



Practical recommendations for interacting with people with hearing loss

Recommendations for nursing professionals

1. Strategies for communication	5
2. Technical aids	8
3. Participation and activities	9
4. Social and emotional support	10
5. Resilience and resources	12
6. Shame and awareness	13

Recommendations for institutions

1. Access and knowledge transfer	15
2. Infrastructure and environment	16

In 2014, Switzerland committed to implementing the UN Convention on the Rights of Persons with Disabilities (CRPD) in everyday life.

We are therefore committed to supporting people with disabilities by removing barriers, protecting them against discrimination and promoting inclusion and equality.

When someone has a hearing impairment, it may be due to hearing loss, late-onset deafness or complete deafness. This means that there is no such thing as one type of hearing impairment. The impact on the lives and daily routines of those affected can vary greatly from person to person.

Recommendations for nursing professionals

This guide is primarily aimed at nursing professionals. In their daily work, they can play a key role in helping to make everyday life easier for people with hearing impairments.

When interacting with those affected, sign language serves as the most important means of communication. For this reason, learning sign language is recommended for nursing professionals.

General recommendation

Always interact with those affected at eye level and show respect for their expertise and personal coping strategies.

1. Communication strategies

Environment

Choose a quiet environment to start the conversation – free of background noise or side conversations. Make sure there is good lighting so that the person's face and lips are clearly visible.

First contact

Tap the person with the hearing impairment on the shoulder and wait until eye contact is established.

Eye contact

Maintain eye contact throughout the conversation with the person you are speaking to.

Positioning

Always face the person with the hearing impairment and make sure that nothing is covering your face so that your lip movements remain visible. For example, do not wear a mask.

Speech and gestures

High German is often the best choice. Speak naturally and also make sure that you speak at an appropriate speed, use short sentences and communicate with clear, everyday terms. Supplement your speech with helpful gestures.

Visual aids

Complement your verbal information with visual aids such as pictures or graphics and support communication by pointing to things. Avoid pointing and explaining at the same time so that the person with the hearing impairment can lip-read at all times.

Minimising background noise

In agreement with the individuals with a hearing impairment, reduce disruptive background noise such as loud televisions or music so as to allow for clear communication.

Clarification

Make sure you have been understood by asking follow-up questions. If necessary, ask the other person to repeat what they heard.

Written communication

If necessary, also provide important information in writing. Where possible, this should be in plain language.

Difficult topics/situations

In difficult situations – for example before a surgery – always involve sign language interpreters or speech-to-text interpreters after first coordinating this with the person concerned.

CRPD reference: Article 9 (Accessibility) and Article 21 (Freedom of expression and opinion, and access to information) call for equal access to communication.



2. Technical aids

Using hearing aids

Support individuals in handling their hearing aids. Ensure that they are using, adjusting and maintaining their hearing devices properly.

Hearing systems/aids in public spaces

Advocate for the availability and proper functioning of induction loops and other technical aids. Offer your support in helping to correctly set up the hearing devices (T-coil).

Promoting communication strategies

Encourage the development and use of communication strategies (pages 5–6), including within your organisation. Promote better understanding through environmental design, spatial positioning during conversations and the use of hearing aids.

CRPD reference: Article 26 (Habilitation and rehabilitation) calls for access to technologies to facilitate the participation of persons with disabilities. Article 20 (Personal mobility) calls for access to appropriate means to promote independence in daily life.

3. Participation and activities

Embracing change

Encourage the individuals concerned to actively address changes in their hearing, for example by having their hearing ability assessed. Support and motivate them to accept potential changes. Assist them and their relatives in clarifying their questions and refer them to professional services when needed.

Participation in activities

Point out specific venues with good acoustics and hearing aids, such as partner microphones and FM systems. This enables those affected to actively participate in the social life of their environment. Offer your support in exploring options for written or sign language interpreting.

Asserting rights

Assist with clarifying entitlements for technical hearing aids, sign language interpreters or other aids that help to improve communication.

CRPD reference: Article 30 (Participation in cultural life, recreation, leisure and sport). Targeted activities strengthen social participation and well-being.

4. Social and emotional support

Social integration

Actively help affected individuals in finding ways to make and maintain contact with others so that they are integrated and do not become socially isolated.

Emotional support

Clarify with those affected whether and what kind of support could relieve their burden. If necessary, offer your help in referring them to specialist counselling or psychosocial support services.

Acceptance of hearing loss

Encourage those affected to be open about their hearing loss or deafness and support them in accepting help from others.

CRPD reference: Article 19 (Living independently and being included in the community) emphasises the strengthening of social networks. Article 25 (Health) calls for access to health services.



5. Resilience and resources

Building resilience

Help those affected and their families to integrate hearing loss into their daily lives and to deal constructively with negative emotions.

Strengthening abilities

Identify where the individual strengths and resources of people with hearing impairments lie. Actively support them in applying their skills and competences.

Finding meaning and life story work

Help those affected to understand their hearing impairment in the context of their life story and to accept the associated problems as part of their personal journey.

