

## Questionnaire about Hearing Related Lifestyle HEARLI-Q

The purpose of this questionnaire is to understand what type of listening situations you encounter in your everyday life and to what extent you have difficulties hearing in these situations. Answer as honestly as you can based on your experience.

### 1. Conversation with one person in a quiet environment (for instance at home or in an office)

*How often are you in this situation?*

☐

Never\*

☐

A couple of times a year

☐

Monthly

☐

Weekly

☐

Daily

\* If never, please go to the next listening situation

*How important is it for you to hear well in this situation?*

☐

Not important

☐

Slightly important

☐

Moderately important

☐

Very important

☐

Extremely important

*How difficult is it for you to hear in this situation?*

☐

Not difficult

☐

Slightly difficult

☐

Moderately difficult

☐

Very difficult

☐

Extremely difficult

*How satisfied are you with your hearing aids in this situation?*

☐

I don't wear hearing aids in this situation

☐

Not satisfied

☐

Slightly satisfied

☐

Moderately satisfied

☐

Very satisfied

☐

Extremely satisfied

## 2. Conversation with one person in a noisy environment (for instance at a restaurant)

*How often are you in this situation?*

☐

Never\*

☐

A couple of times a year

☐

Monthly

☐

Weekly

☐

Daily

\* If never, please go to the next listening situation

*How important is it for you to hear well in this situation?*

☐

Not important

☐

Slightly important

☐

Moderately important

☐

Very important

☐

Extremely important

*How difficult is it for you to hear in this situation?*

☐

Not difficult

☐

Slightly difficult

☐

Moderately difficult

☐

Very difficult

☐

Extremely difficult

*How satisfied are you with your hearing aids in this situation?*

☐

I don't wear hearing aids in this situation

☐

Not satisfied

☐

Slightly satisfied

☐

Moderately satisfied

☐

Very satisfied

☐

Extremely satisfied

## 3. Conversation with one person in transport (for instance in a car or public transport)

*How often are you in this situation?*

☐

Never\*

☐

A couple of times a year

☐

Monthly

☐

Weekly

☐

Daily

\* If never, please go to the next listening situation

*How important is it for you to hear well in this situation?*

☐

Not important

☐

Slightly important

☐

Moderately important

☐

Very important

☐

Extremely important

*How difficult is it for you to hear in this situation?*

☐

Not difficult

☐

Slightly difficult

☐

Moderately difficult

☐

Very difficult

☐

Extremely difficult

*How satisfied are you with your hearing aids in this situation?*

☐

I don't wear hearing aids in this situation

☐

Not satisfied

☐

Slightly satisfied

☐

Moderately satisfied

☐

Very satisfied

☐

Extremely satisfied

#### 4. Conversation with a child in a quiet environment (for instance at home)

*How often are you in this situation?*

☐

Never\*

☐

A couple of times a year

☐

Monthly

☐

Weekly

☐

Daily

\* If never, please go to the next listening situation

*How important is it for you to hear well in this situation?*

☐

Not important

☐

Slightly important

☐

Moderately important

☐

Very important

☐

Extremely important

*How difficult is it for you to hear in this situation?*

☐

Not difficult

☐

Slightly difficult

☐

Moderately difficult

☐

Very difficult

☐

Extremely difficult

*How satisfied are you with your hearing aids in this situation?*

☐

I don't wear hearing aids in this situation

☐

Not satisfied

☐

Slightly satisfied

☐

Moderately satisfied

☐

Very satisfied

☐

Extremely satisfied

#### 5. Conversation with a child in a noisy environment (for instance at kindergarten)

*How often are you in this situation?*

☐

Never\*

☐

A couple of times a year

☐

Monthly

☐

Weekly

☐

Daily

\* If never, please go to the next listening situation

*How important is it for you to hear well in this situation?*

☐

Not important

☐

Slightly important

☐

Moderately important

☐

Very important

☐

Extremely important

*How difficult is it for you to hear in this situation?*

☐

Not difficult

☐

Slightly difficult

☐

Moderately difficult

☐

Very difficult

☐

Extremely difficult

*How satisfied are you with your hearing aids in this situation?*

☐

I don't wear hearing aids in this situation

☐

Not satisfied

☐

Slightly satisfied

☐

Moderately satisfied

☐

Very satisfied

☐

Extremely satisfied

**6. Conversation with one person in a place where there are a lot of echoes (for instance a church or a railway terminus building)**

