Hearing Aid Compatibility Survey - 2013

The Hearing Aid Compatibility Act of 1988 (HAC Act) requires that landline telephones manufactured or imported for use in the United States after August 1989 be hearing aid-compatible. In 2003, the Federal Communications Commission (FCC) adopted rules to make digital wireless telephones (cell phones) compatible with hearing aids and cochlear implants.

The Wireless Rehabilitation Engineering Research Center (Wireless RERC) monitors this regulation and is interested in how it impacts the usability of cell phones for people who use hearing aids and cochlear implants.

We invite people who use hearing aids or cochlear implants to participate in the survey regarding their use of cell phones. The purpose of this survey is to analyze the compatibility of hearing aids. We plan to conduct this survey annually to track any changes in cell phone and hearing aid compatibility.

Please try your best to complete all parts of this survey. Your answers are important to us, even if you don't use wireless technology. This survey can be completed by an assistant or caregiver for you if you are unable to complete it directly.

Your personal information will not be sold or used in any way other than for research related to this survey. Your personal data will be kept strictly confidential.

Please take the HAC survey and enter a drawing for the chance to win one of four \$50 Amazon gift certificates. Participation in the survey is not required to enter the drawing. Just provide your contact information for a chance to win.

ABOUT US

This survey is being conducted by the Rehabilitation Engineering Research Center for Wireless Technologies (Wireless RERC), which is funded by a 5-year grant from the U.S. Department of Education's National Institute on Disability and Rehabilitation Research (grant number H133E110002). For more information about the Wireless RERC, please visit us on the Internet at: www.wirelessrerc.org.

If you have questions or need help with this survey, please contact: John Morris 404-367-1348 john morris@shepherd.org

1. What is your hearing status?

0	Hard of hearing
0	Late-deafened
0	Deaf (primarily use sign language to communicate)
0	Deaf (oral – primarily use voice to communicate)
0	Other (please specify)

2. What degree of hearing loss do you have?

	at acgree of nearing rece ac year.
0	Mild
0	Moderate
0	Severe
0	Profound
0	Not sure

3. What kind of hearing technology do you use?	
O Behind the ear aids	
O In the ear aids	
O Bone anchored hearing aids	
Cochlear implant	
C None	
Other (please specify)	
4. Do you currently use a cell phone?	
C Yes	
No (If no, please skip to question 18.)	
5. Can you use your current cell phone while using your hearing aid, cochlear i	mplant. or
other hearing technology?	,
C Yes	
O No	
O Not sure	
C Not applicable	
6. What, if any, assistive technology do you use to make your cell phone hearing	ıg
aid compatible?	
☐ Neck loop	
☐ Amplifier	
Bluetooth	
Telecoil	
Other (please specify)	

	plant, or other hearing technology?
0	Very difficult
0	Difficult
0	About average
0	Easy
0	Very easy
0	Not applicable
	low satisfied are you with your cell phone? (clarity is good, you can hear and lerstand the person on the other end; volume is loud enough, etc)
0	Very satisfied
0	Satisfied
0	About average
0	Dissatisfied
0	Very dissatisfied
). I	low did you find your cell phone? (select all that apply)
	Recommendation (from friend, family member, audiologist, etc)
	Package label (microphone vs. telecoil compatible, etc.)
	Sales person
	Researched online
	Other (please specify)
0.	When was the last time you changed cell phones?
0	12 months ago or less
0	More than 1 year ago, but less than 2 years ago
	More than 2 years ago, but less than 3 years ago
0	Mars than O come and but less than A come and
0	More than 3 years ago, but less than 4 years ago
	More than 4 years ago More than 4 years ago

