MULTI-COUNTRY ASSESSMENT OF NATIONAL CAPACITY TO PROVIDE HEARING CARE



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FOREWORD

I am pleased to present the first World Health Organization (WHO) report on the multi-country assessment of national capacity to provide hearing care.

In 2013, WHO released estimates of the global prevalence of hearing loss. 360 million people live with disabling hearing loss globally; the majority of hearing problems could be prevented or treated. Chronic ear infections, meningitis, rubella, noise and use of ototoxic medications are the main causes, and these can be readily addressed through known public health measures. Low- and lower-middle-income countries are the most affected, and are also challenged in the development and provision of good quality and timely ear care services by socioeconomic conditions. A World Health Assembly resolution in 1995¹ recognized that severe hearing loss constitutes a serious obstacle to optimal development, communication and education. It urged Member States to develop national plans within the primary health care framework.

WHO provides technical assistance to its Member States to help them develop sustainable and effective primary ear and hearing care services using the primary health care delivery platform. This assistance comprises technical expertise, educational resources and strategic guidance for capacity development at various levels of the health system structure. WHO also raises awareness about the magnitude and distribution – both geographical and across the life course – of hearing loss, as well as identifying opportunities for its prevention, detection and management. The Organization develops and disseminates recommendations on health interventions and strategies to address the major preventable causes of hearing loss. It supports Member States and international partners to develop, implement and monitor national/ subnational plans to deliver effective ear and hearing care.

This report outlines current information on plans and programmes for the prevention and cure of hearing loss, as recently reported by the WHO Member States. It fulfils a core WHO function of monitoring the status of health system development. WHO acknowledges that the interpretation of results is limited by the low response rate. However, it offers an analysis of the Member State reporting, and uses the information to identify corresponding data and human resource gaps. It also outlines some potential approaches to addressing those gaps. As the first report of its kind, it also constitutes a baseline record against which future progress may be charted.

Dr Oleg Chestnov

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EXECUTIVE SUMMARY

BACKGROUND

A questionnaire-based assessment was launched by the World Health Organization (WHO) in 2012 to assess the capacity of Member States to develop and implement national or subnational plans and programmes focused on ear and hearing care. The current report provides a global picture of resources available to prevent, diagnose and manage hearing loss.

METHODS

A questionnaire was developed and shared with Member States through WHO regional and country offices. Information was sought from the ministries of health. Responses were received from 76 of 154 Member States (with country offices). For countries where a WHO country office does not exist, and those that did not respond to the survey, contact was established with nongovernmental agencies and experts working in the field of ear and hearing care, where possible. A literature search which focused on the theme of the survey was also conducted. Through these alternate sources, information was gathered for another 19 Member States.

The key findings pertain to the analysis of information received from 76 Member States through their ministries of health, unless specified otherwise.

KEY POINTS

- There is an overall scarcity of epidemiological evidence regarding prevalence of hearing loss and ear diseases in Member States.
- There is a lack of information related to human resources for ear and hearing care as well as national/subnational plans/ programmes among Member States.
- Human resources for ear and hearing care are unequally distributed in the world, with a greater concentration of resources in the high- and upper-middle-income countries.
- National committees to promote and develop plans for ear and hearing care are in place in 20 of the participating Member States that responded to the questionnaire.
 Implementation of such plans is reported by 32 of the responding countries.

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