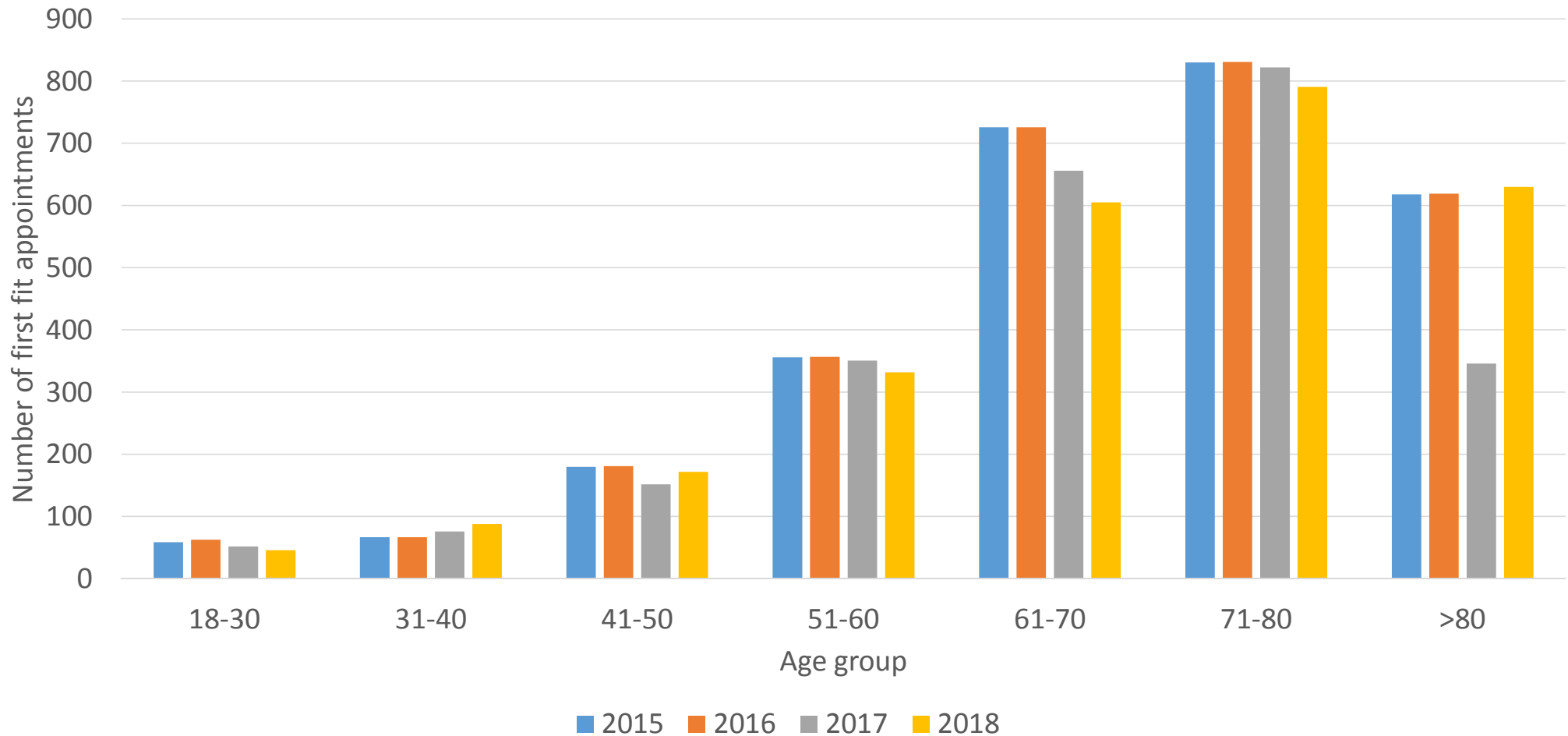
- *10 “decile” groups*
- *9 Groups contained 33 LSOAs*
- *1 Group contained 30 LSOAs*