CRPD reference: Articles 3 (General principles) and 26 (Habilitation and rehabilitation) emphasise the importance of promoting self-determination and mental health.

6. Shame and awareness

Respecting shame

Encourage those affected to be open about their hearing loss and to talk about it. This can help them in overcoming feelings of shame. Take into account their cultural and social background and help them to recognise the advantages of hearing aids and assistive devices.

Raising awareness in the environment

Involve the social environment when important decisions are to be made.

Avoid misunderstandings

Make sure that you always act transparently with those affected when taking action and making plans. Make decisions together with them, and in doing so, allow them to maintain their independence.

CRPD reference: Article 8 (Awareness-raising) requires the elimination of prejudice and discrimination.

Recommendations for organisations

Organisations and institutions have a responsibility to create resources that promote accessible communication.

When interacting with people with hearing loss, this includes technical and personnel assistance, optimal spatial infrastructure and the active transfer of knowledge and exchange of experiences among nursing professionals.

1. Access and knowledge transfer

Access to assistive devices

The organisation ensures that assistive devices are easily accessible and that their use is optimally integrated into the environment.

Access to sign language interpreters

The institution provides resources to enable the use of sign language interpreters.

Coordination with other service providers

The organisation helps to support visits to audiologists and other specialists.

Promoting knowledge and skills

The institution is committed to the transfer of knowledge and actively supports training courses as well as continuing education and professional development programmes for accessible interaction with people with hearing impairments.

CRPD reference: Articles 9 (Accessibility) and 20 (Personal mobility) emphasise access to assistive devices and services for better participation.

2. Infrastructure and environment

Room acoustics

The institution is committed to designing spaces with good acoustics. This can be done specifically by using carpets, curtains and sound-absorbing materials. Specialists may be consulted for this purpose.

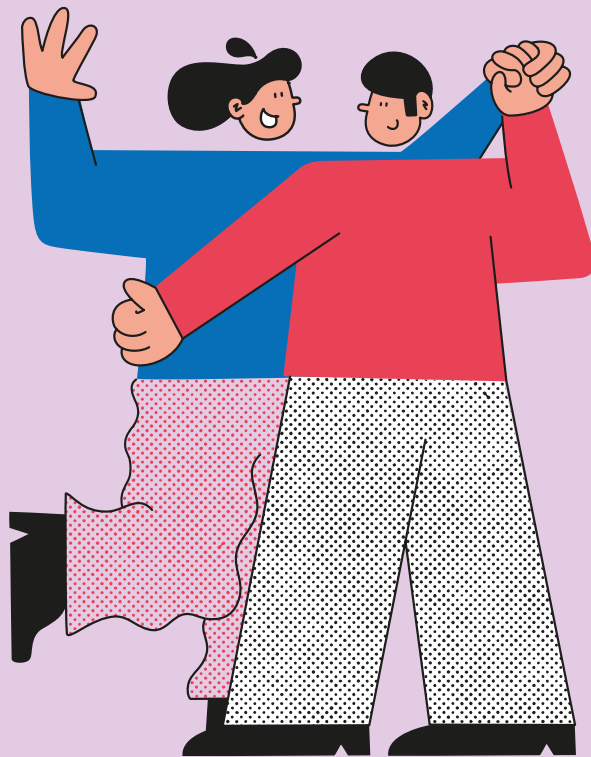
Safety

Where necessary and possible, the organisation plans to install safety equipment. This may include, for example, light signals, doorbell cameras or smoke detectors.

Seating arrangements

For group communication, the institution ensures that circular or U-shaped seating arrangements are possible and can be easily set up. This allows all participants in the conversation to follow the communication equally.

CRPD reference: Article 9 (Accessibility) requires institutions to remove barriers and create an accessible environment.



Contributors

Authors

Prof. Daniela Händler-Schuster
ZHAW School of Health Sciences

Dr Colette Schneider Stingelin
ZHAW School of Applied Linguistics

Advisory Board

Prof. Frank Wieber and Andrea Günther
ZHAW School of Health Sciences

Anika Heinrich
Swiss Association of the Hearing Impaired Sonos

Pro Audito Switzerland and Pro Audito St. Gallen

Sabrina Schuler
Schuler sign language interpreter

Prof. Sebastian Probst
HES-SO University of Applied Sciences and Arts Western Switzerland

MScN students of UMIT TIROL
Jasmin Brugger, Laura Kammerlander, Bianca Moser, Daniel Ristic,
Juliane Seeger, Valentina Siller

Dr Carly Meyer and Dr Barbra Timmer
The University of Queensland, Australia

Prof. Markus Melloh
Queensland University of Technology (QUT), Australia

Funding provided by



ZHAW Zurich University of Applied Sciences

School of Health Sciences

Institute of Nursing

Katharina-Sulzer-Platz 9

8400 Winterthur

ipf.gesundheit@zhaw.ch

zhaw.ch/health/nursing



DOI: <https://doi.org/10.21256/zhaw-2553>

© 2025 ZHAW Zurich University of
Applied Sciences