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LETTER TO THE EDITOR
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Communication barriers in caring for people with hearing disabilities

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Dear Editor,

This letter is based on the study published by Valenzuela et al. (1) in 2025. Given the above, we believe it is appropriate to highlight the importance of this research and to further expand the discussion to strengthen inclusive strategies aimed at this population.

Hearing disability represents a challenge for healthcare systems, as it not only affects the clinical aspect but also accessibility and effective communication (2). In this scenario, individuals with hearing disabilities face structural barriers in healthcare settings. The lack of interpreters, limited training of healthcare personnel in sign language, and insufficient institutional awareness constitute significant challenges that hinder the delivery of high-quality care (3).

In this scenario, quality of care is a fundamental indicator for the healthcare system, and its assessment from the patient's perspective becomes even more relevant in populations with specific communication needs, since the interaction between the healthcare professional and the patient becomes a key element in identifying structural gaps that may go unnoticed if only traditional biomedical aspects are considered (4).

These barriers generate mistrust toward healthcare services, negatively affecting diagnosis, treatment adherence, and the perceived quality of care (5, 6). Indeed, inadequate communication may lead to feelings of discrimination and dehumanization in care delivery, even resulting in situations where the professional addresses the companion rather than the patient, thus undermining the patient's autonomy and social well-being (7-9).

Currently, studies on communication barriers in the care of individuals with hearing disabilities remain limited, which hinders the development of evidence-based strategies. Therefore, communication is an essential component of nursing care and the healthcare delivery process. In this regard, it is necessary to incorporate sign language and an intercultural approach to ensure safe, humanized, and high-quality care (10).

In light of the above, it is important to mention the work of Valenzuela et al. (1), whose objective was to determine the care capacity of adults with hearing disability from the Deaf Association of the Region of Lima, the Trébol Association, and the Inmaculada Concepción Deaf Sports Club. The study showed that adults reported an unfavorable perception of the care provided in healthcare settings.

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These findings highlight the need for future research to evaluate the care experience in other populations with disabilities and analyze the role of the family as a communication mediator, explore the communicative self-efficacy of healthcare professionals, and assess the impact of educational interventions related to sign language within healthcare settings. Further exploration of these aspects will not only contribute to knowledge generation but also strengthen strategies aimed at improving professional practice and the patient care experience.

Finally, this letter seeks to motivate students from various academic disciplines, especially Nursing, to address a topic of high social and public health relevance, thereby contributing to the strengthening of a rights-based approach in healthcare. Similarly, it reinforces the importance of recognizing communicative diversity as an essential component of inclusive, humanized, and culturally competent nursing practice.

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IFAF: conceptualization, research, visualization, writing of original draft, writing - review & editing.
FCBC: research, writing – review.

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