# Hearing Industry Research Consortium

# Request for Proposals (RFP) 2021:

“Confirming The Hearing Care Practitioner (HCP) Role with Respect to Expanded Hearing-Aid-User Needs, Health & Well-Being.

## Brief Description of Purpose and Opportunity

The Hearing Industry Research Consortium wishes to support pre-competitive research that advances understanding of the effects of expanded hearing-aid-user needs related to general health and well-being. How does this affect the role of the HCP in the process of hearing-rehabilitation?

Researchers may suggest improvements to the generic design and provision of hearing aids and hearing rehabilitation services but should not propose the development of specific features of hearing-aid systems or rehabilitation services.

The funding pool for this RFP is 300,000 US Dollars, and the period for execution of projects under this RFP is two-three years from 1 January 2022. Proposals for two-year projects are preferred. It is expected that one or two project proposals will be funded.

A detailed description of the application procedure, as well as the guidelines for research under this scheme and the proposed research area, can be found in the following sections.

# Research Area 2021:

Overview and Motivation

Hearing aid technology has evolved from single-purpose devices that focus on providing audibility for speech comfort and clarity to multi-purpose, multifunction devices that are increasingly connected directly to smart phones. Research into global health conditions has raised awareness of the importance of hearing for the physical and emotional well-being. Addressing this topic may require increased engagement by HCPs in relation to general health status assessment and rehabilitation of the hearing-aid wearer. The recent focus on comorbidity between hearing loss and other important health conditions has meant that the role of the HCP has evolved from the evaluation of hearing and balance to a broader role that includes the gateway to healthy aging/general health and wellness.

Today, the role of the HCP differs across distribution models and countries, and even within a given system, “best practice” varies across individuals and potentially also varies across hearing-aid users. In future, HCPs may increasingly need to better understand social and psychological factors, vestibular anatomy and physiology, cognitive screening tools, and biometric functions, topics that have not been part of the traditional scope of practice. Critical to gain more insight in this topic is the need to include experienced HCPs in investigating these questions.

Research Objectives:

1. What can be learned from the established HCP systems/processes/behaviors (including telehealth opportunities and over-the-counter distribution systems) in relation to general health and well-being of the customers?
2. What can be learned from the assessment of social engagement, physical activity, and/or other biometric data (e.g. cardiovascular data, weight, Spo2, etc.) during the adoption of hearing aid technology alone or in conjunction with other body-worn (health/fitness-monitoring) devices?
3. What can be learned about the current and future role of the HCP in the larger healthcare community (physicians, public/private health care providers, insurance organizations, etc.) and in the relation to the hearing-aid user and significant others (family, care giver, etc.)?

**Example Submissions**

* A comparison of outcomes based on in-office vs. telehealth methods
* A comparison of differences in physical activity before and after hearing-aid acquisition and its influence on comorbidity (e.g. obesity, blood pressure, etc.)
* Influence of hearing-aid use on physiological indices
  + Pre-purchase
  + Acclimatization-phase
  + Post-acclimatization

**Submitters**

* Audiology/hearing-science departments
* Psychology departments
* Multidisciplinary hospitals
* Epidemiology researchers
* HCPs with experience in both, traditional fitting of hearing aids and self-fitting with over-the-counter devices