# ABMU total 1<sup>st</sup> fit appointments by year



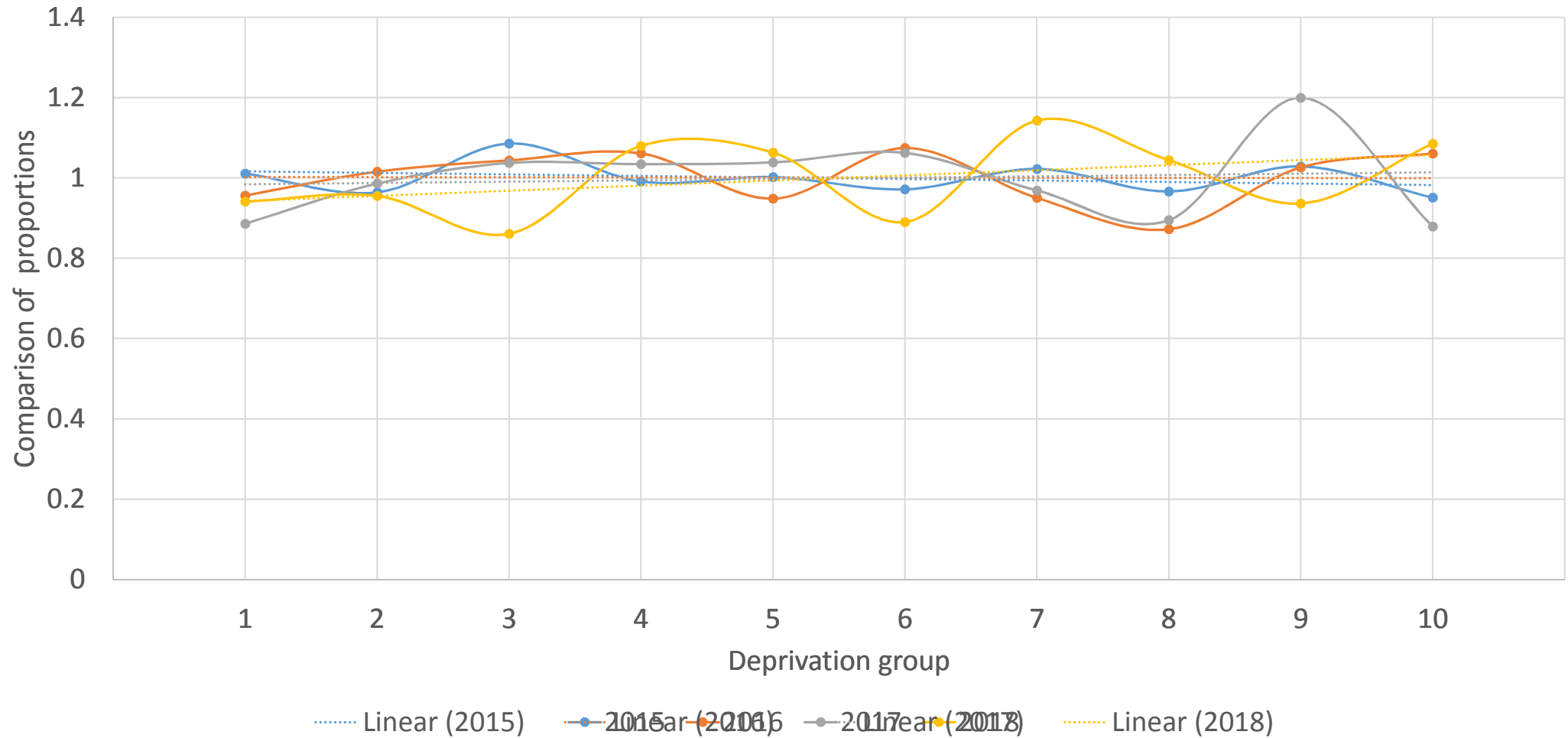
# ABMU 1<sup>st</sup> fit appointments by year & age