*How often are you in this situation?*

☐

Never\*

☐

A couple of times a year

☐

Monthly

☐

Weekly

☐

Daily

\* If never, please go to the next listening situation

*How important is it for you to hear well in this situation?*

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Not important

☐

Slightly important

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Moderately important

☐

Very important

☐

Extremely important

*How difficult is it for you to hear in this situation?*

☐

Not difficult

☐

Slightly difficult

☐

Moderately difficult

☐

Very difficult

☐

Extremely difficult

*How satisfied are you with your hearing aids in this situation?*

☐

I don't wear hearing aids in this situation

☐

Not satisfied

☐

Slightly satisfied

☐

Moderately satisfied

☐

Very satisfied

☐

Extremely satisfied

**7. Conversation with several people in a quiet environment (for instance at home or in an office)**

*How often are you in this situation?*

☐

Never\*

☐

A couple of times a year

☐

Monthly

☐

Weekly

☐

Daily

\* If never, please go to the next listening situation

*How important is it for you to hear well in this situation?*

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Not important

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Slightly important

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Moderately important

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Very important

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Extremely important

*How difficult is it for you to hear in this situation?*

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Not difficult

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Slightly difficult

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Moderately difficult

☐

Very difficult

☐

Extremely difficult

*How satisfied are you with your hearing aids in this situation?*

☐

I don't wear hearing aids in this situation

☐

Not satisfied

☐

Slightly satisfied

☐

Moderately satisfied

☐

Very satisfied

☐

Extremely satisfied

## 8. Conversation with several people in a noisy environment (for instance at a restaurant)

*How often are you in this situation?*

☐

Never\*

☐

A couple of times a year

☐

Monthly

☐

Weekly

☐

Daily

\* If never, please go to the next listening situation

*How important is it for you to hear well in this situation?*

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Slightly important

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Extremely important

*How difficult is it for you to hear in this situation?*

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Not difficult

☐

Slightly difficult

☐

Moderately difficult

☐

Very difficult

☐

Extremely difficult

*How satisfied are you with your hearing aids in this situation?*

☐

I don't wear hearing aids in this situation

☐

Not satisfied

☐

Slightly satisfied

☐

Moderately satisfied

☐

Very satisfied

☐

Extremely satisfied

## 9. Conversation with several people in transport (for instance in a car or public transport)

*How often are you in this situation?*

☐

Never\*

☐

A couple of times a year

☐

Monthly

☐

Weekly

☐

Daily

\* If never, please go to the next listening situation

*How important is it for you to hear well in this situation?*

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Slightly important

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Not difficult

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Slightly difficult

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Moderately difficult

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Very difficult

☐

Extremely difficult

*How satisfied are you with your hearing aids in this situation?*

☐

I don't wear hearing aids in this situation

☐

Not satisfied

☐

Slightly satisfied

☐

Moderately satisfied

☐

Very satisfied

☐

Extremely satisfied

**10. Conversation with one or more people using a phone or some other communication device (for instance a computer or mobile phone) in a quiet room at home**

*How often are you in this situation?*

☐

Never\*

☐

A couple of times a year

☐

Monthly

☐

Weekly

☐

Daily

\* If never, please go to the next listening situation

*How important is it for you to hear well in this situation?*

☐

Not important

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Slightly important

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*How difficult is it for you to hear in this situation?*

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Slightly difficult

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Moderately difficult

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Very difficult

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Extremely difficult

*How satisfied are you with your hearing aids in this situation?*

☐

I don't wear hearing aids in this situation

☐

Not satisfied

☐

Slightly satisfied

☐

Moderately satisfied

☐

Very satisfied

☐

Extremely satisfied

**11. Conversation with one person using a mobile phone while standing next to a busy street**

*How often are you in this situation?*

☐

Never\*

☐

A couple of times a year

☐

Monthly

☐

Weekly

☐

Daily

\* If never, please go to the next listening situation

*How important is it for you to hear well in this situation?*

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Not important

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Slightly important

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Moderately important

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Extremely important

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Slightly difficult

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Moderately difficult

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Extremely difficult

*How satisfied are you with your hearing aids in this situation?*

☐

I don't wear hearing aids in this situation

☐

Not satisfied

☐

Slightly satisfied

☐

Moderately satisfied

☐

Very satisfied

☐

Extremely satisfied

## 12. Listening to a lecture

*How often are you in this situation?*

☐

Never\*

☐

A couple of times a year

☐

Monthly

☐

Weekly

☐

Daily

\* If never, please go to the next listening situation

*How important is it for you to hear well in this situation?*

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*How difficult is it for you to hear in this situation?*