_	Where did you purchase your cell phone?	
O	Retail store or kiosk operated by a wireless service provider	
0	Independent brick-and-mortar retailer (such as Wal-Mart, Best Buy, etc.)	
0	Service provider website	
0	Third party online retailer (such as Amazon, e-Bay, etc.)	
0	Manufacturer's store or website (such as Apple, Motorola, etc.)	
0	Other (please specify)	
3.	Do you know the M and T-ratings of your hearing aid?	
)	Yes	
0	No	
	De ven knem the Mand Tuetings of very sell about	
A	Do you know the M and T-ratings of your cell phone?	
)	Yes	
ာ 5. xj	No If you use a third-party mobile voice application (such as Skype), perienced more or fewer problems with your hearing aid when usi	_
5 5. XI	$_{\mbox{\scriptsize No}}$ If you use a third-party mobile voice application (such as Skype),	-
5. KI	No If you use a third-party mobile voice application (such as Skype), perienced more or fewer problems with your hearing aid when using lication than when using your service provider's service?	_
5. XI PI	If you use a third-party mobile voice application (such as Skype), perienced more or fewer problems with your hearing aid when using clication than when using your service provider's service? More problems with third-party application	_
5. ()	If you use a third-party mobile voice application (such as Skype), perienced more or fewer problems with your hearing aid when using clication than when using your service provider's service? More problems with third-party application Fewer problems with third-party application	-
5. XI PI	If you use a third-party mobile voice application (such as Skype), perienced more or fewer problems with your hearing aid when using blication than when using your service provider's service? More problems with third-party application Fewer problems with third-party application About the same Do not use third-party applications	ng the t
	If you use a third-party mobile voice application (such as Skype), perienced more or fewer problems with your hearing aid when using polication than when using your service provider's service? More problems with third-party application Fewer problems with third-party application About the same Do not use third-party applications How satisfied are you with the hearing aid compatibility informations	ng the t
	If you use a third-party mobile voice application (such as Skype), perienced more or fewer problems with your hearing aid when using blication than when using your service provider's service? More problems with third-party application Fewer problems with third-party application About the same Do not use third-party applications	ng the t
	If you use a third-party mobile voice application (such as Skype), perienced more or fewer problems with your hearing aid when using polication than when using your service provider's service? More problems with third-party application Fewer problems with third-party application About the same Do not use third-party applications How satisfied are you with the hearing aid compatibility information the websites and packaging provided by service providers and	ng the t
5. C) C) S)	If you use a third-party mobile voice application (such as Skype), perienced more or fewer problems with your hearing aid when using polication than when using your service provider's service? More problems with third-party application Fewer problems with third-party application About the same Do not use third-party applications How satisfied are you with the hearing aid compatibility information the websites and packaging provided by service providers and	ng the t
	If you use a third-party mobile voice application (such as Skype), perienced more or fewer problems with your hearing aid when using polication than when using your service provider's service? More problems with third-party application Fewer problems with third-party application About the same Do not use third-party applications How satisfied are you with the hearing aid compatibility information the websites and packaging provided by service providers and very satisfied Satisfied	ng the t
5. (I	If you use a third-party mobile voice application (such as Skype), perienced more or fewer problems with your hearing aid when using polication than when using your service provider's service? More problems with third-party application Fewer problems with third-party application About the same Do not use third-party applications How satisfied are you with the hearing aid compatibility information the websites and packaging provided by service providers and very satisfied Satisfied About average	ng the t

17.	How satisfied are you with the hearing aid compatibility information you have received
fro	m retail sales staff?
0	Very satisfied
0	Satisfied
0	About average
0	Dissatisfied
0	Very dissatisfied
0	Have not sought this information
Par	t 2. About you
Inst	ructions: Please select the answer that best describes you.
18.	What is your gender?
0	Male
0	Female
19.	What is your age?
20.	What is your ethnic background? (Check all that apply)
	Asian/Pacific Islander
	Black/African American
	Hispanic/Latino
	Native American
	White/Caucasian
	Other (please specify)
21.	What is the highest level of education you have completed?
0	Not applicable or no schooling
0	Elementary school
0	High school diploma or GED
0	Some college, no degree
0	Associate's degree
0	Bachelor's degree
0	Master's degree or doctoral degree

C Less than \$10,000		
CC33 (Hall \$10,000		
\$10,000-\$14,999		
© \$15,000-\$24,999		
© \$25,000-\$34,999		
C \$35,000-\$49,999		
C \$50,000-\$74,999		
© \$75,000 or more		
23. What is your Z	IP Code?	
Please enter your 5 digit ZIP Code		
24. Are you emplo	ved?	
Full-time	your	
v ruii-time		
O Port time		
O Part-time		
© Retired		
C Retired C Not employed 25. To be eligible for	or the drawing for one of four \$50 gift cards	, pleas
C Retired C Not employed		, pleas
Retired Not employed Solution Not employed Solution Not employed Solution Not employed		, pleas
Retired Not employed Solution Not employed Solution		, pleas
C Retired C Not employed 25. To be eligible to contact information of the contact informatin of the contact information of the contact information of the co		, pleas
Retired Not employed Sontact information irst Name: ast Name: treet Number and Name: partment or Unit Number:		s, pleas
Retired Not employed Sontact information irst Name: ast Name: treet Number and Name: partment or Unit Number: itty/Town:		s, pleas
C Retired C Not employed 25. To be eligible to contact information		s, pleas
Retired Not employed Solution Not employed Solution		, pleas