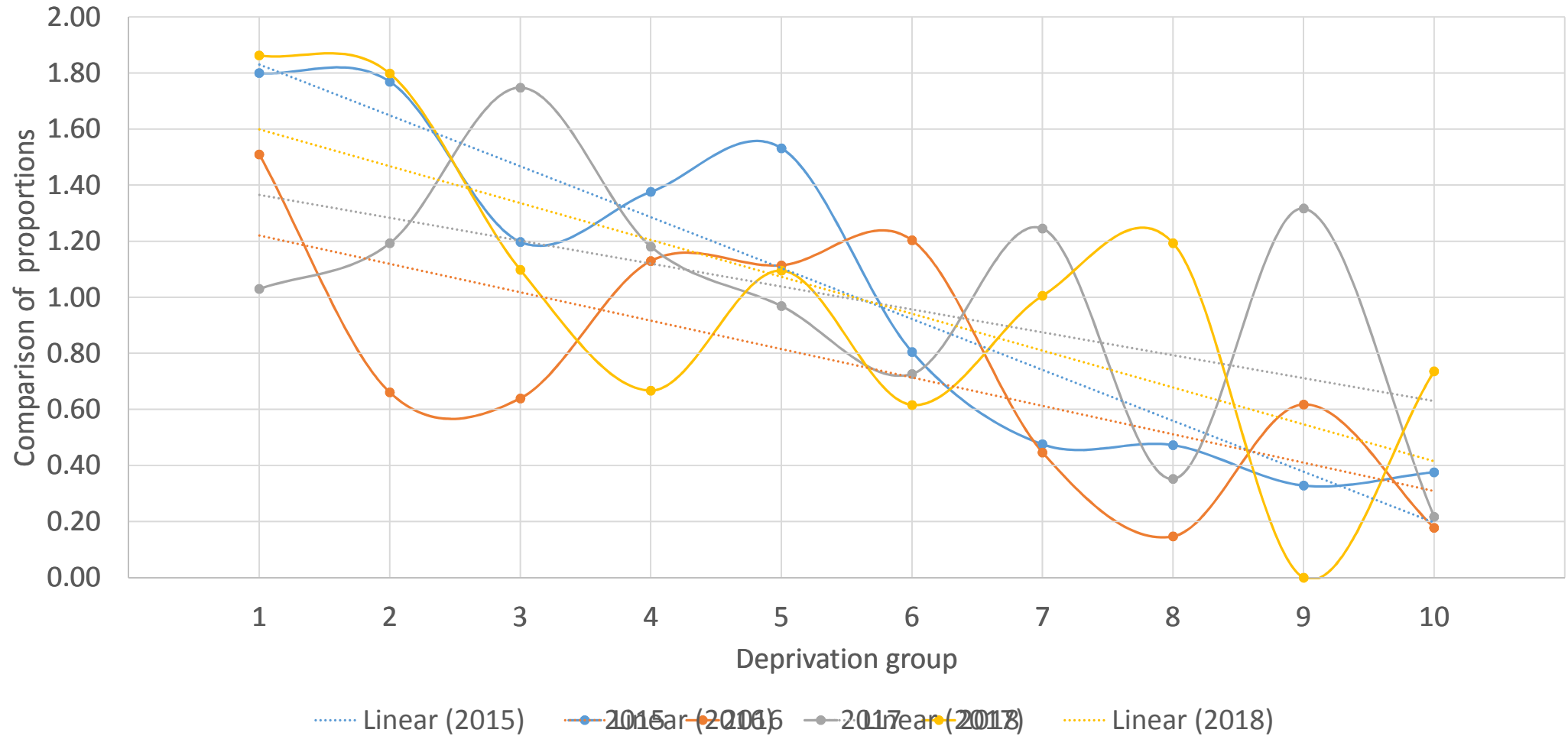
## 1<sup>st</sup> Fit appointments by deprivation group

- *Age demographics vary between LSOAs*
- *Number of 1<sup>st</sup> fit appointments alone may give skewed results.*
- *1<sup>st</sup> Fit appointment rate as a proportion of;*
  - *Population within ABMU*
  - *Population within deprivation group*

