

What Does Public Health Mean to Audiology?

Christi L. Themann, MA, CCC-A



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What comes to mind when you hear the phrase “public health”? Clean water? Immunization programs? Health care for the underserved? ASHA

wondered how audiologists perceive “public health,” so we asked a question about it in the 2014 biennial audiology survey.

Public health is about preventing disease and promoting health among individuals, families, communities, and entire populations. All health professions have a public health component (think about programs that encourage people to stop smoking, increase exercise, or get cancer screenings). But how much do audiologists know about the scope and necessity of public health in the context of audiology practice?

A random sample of 4,000 audiologists received the 2014 survey, and 1,811 audiologists completed it. Of those, 737 answered the open-ended question, “What does the phrase ‘public health issues and audiology’ mean to you?” We used conventional content analysis to determine the key concepts in the answers. Respondents identified a range of public health concepts relevant to audiology.

- Raising awareness. This concept included two areas: (a) raising awareness about the importance of good hearing to overall health and quality of life (on a personal and societal level) and (b) increasing awareness of audiology as a profession, particularly in view of the changing landscape of health care delivery and the advent of “big box” retail/online availability of hearing aids.
- Education. Providing information to individuals about hearing risks, protective behaviors, warning signs
- Relationship to other health issues. Respondents commented on the relationship of hearing loss to a range of other health effects—including dementia and cognition, diabetes, depression, mental health, emotional balance, kidney disease, and aging processes.
- Screening. Screening programs were identified as an aspect of public health and audiology. Respondents specifically mentioned early hearing detection and intervention programs, pediatric and school-age screenings, and screenings for particular at-risk populations (e.g., people who smoke or have diabetes, and adults over a given age).
- Access to services. Issues related to access to hearing care were a



common response. Themes included underserved populations (e.g., individuals who are economically disadvantaged, who do not speak English, and those who live in geographically remote locations), direct access to audiologists, lack of insurance coverage for services, and insufficient Medicaid providers.

- Prevention. Many respondents commented on the traditional issues of occupational noise and hearing conservation programs; however, some respondents mentioned prevention in other contexts as well—such as wellness checks, community prevention initiatives, risk reduction, and balance and falls prevention programs.
- Hearing risks. Respondents noted a variety of hearing risks as related to audiology and public health, including noise (both occupational and recreational), ototoxic chemicals and medicines, and personal lifestyle choices. Noise pollution and risks from personal listening devices were frequently mentioned.
- Legislation. The role of legislation in hearing health was a common

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Person-Centered Care

Implications for Audiologists

theme. Issues included the Americans With Disabilities Act (ADA) and accessibility, the impact of the Affordable Care Act, the Health Insurance Portability and Accountability Act (HIPAA), and billing and reimbursement rules.

Survey results indicate that audiologists as a group have a broad understanding of the many issues related to public health in the profession. However, some individual audiologists may have an incomplete view of the many aspects of public health that impact our work. In addition, the number of audiologists who did not answer the question or who simply replied “I don’t know” indicates that many audiologists do not know what public health means in the context of audiology practice.

In any health discipline, prevention is better than treatment. This is particularly true in audiology. Many hearing-related issues are permanent; although hearing aids, aural rehabilitation, and other tools can be of tremendous benefit, prevention is key. Furthermore, hearing function is associated with many other public health concerns, such as dementia, diabetes, hypertension, cardiovascular disease, and depression. As audiologists, we need to fully understand how public health principles can help us help others.

ASHA has a Special Interest Group (SIG) that focuses on audiology and public health; for more information, visit the web page for SIG 8, Audiology and Public Health, (<http://www.asha.org/SIG/08/>). To find out more about the 2014 Audiology Survey, go to <http://www.asha.org/Research/memberdata/AudiologySurvey/>. ©

Christi Themann is an audiologist with the U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Institute for Occupational Safety and Health, based in Cincinnati, Ohio.

Deborah L. Berndtson, AuD, CCC-A, Associate Director, Audiology Professional Practices, ASHA

Health care in the United States has become very specialized, focusing on specific systems rather than the whole person. Using this model, when we are sick, we seek or are referred to a specialist for an ailment. The specialist is trained to treat the ailment, not the whole person. Newer models of health care delivery in the United States are shifting to a person-centered or holistic approach.

In audiology, ideally, each patient should have an individualized plan of care as a component of person-centered care. Audiologists have unique expertise that allows them to contribute to individualized plans of care for those with hearing, balance, and auditory system disorders. The goal of an individualized plan of care is to reach the desired functional outcomes identified by the person in collaboration with health professionals. The person is responsible for taking ownership of the treatment of his/her condition under the guidance of health care professionals. When the person and/or significant other(s) take ownership of care, compliance and satisfaction improve, and costs are lowered.

To practice person-centered care, audiologists must consider the whole person, taking into account the needs and desired outcomes expressed by the person. To do this best, we put the person at the center of care, often including other professionals. This approach will add value in the minds of those served. For more information on person-centered care, please visit the ASHA website at <http://www.asha.org/aud/Person-Centered-Care-in-Audiology/>. ©

Putting the Person at the Center of an Individualized Plan of Care

Audiologists have unique expertise that allows them to contribute to individualized plans of care for those with hearing, balance, and auditory system disorders.





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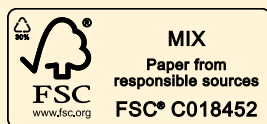
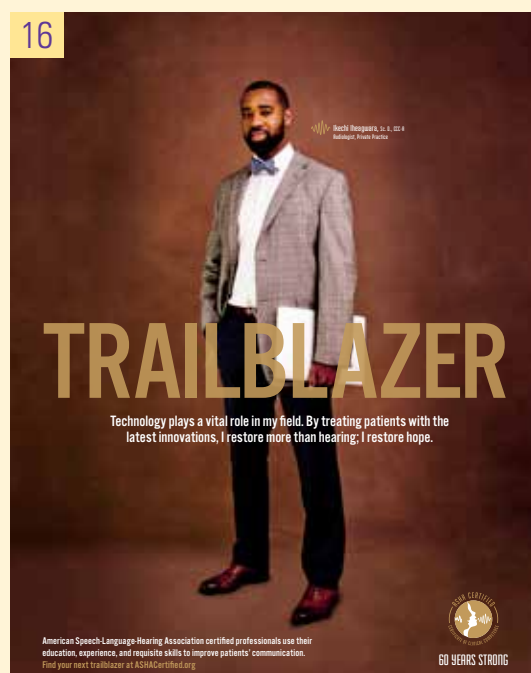
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Managing Editor
Maureen Salamat

Production Editor
Kathleen Halverson

Interim Creative Director
Todd Threats

Graphic Designer
Manny Torres

Advertising Sales
Liz Barrett, The Townsend Group, Inc.
ebarrett@townsend-group.com
301-215-6710, ext. 114

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ASHA Volunteers and National Office Staff

Jeremi Jones, Charlene Lathers, Pam Leppin,
Allison Oakes, Stacey Travers, Donna Vernon,
Tracy White, Natalie Wilson



2200 Research Boulevard
Rockville, MD 20850-3289
301-296-5700
301-296-5650 TTY
301-296-5777 FAX
www.asha.org
ASHA Action Center: 800-498-2071

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