

Community Hearing Awareness Outreach Program

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Objectives: The purpose of this presentation is to create universal hearing awareness, especially in underserved communities of developing world. We present a model of audiology services at a grassroots level and highlight the challenges, limitations and follow up of delivery model. The effort is to train local healthcare personnel to conduct pure tone audiometry and keep a record of baseline audiograms, followed by hearing health care providers.

Background: Audiology is nearly nonexistent in Pakistan, a population of approximately 200 million. 67% of the population reside in rural areas and rely on available health care services in their respective jurisdictions. Audiology services are very limited across the country. Most of the hospitals do not have basic audiometry services. Some major Private hospitals have limited services at an exuberant price. There are approximately 20 foreign trained, Master level qualified Audiologists in the country of 200 million people i.e. one Audiologist per 10 million people. Whereas, the country has advanced medical and surgical options for health care but the field of Audiology has been introduced quite recently in the past 5 years. There are 5 undergraduate programs in Audiology with little mentorship opportunities.

Methods: We initiated this project 5 years ago. We selected a small village, Nara Sagri, District Attock, Pakistan. It is about 160 KM from the residential city of Islamabad, Pakistan. The village population is approximately 5,000. I used my personal portable Interacoustics Audiometer, AD 25, an AudioScan for real ear measurement, otoscope and cerumen management equipment. We initiated with Community Hearing Outreach program for hearing assessment only and soon realized the immense gap in the services and affordability of hearing aids.

Results: We have been able to test 150 individuals, both men and women, seniors and children. We were able to diagnose type of hearing loss, provide medical prescriptions if needed and referred to local ENT specialists for surgical interventions. For sensorineural hearing loss, select and dispense used hearing aids to 50 eligible candidates for years 2016 & 2017. (Courtesy of Canadian donors at Miracle Ear Canada Clinics)

Conclusions: There is a need to create hearing health awareness in developing world and work towards achieving early hearing detection and professional follow up. Efforts are needed to train local health care workers to perform basic audiometry.