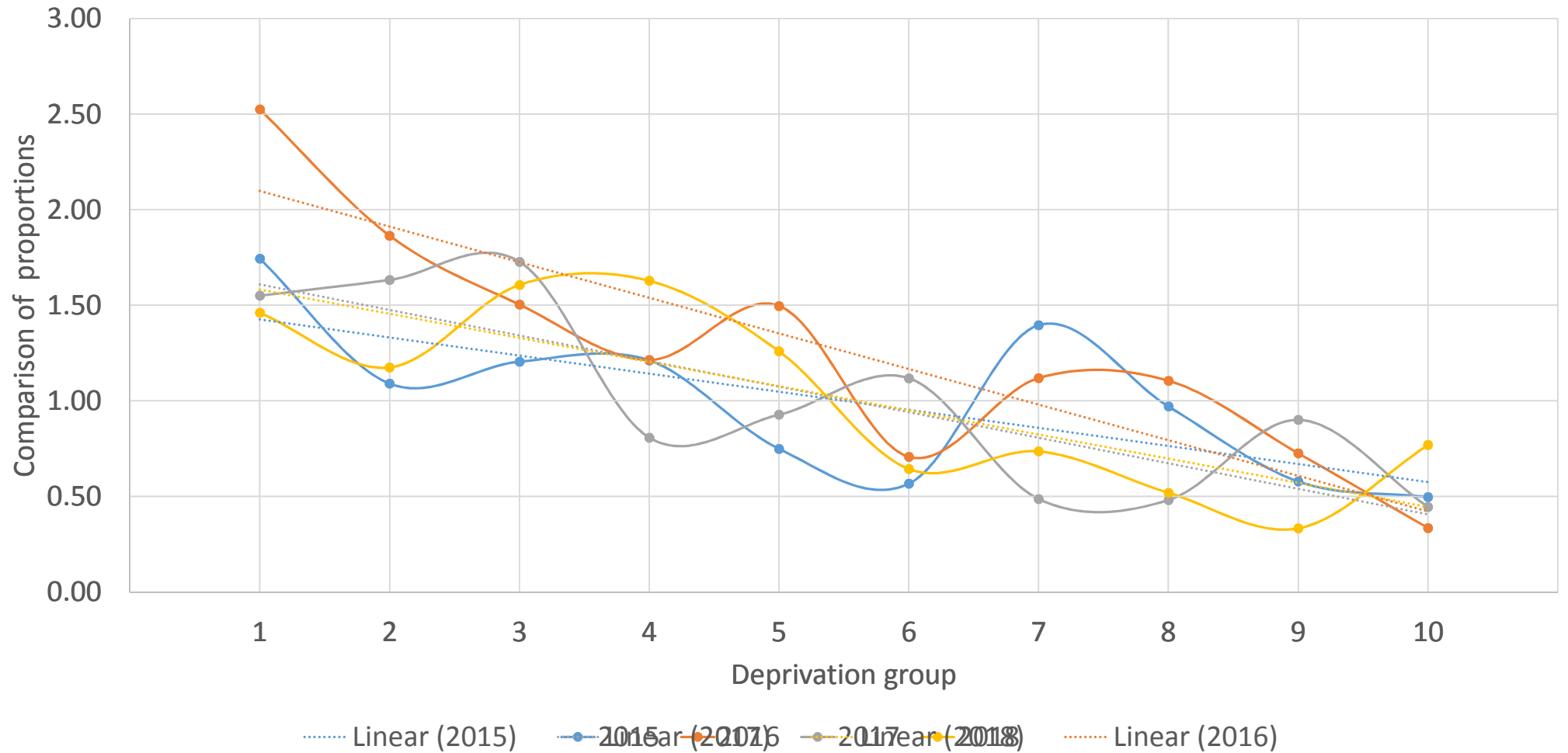
# 1<sup>st</sup> Fit appointments all adults (>18)



