

Hearing Handicap Inventory Screening Questionnaire for Adults

1. Answer Yes, No, or Sometimes for each question.
2. Do not skip a question if you avoid the situation because of a hearing problem.
3. If you use a hearing aid, please answer each question according to the way you hear with your hearing aid.

	No	Sometimes	Yes
1. Does a hearing problem cause you to feel embarrassed when you meet new people?	0	2	4
2. Does a hearing problem cause you to feel frustrated when talking to members of your family?	0	2	4
3. Do you have difficulty hearing/understanding co-workers, clients, customers?	0	2	4
4. Do you feel handicapped by a hearing problem?	0	2	4
5. Does a hearing problem cause you difficulty when visiting friends, relatives, neighbors?	0	2	4
6. Does a hearing problem cause you difficulty in the movies or in the theatre?	0	2	4
7. Does a hearing problem cause you to have arguments with family members?	0	2	4
8. Does a hearing problem cause you difficulty when listening to TV or radio?	0	2	4
9. Do you feel that any difficulty with your hearing limits or hampers your personal or social life?	0	2	4
10. Does a hearing problem cause you difficulty when in a restaurant with relatives or friends?	0	2	4
Totals:			
Grand Total:			
Interpreting the Raw Scores: 0- 8 = 13% probability of hearing impairment (no handicap) 10- 24 = 50% probability of hearing impairment (mild- moderate handicap) 26- 40 = 84% probability of hearing impairment (severe handicap)			
NAME: _____ DATE: _____			

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*Adapted from Ventry, I., Weinstein. B. "Identification of elderly people with hearing problems"
 American Speech-Language-Hearing Association. 1983. 25. 37-42