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Slightly difficult

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Moderately difficult

☐

Very difficult

☐

Extremely difficult

*How satisfied are you with your hearing aids in this situation?*

☐

I don't wear hearing aids in this situation

☐

Not satisfied

☐

Slightly satisfied

☐

Moderately satisfied

☐

Very satisfied

☐

Extremely satisfied

## 13. Listening to a live theater play

*How often are you in this situation?*

☐

Never\*

☐

A couple of times a year

☐

Monthly

☐

Weekly

☐

Daily

\* If never, please go to the next listening situation

*How important is it for you to hear well in this situation?*

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Extremely important

*How difficult is it for you to hear in this situation?*

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Slightly difficult

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Moderately difficult

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Very difficult

☐

Extremely difficult

*How satisfied are you with your hearing aids in this situation?*

☐

I don't wear hearing aids in this situation

☐

Not satisfied

☐

Slightly satisfied

☐

Moderately satisfied

☐

Very satisfied

☐

Extremely satisfied

#### 14. Listening to a live concert in a noisy crowd of people

*How often are you in this situation?*

☐

Never\*

☐

A couple of times a year

☐

Monthly

☐

Weekly

☐

Daily

\* If never, please go to the next listening situation

*How important is it for you to hear well in this situation?*

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Slightly important

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Slightly difficult

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Moderately difficult

☐

Very difficult

☐

Extremely difficult

*How satisfied are you with your hearing aids in this situation?*

☐

I don't wear hearing aids in this situation

☐

Not satisfied

☐

Slightly satisfied

☐

Moderately satisfied

☐

Very satisfied

☐

Extremely satisfied

#### 15. Listening to TV in a quiet room at home

*How often are you in this situation?*

☐

Never\*

☐

A couple of times a year

☐

Monthly

☐

Weekly

☐

Daily

\* If never, please go to the next listening situation

*How important is it for you to hear well in this situation?*

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Not important

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Slightly important

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Moderately important

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Very important

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Extremely important

*How difficult is it for you to hear in this situation?*

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Not difficult

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Slightly difficult

☐

Moderately difficult

☐

Very difficult

☐

Extremely difficult

*How satisfied are you with your hearing aids in this situation?*

☐

I don't wear hearing aids in this situation

☐

Not satisfied

☐

Slightly satisfied

☐

Moderately satisfied

☐

Very satisfied

☐

Extremely satisfied



## 16. Listening to the radio or a podcast in a quiet room at home

*How often are you in this situation?*

☐

Never\*

☐

A couple of times a year

☐

Monthly

☐

Weekly

☐

Daily

\* If never, please go to the next listening situation

*How important is it for you to hear well in this situation?*

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Not important

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Slightly important

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Moderately important

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Extremely important

*How difficult is it for you to hear in this situation?*

☐

Not difficult

☐

Slightly difficult

☐

Moderately difficult

☐

Very difficult

☐

Extremely difficult

*How satisfied are you with your hearing aids in this situation?*

☐

I don't wear hearing aids in this situation

☐

Not satisfied

☐

Slightly satisfied

☐

Moderately satisfied

☐

Very satisfied

☐

Extremely satisfied

## 17. Listening to music at home

*How often are you in this situation?*

☐

Never\*

☐

A couple of times a year

☐

Monthly

☐

Weekly

☐

Daily

\* If never, please go to the next listening situation

*How important is it for you to hear well in this situation?*

☐

Not important

☐

Slightly important

☐

Moderately important

☐

Very important

☐

Extremely important

*How difficult is it for you to hear in this situation?*

☐

Not difficult

☐

Slightly difficult

☐

Moderately difficult

☐

Very difficult

☐

Extremely difficult

*How satisfied are you with your hearing aids in this situation?*

☐

I don't wear hearing aids in this situation

☐

Not satisfied

☐

Slightly satisfied

☐

Moderately satisfied

☐

Very satisfied

☐

Extremely satisfied

## 18. Listening to the car stereo in a moving car

*How often are you in this situation?*

☐

Never\*

☐

A couple of times a year

☐