# 1<sup>st</sup> Fit appointments by year (18-30)

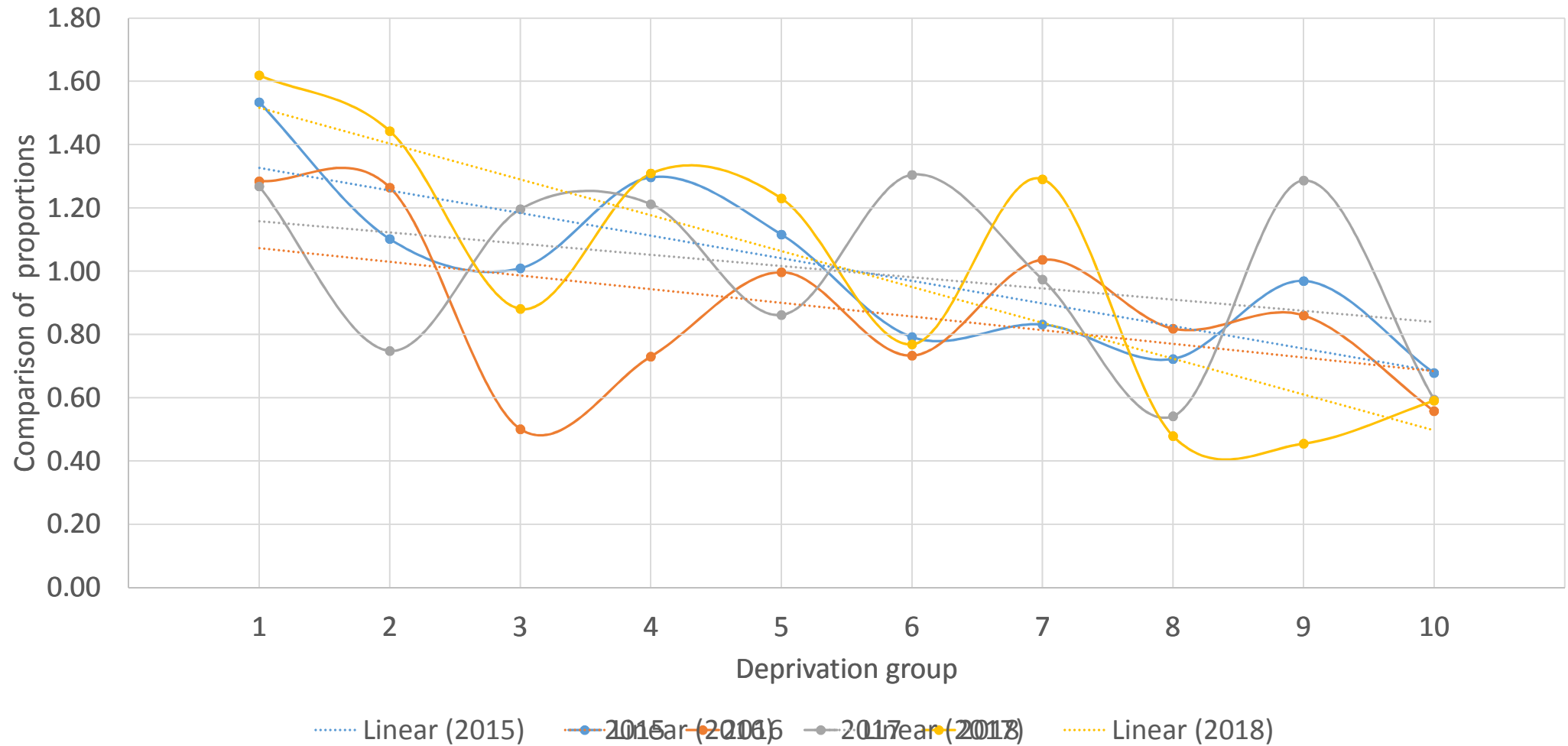


