Supplemental Material S1. Survey. Demographic and hearing aid related information How old are you (in years)? Please indicate your gender: Male Female O Non-binary (or gender neutral) Do you have any difficulty with your hearing (without hearing aids)? No, I always hear everything Yes, sometimes I do not hear what is being said Yes, I regularly do not hear what is being said O Yes, I almost never hear what is being said How long have you had hearing loss? Provide your answer inyears. Do you own a hearing aid for your: Right Ear Contract O Both Ears From the time you first learned you had a hearing problem how long did you wait before purchasing your first hearing aids?

Please provide your answer as a numerical value (e.g., 1, 3, 15).

Year(s)Month(s)

What type of hearing aid do you use?

O In-the-ear (ITE) hearing aids (Hearing aid sits completely/entirely in the ear)



O Behind-the-ear (BTE) hearing aids (Hearing aid has 2 parts: One part, the mold, sits in the ear and the other part, the hearing aid, sits behind the ear)



Which brand of hearing aid do you currently use?

- Kirkland
- Oticon
- O Phonak
- ReSound
- O Signia / Siemens
- Starkey
- O Unitron Widex
- Other, please specify

Hearing aid benefit/satisfaction

Think about how much you used your present hearing aid(s) over the past two weeks. Or an average day, how many hours did you use the hearing aid(s)?
 None Less than 1 hour a day 1 to 4 hours a day 4 to 8 hours a day More than 8 hours a day
Think about the situation where you most wanted to hear better, before you got you present hearing aid(s). Over the past two weeks, how much has the hearing aid helped in that situation?
 Helped not at all Helped slightly Helped moderately Helped quite a lot Helped very much
Think again about the situation where you most wanted to hear better. When you use your present hearing aid(s), how much difficulty do you STILL have in that situation?
 Very much difficulty Quite a lot of difficulty Moderate difficulty Slight difficulty No difficulty
Considering everything, do you think your present hearing aid(s) is worth the trouble?
 Not at all worth it Slightly worth it Moderately worth it Quite a lot worth it Very much worth it
Over the past two weeks, with your present hearing aid(s), how much have your hearing difficulties affected the things you can do?
 Affected very much Affected quite a lot Affected moderately Affected slightly Affected not at all

Supplemental material, Mothemela et al., "Factors Associated With Hearing Aid Outcomes Including Social Networks, Self-Reported Mental Health, and Service Delivery Models," AJA, https://doi.org/10.1044/2023_AJA-22-00206

Over the past two weeks, with your present hearing aid(s), how much do you think other people were bothered by your hearing difficulties?
 Bothered very much Bothered quite a lot Bothered moderately Bothered slightly Bothered not at all
Considering everything, how much has your present hearing aid(s) changed your enjoyment of life?
 Worse No change Slightly better Quite a lot better Very much better
General health and well-being & social network
In general, would you say your health is:
ExcellentVery goodGoodFairPoor
In general, would you say your mental health is:
ExcellentVery goodGoodFairPoor
How would you rate your quality of life?
O Very poor
PoorNeither poor nor good
O Good
O Very good
Social Networks

For the following questions (questions 5 to 10), please provide your answer as a numerical value (e.g., 1, 3, 15).

How many people live in your household?
How many children do you have?
How many grandchildren do you have?
How many people do you know that you would call a close friend?
How many people do you know that have hearing loss but who do not have hearing aids?
How many people do you know that have hearing loss and have/wear hearing aids?
Additional demographic information
Which of the following options best describes your work situation?
 Employed or homemaker Out of work or looking for work Student Unable to work Retired
What is the highest level of schooling (education) you have completed?
 Less than high school High school Some college but not degree A university degree
Please select one of the following options that describe your living arrangement/ situation:
 I live with my family I live with my spouse/partner I live with a friend I live on my own
What is your ethnicity?
 Hispanic or Latino Non-Hispanic or Latino

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What is yo	our race?
O Ind O Ala O Bla O Na O Otl O Wh	aska Native, Asian ack or African American ative Hawaiian her Pacific Islander
What is y	our pre-tax household income, approximately?
\$25\$50\$10	nder \$25,000 5,000 to \$49,999 0,000 to \$99,999 00,000 to \$149,000 50,000 or more
activities	al week, how much time do you spend in total on moderate and vigorous physical where your heartbeat increases and you breathe faster (e.g., brisk walking, leavy gardening, running, recreational sport):
1/2 :11/221/2	ss than ½ an hour (30 minutes) an hour to 1½ hours (30-90 minutes) ½ - 2½ hours (90-150 minutes) ½ - 5 hours (150-300 minutes) ore than 5 hours (more than 300 minutes)
How did y	you purchase your current hearing aids?
O Dis O Into	om a hearing clinic (private or university) scount Warehouse (Costco, Sams, etc.) ernet / Online harmacy Hearing Center (CVS) hearing professional came to my residence her, please specify: