

Appendix- 1(Survey Questionnaire)

Age:

Mention the number of years you are using hearing aids:

Are you using hearing aids in both ears? Yes / No

1. When COVID-19 started, did you think you're going to face challenges related to your hearing aids and their usage? Yes / No

2. If your answer is Yes to previous question, please indicate what challenges you thought of initially

Maintenance of hearing aid / Accessories such as batteries, ear tips, receivers, etc / Programming of hearing aid
Others

3. COVID-19 lead to lockdowns. During lockdowns, hearing aid usage: Increased / Decreased

4. If your answer is Increased for question 3, please indicate the reasons

Increased communication with family members/ increased television time for news, entertainment, etc /
Increased communication over phone / other

5. If your answer is Decreased for question 3, please indicate the reasons

Less communication requirement at home / No social meetings/ Not much dependency on television / Other

6. In reality, have you faced problem with hearing aid maintenance? Yes / No

7. Have you faced problem for accessories; batteries, ear tips, receivers, etc? Yes / No

8. Have you faced problem for hearing aid programming? Yes / No / Sometimes

9. Do you face difficulty wearing hearing aids with mask? Yes / No / Sometimes

10. You cannot see other person talking because of mask. Does this affect your understanding while communicating to other person? Yes/ No/ Sometimes

11. Hearing aid is exposed to environment. Do you sanitize your hearing aids after public exposure? Yes / No/ Maybe

12. Have you sanitized your hearing aids yet? Yes / No

13. In what way your Hearing Aid Specialists can help you better in COVID-19 period:

Thank you very much for participating in this survey