# 1<sup>st</sup> Fit appointments by year (31-40)

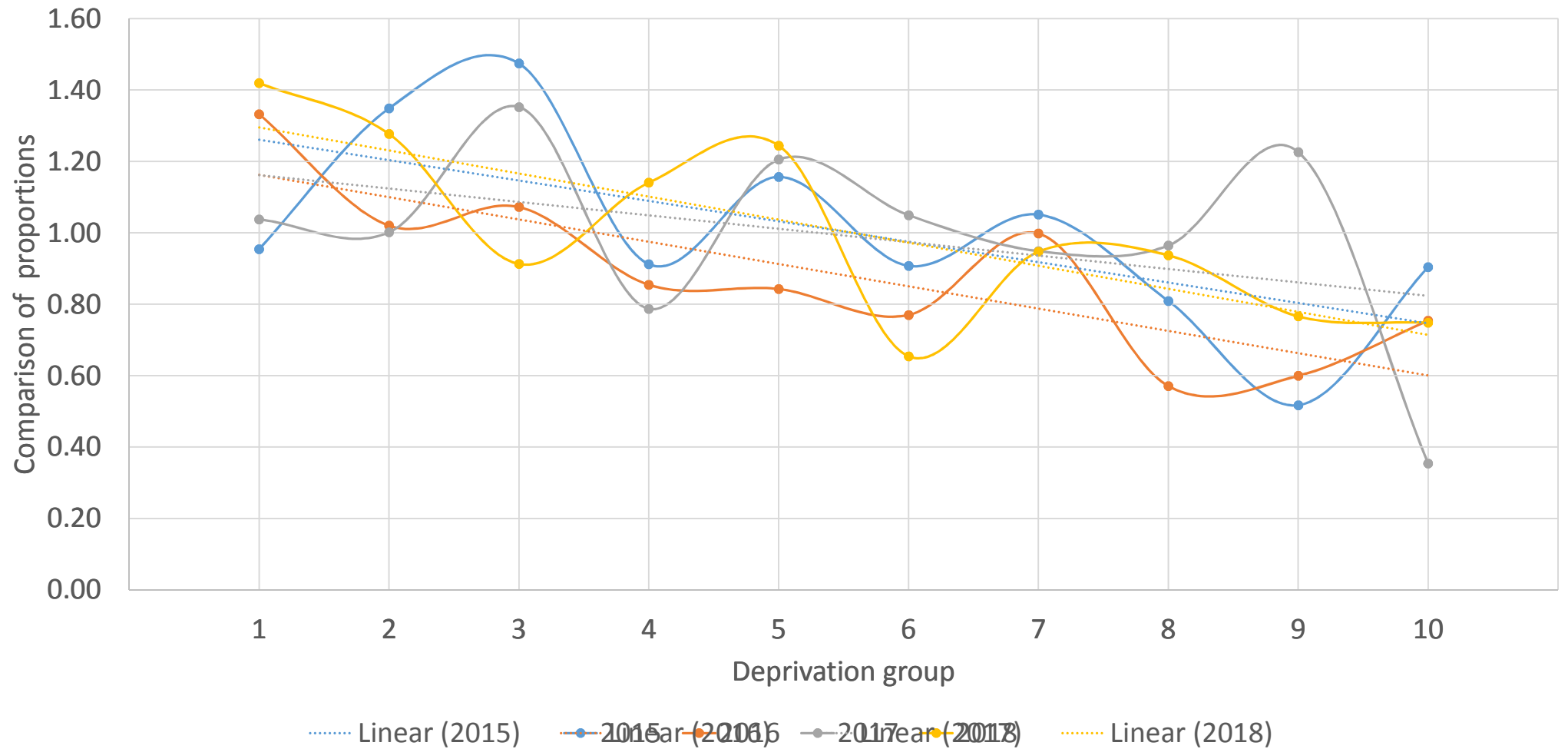