Monthly

☐

Weekly

☐

Daily

\* If never, please go to the next listening situation

*How important is it for you to hear well in this situation?*

☐

Not important

☐

Slightly important

☐

Moderately important

☐

Very important

☐

Extremely important

*How difficult is it for you to hear in this situation?*

☐

Not difficult

☐

Slightly difficult

☐

Moderately difficult

☐

Very difficult

☐

Extremely difficult

*How satisfied are you with your hearing aids in this situation?*

☐

I don't wear hearing aids in this situation

☐

Not satisfied

☐

Slightly satisfied

☐

Moderately satisfied

☐

Very satisfied

☐

Extremely satisfied

## 19. Monitoring sounds when vacuum cleaning

*How often are you in this situation?*

☐

Never\*

☐

A couple of times a year

☐

Monthly

☐

Weekly

☐

Daily

\* If never, please go to the next listening situation

*How important is it for you to hear well in this situation?*

☐

Not important

☐

Slightly important

☐

Moderately important

☐

Very important

☐

Extremely important

*How difficult is it for you to hear in this situation?*

☐

Not difficult

☐

Slightly difficult

☐

Moderately difficult

☐

Very difficult

☐

Extremely difficult

*How satisfied are you with your hearing aids in this situation?*

☐

I don't wear hearing aids in this situation

☐

Not satisfied

☐

Slightly satisfied

☐

Moderately satisfied

☐

Very satisfied

☐

Extremely satisfied

## 20. Monitoring traffic sounds when walking on a busy street

*How often are you in this situation?*

☐

Never\*

☐

A couple of times a year

☐

Monthly

☐

Weekly

☐

Daily

\* If never, please go to the next listening situation

*How important is it for you to hear well in this situation?*

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Not important

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Slightly important

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Moderately important

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Very important

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Extremely important

*How difficult is it for you to hear in this situation?*

☐

Not difficult

☐

Slightly difficult

☐

Moderately difficult

☐

Very difficult

☐

Extremely difficult

*How satisfied are you with your hearing aids in this situation?*

☐

I don't wear hearing aids in this situation

☐

Not satisfied

☐

Slightly satisfied

☐

Moderately satisfied

☐

Very satisfied

☐

Extremely satisfied

## 21. Relaxing in a quiet room at home (for instance while reading or doing a crossword puzzle)

*How often are you in this situation?*

☐

Never\*

☐

A couple of times a year

☐

Monthly

☐

Weekly

☐

Daily

\* If never, please go to the next listening situation

*How important is it for you to hear well in this situation?*

☐

Not important

☐

Slightly important

☐

Moderately important

☐

Very important

☐

Extremely important

*How difficult is it for you to hear in this situation?*

☐

Not difficult

☐

Slightly difficult

☐

Moderately difficult

☐

Very difficult

☐

Extremely difficult

*How satisfied are you with your hearing aids in this situation?*

☐

I don't wear hearing aids in this situation

☐

Not satisfied

☐

Slightly satisfied

☐

Moderately satisfied

☐

Very satisfied

☐

Extremely satisfied

## 22. Being a car passenger or on public transport “doing nothing” or reading

*How often are you in this situation?*

☐

Never\*

☐

A couple of times a year

☐

Monthly

☐

Weekly

☐

Daily

\* If never, please go to the next listening situation

*How important is it for you to hear well in this situation?*

☐

Not important

☐

Slightly important

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Moderately important

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Extremely important

*How difficult is it for you to hear in this situation?*

☐

Not difficult

☐

Slightly difficult

☐

Moderately difficult

☐

Very difficult

☐

Extremely difficult

*How satisfied are you with your hearing aids in this situation?*

☐

I don't wear hearing aids in this situation

☐

Not satisfied

☐

Slightly satisfied

☐

Moderately satisfied

☐

Very satisfied

☐

Extremely satisfied

## 23. Hearing sounds of nature

*How often are you in this situation?*

☐

Never\*

☐

A couple of times a year

☐

Monthly

☐

Weekly

☐

Daily

\* If never, please go to the next listening situation

*How important is it for you to hear well in this situation?*

☐

Not important

☐

Slightly important

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Moderately important

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*How difficult is it for you to hear in this situation?*

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Extremely difficult

*How satisfied are you with your hearing aids in this situation?*

☐

I don't wear hearing aids in this situation

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Not satisfied

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Slightly satisfied

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Extremely satisfied