The Role of Expectations and Patient Involvement on Sound Preference

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BACKGROUND

IKEA EFFECT

The IKEA effect refers to when an individual contributes to the construction of an item, and the perceived value of the item increases.[3]

We were interested in determining how increasing the involvement of the user in the construction of hearing aid settings may impact their perceived value of the changes made.

Since an increase of involvement in the construction of a product is associated with an increased perception in value, it is worthwhile to examine whether this relationship could be applied in a clinical setting to increase client satisfaction.

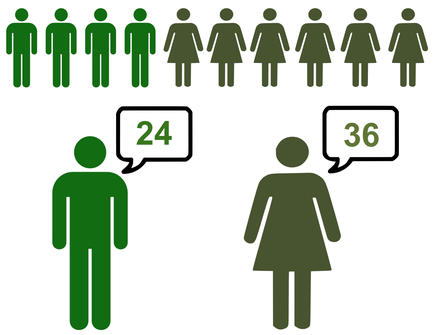
OBJECTIVE

Can making people feel like they have been meaningfully involved in the setting of a device alter their preference for their setting?

METHODS

DEMOGRAPHICS

60 PARTICIPANTS



TWO GROUPS

Group One
n = 29
Compared their own sound setting with other participant's settings (peer)

Group Two
n = 31
Compared their own sound setting with an audiologist's settings (expert)

PROCEDURES

Participants were asked to make adjustments to a distorted sound file.

No time limit (average = 2.52 minutes).

Participants were then asked to listen to their setting and the setting of either an expert or peer. The two sound settings presented were identical, and the order of their presentation was counterbalanced.

Participants were asked to rate their preference of sound using a Visual Analogue Scale (VAS).

100 mm

RESULTS

STATISTICAL ANALYSIS

Two one sample t-tests

Bonferroni adjustment to alpha to minimize type I error

Group One	VS	Group Two
Participants preferred their own settings		*Participants did not have a preference*
Mean = -13.54 SD = 30 *t* = 2.44 *p* = .021*		Mean = -7.67 SD = 40 *t* = 1.04 *p* = .301

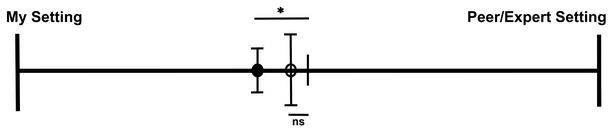


Figure 1. Representation of an individual's preference for their own setting when compared to the setting for 'Peer' (closed circle) vs. 'Expert' (open circle). The midline indicates no difference detected between the two sound files. Error bars depict the 95% confidence interval around the mean preference for their setting.

Group One preferred their own setting by 8% more than no difference.

DISCUSSION

Even though the sounds being compared were identical, participants in Group One still preferred their own sound setting over what they believed to be a 'peer' setting.

Participants in Group Two showed NO significant difference when they compared their own settings to an 'expert'.

Meaning responses may be offset by the presence of perceived skill that an expert possesses.

> *"Meaning responses can be defined as a change in performance that is not necessarily related to the treatment of interest."*[2]

FACT

The therapeutic alliance between a client and a clinician is MORE impactful than treatment alone.[1]

SOLUTION

Interactive hearing aid fittings, actively seek client input and feedback.

Personal involvement creates a sense of 'buy-in'. Therefore, the more effort one puts into creating an object, the greater the personal value they ascribe to that object.[3]

POTENTIAL CLINICAL IMPLICATIONS

REAL TREATMENT + MEANING RESPONSE = BEST OUTCOME

1 + 2 = 3

NEXT STEPS

This study looked at normal hearing adults. Future research could examine how these effects may be different for those with hearing loss.

Future research could also look into how meaning response can improve client satisfaction and quality of life.

REFERENCES

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[3] Norton, M. I., Mochon, D., & Ariely, D. (2012). The IKEA effect: When labor leads to love. *Journal of Consumer Psychology*, *22*(3), 453-460.