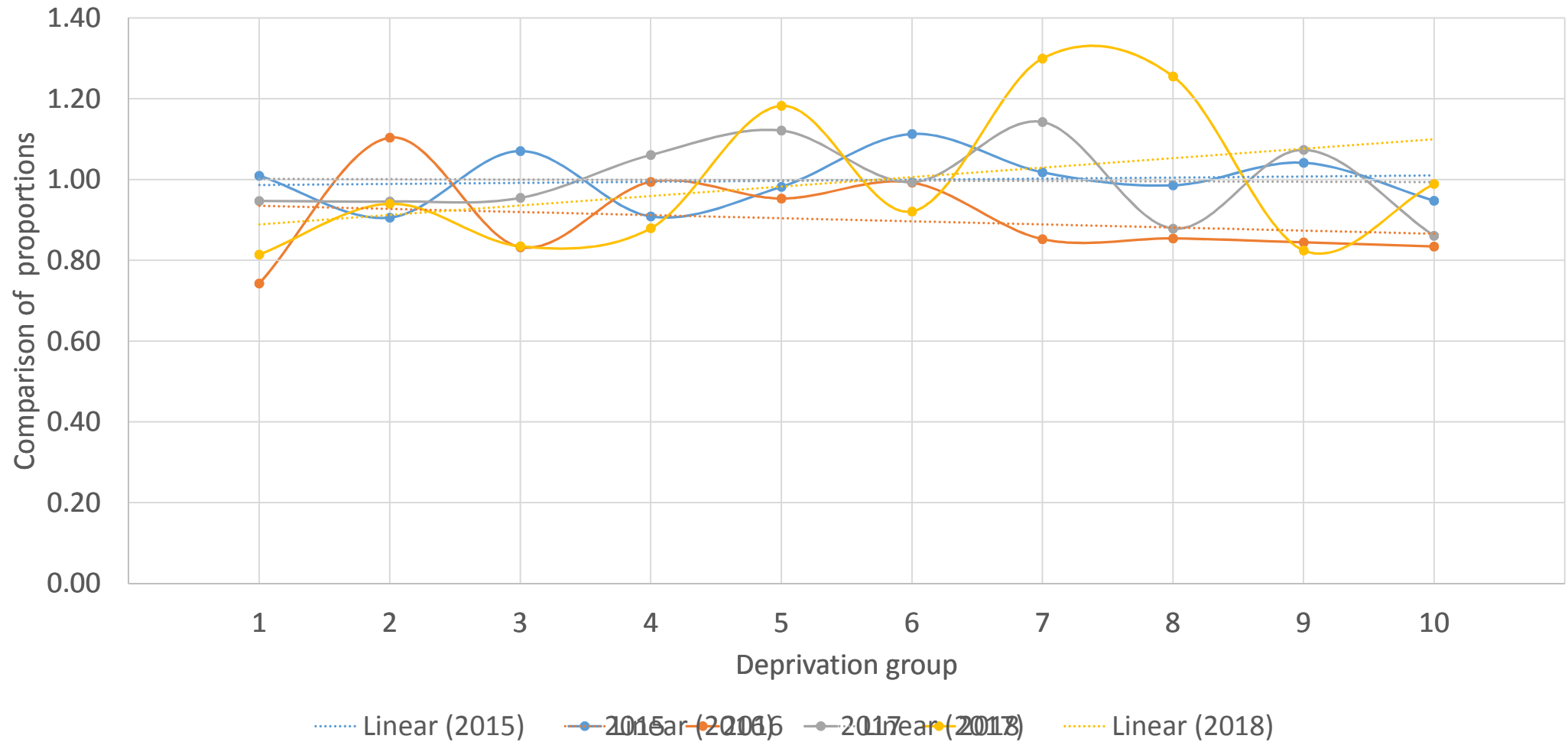
# 1<sup>st</sup> Fit appointments by year (41-50)



