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[1]This summary is extracted from the report on the “Consultation on the world report on hearing: implications for the WHO Eastern Mediterranean Region”, July 2021

Citation: Consultation on the world report on hearing: implications for the WHO Eastern Mediterranean Region. East Mediterr Health J. 2022;28(4):314–315. https://doi.org/10.26719/2022.28.4.314

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Introduction

An estimated 22.1 million people currently live with disabling hearing loss in the Eastern Mediterranean Region (EMR) of the World Health Organization (WHO), and this number is likely to increase to over 52 million by 2050 (1). Nearly 80% of these people live in the low- and middle-income countries, where they mostly lack access to the required medical interventions for their condition (2).

Following a request by the World Health Assembly Resolution WHA70.13 in 2017 (3), WHO developed the World Report on Hearing (1), which outlines essential steps for scaling-up the provision of integrated people-centred ear and hearing care services at country level. In July 2021, WHO Regional Office for the Eastern

Mediterranean Region (WHO/EMRO) held a virtual “Consultation on the World Report on Hearing: Implications for the WHO Eastern Mediterranean Region” (4) aiming at: presenting an overview of the global and regional findings of the World Report on Hearing and WHO support tools, resources and initiatives; reviewing the situation of ear and hearing care and efforts to integrate such care into health systems in the EMR; and agreeing on how best to make use of

the World Report in strengthening ear and hearing care in the Region, considering the WHA70.13 and recommendations of the 2019 regional expert consultation for promoting ear and hearing care.

Summary of discussions

The meeting featured a presentation on findings of the World Report on Hearing, which highlighted the main causes of hearing loss, including preventable infectious diseases such as meningitis, measles, mumps, and rubella; exposure to excessive noise; ototoxic medications; ageing; and ear or head injuries. The three main risk factors for hearing loss in the EMR are consanguinity, otitis media, and noise-induced hearing loss. Chronic otitis media was identified as a leading cause of hearing loss among children.

At least 50% of hearing loss cases is preventable if diagnosed and treated early, yet nearly 1 in 3 people aged 65 years and above suffers from disabling hearing loss, and only 16% of those in need of hearing technologies in EMR have access to them (2).

Several countries in the region are making progress in ear and hearing care. For example, Djibouti is advancing early childhood screening for hearing loss and training doctors and midwives to conduct such screening. The Islamic Republic of Iran is implementing neonatal hearing screening, it has developed educational materials on sign language for health care workers and appointed translators for people with hearing disabilities in COVID-19 referral centres. Egypt has expanded its ear and hearing care programme and improved neonatal screening programmes for hearing loss in primary health care units. A newly decreed Karama law ensures that people with hearing loss in Egypt have access to several benefits such as specialized pension schemes, prioritization for civil jobs, and access to tax- and customs-exempt cars, as part of the larger population of persons with disabilities.

As a result of the COVID-19 pandemic, Oman has established virtual and remote ear and hearing care services. It published the 3rd edition of the manual for ear health in June 2020, developed sign language courses for health care workers, and embarked on mass dissemination of educational videos on COVID-19 for persons with disabilities and their caregivers. Pakistan has created audiologist positions at district level hospitals, developed school curricula in sign language for all grades, provided offline low-cost ed-tech learning resources, and is hosting online sign language educational courses targeting the whole country. Guidelines on how to prevent COVID-19 for persons with disabilities, including those with hearing loss, were developed.

Saudi Arabia has made neonatal hearing screening mandatory across the country, including in private clinics, developed workforce capacity and sustainable financing modalities to ensure service continuation, and taken steps to ensure that persons with hearing loss have access to media messages on all national broadcasting channels. The country recently launched a mobile application, Eshraa, which provides services to answer all relevant questions in sign language 24 hours daily. Remote ear and hearing care services, such as remote programming of hearing aids, are being provided to mitigate the impact of the COVID-19 pandemic.

Recommendations

To Member States

Setting up national committees and developing or updating national strategies to facilitate provision of ear and hearing care through Universal Health Coverage.

Including ear and hearing care in essential service packages being developed for Universal Health Coverage.

Adapting WHO materials and resources on ear and hearing care to the country context.

Raising awareness at all levels on hearing loss and hearing care.

Ensuring that hearing screening is integrated into child and school health services.

Including indicators for ear and hearing care in national health information systems.

Initiating actions to address the risk of hearing loss due to environmental, occupational, and recreational noise, including the “Make Listening Safe” initiative.

Integrating ear and hearing care into programmes for the care of elderly people.

Training health care workers, including nurses, general practitioners, and other relevant cadres, in ear and hearing care.

Undertaking national-level prevalence surveys and situation analyses on hearing loss and hearing care.

To WHO

Strengthening engagement of ear and hearing care professionals at national and regional conferences.

Advocating for pre-employment tests for people constantly exposed to occupational noise.

Identifying research priorities and developing multi-country collaborations for research on ear and hearing care.

Mapping available resources, expertise, opportunities, and needs for mutual benefit across countries, including setting up a platform for sharing resources on ear and hearing care.

Strengthening regional collaboration for experience- and knowledge-sharing on ear and hearing care.

Developing a regional position paper and engaging in advocacy on ear and hearing care through a request for a side event in the Regional Committee.

Organizing a webinar on one of the regional ear and hearing care priorities, possibly on newborn hearing screening in the Region, to foster experience-sharing and explore technology and industry advances

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