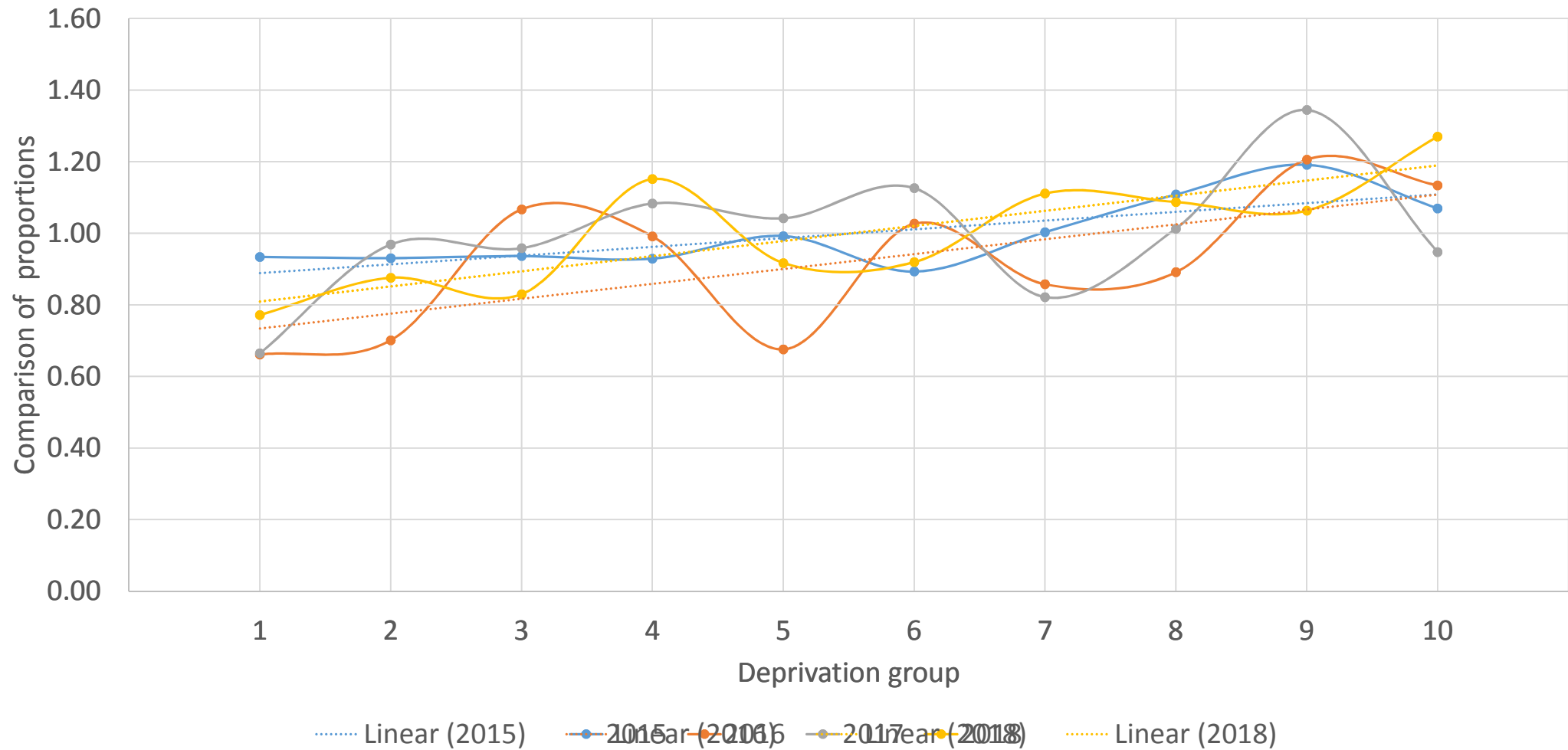
# 1<sup>st</sup> Fit appointments by year (51-60)



# 1<sup>st</sup> Fit appointments by year (61-70)



# 1<sup>st</sup> Fit appointments by year (71-80)



# 1<sup>st</sup> Fit appointments by year (>80)



## Summary of findings

- *Overall 1<sup>st</sup> hearing aid fitting appointments are being accessed evenly between deprivation groups*
- *Age of accessing hearing aids varies by deprivation group*
- *Those living in the most deprived areas are accessing interventions younger*

## Limitations

- *Are these observations statistically significant?*
- *Use of WIMD rank as surrogate of individual SES*
- *Influence of private healthcare services?*
- *No objective measures of hearing loss*

## First hearing aid fitting appointments

- *Majority of adults with a hearing loss do not wear hearing aids<sup>23-27</sup>*
- *Hearing help seeking and hearing aid use not associated with SES<sup>28,29</sup>*
- *Can we use hearing aid fitting as a proxy for significant hearing loss*



## Going forward

- *Statistical analysis*
- *Investigate hearing threshold when accessing hearing aids*
- *Investigate access to all audiology services*
- *Investigate why people living in more deprived areas appear to be accessing hearing aids younger*
- *Repeat throughout NHS trusts*

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