



# **The National Ear and Hearing Care Plan 2018-2024**

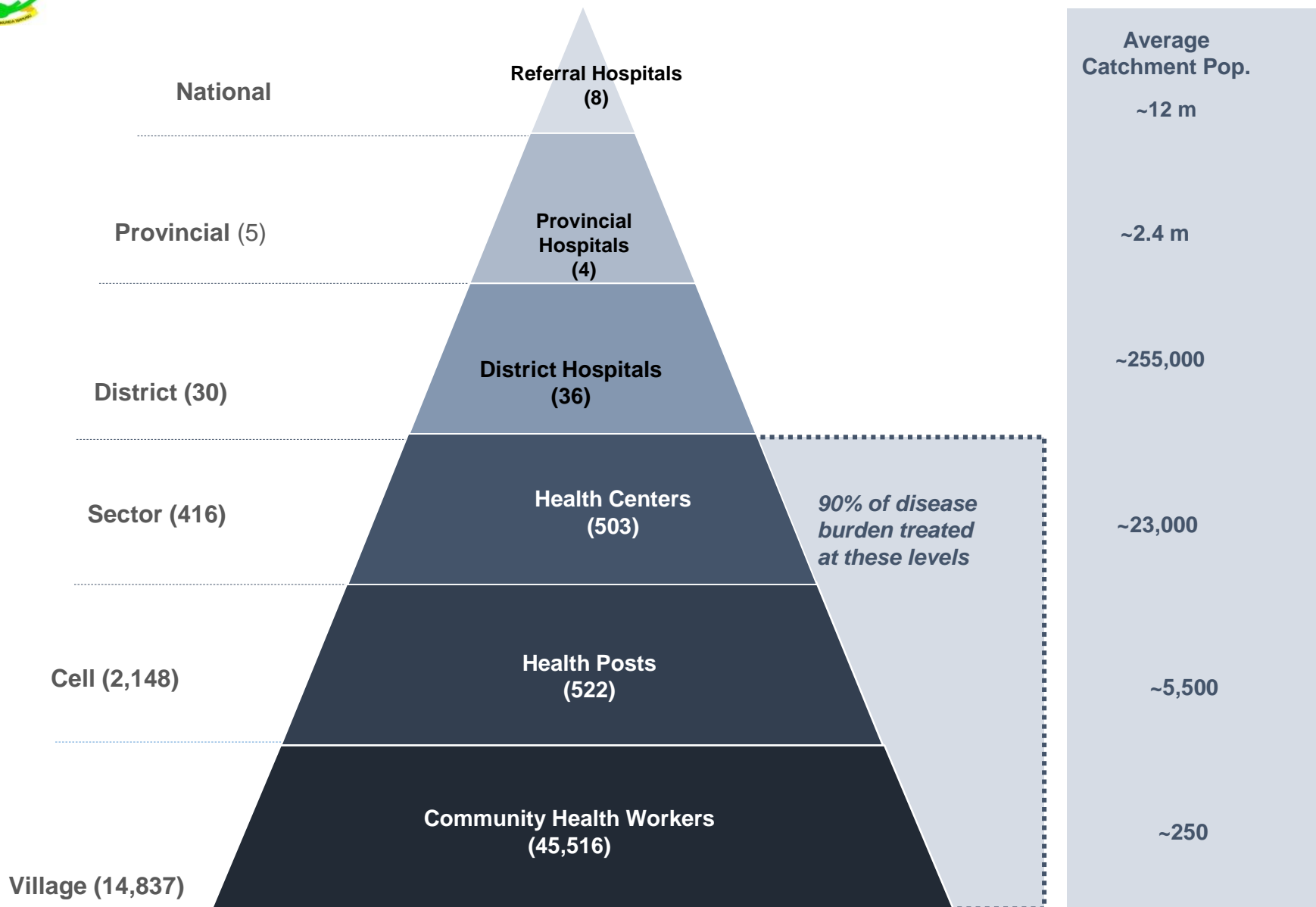


# Outline

- Overview of the health system in Rwanda
- Process of the NEHCP Development
- Background
- EHC in Rwanda: Current Status and challenges
- Vision and Strategic Objectives
- NEHCP Priorities
- Key strategies and interventions



# Rwanda's Health System





## Process of the NEHCP Development

- The development of the “situation analysis” to get a baseline information for Ear and Hearing Care in Rwanda
- Two consultative workshops:
  - collected views and inputs from key stakeholders
  - agreed on situation analysis, priorities, strategic objectives and interventions
- Development of Draft NEHCP in collaboration with the key stakeholders and with both technical and financial support from Starkey Hearing Foundation



# Background

Worldwide(WHO 2018):

- 466 million people worldwide affected by hearing loss, 34 million of which are children
- Almost 90% cases live in low and middle income countries
- Different causes: congenital factors, diseases, age, harmful noise, injury, ototoxicity
- Different negative consequences: speech and language acquisition, education, health, social, job opportunities, economic/poverty

# Background

- 60% of causes of hearing loss in children and 50% in adults are preventable
- WHA urged Member States in 1995 to prepare national plans for prevention, early detection and management of avoidable hearing loss within the framework of the PHC system.



## EHC in Rwanda: Current Status & challenges

- Prevention: MCH programs: EmONC, EPI, IMCI
- ENT units in referral hospitals. Some private clinics
- ENT guidelines for existing services in referral hospitals
- Public health facilities package of services (new)
- Existing legal (international, national), regulatory and institutional framework to protect people with disabilities
- Few EHC rehabilitation services: mainly faith based organizations



## EHC in Rwanda: Current Status & challenges (Cont'd)

### Rwanda NISR 2012 Census:

- Overall, 446,453 persons with disabilities aged 5 and above are living in Rwanda
- 8% of all PWDs victims of hearing loss and deafness
- 4% of all PWDs: speaking impairments
- 5% of U5 with ear infections
- > 90% of hearing loss is aidable
- Most causes: ear diseases (otitis media), congenital causes (pre, perinatal), infectious diseases, head trauma, age.



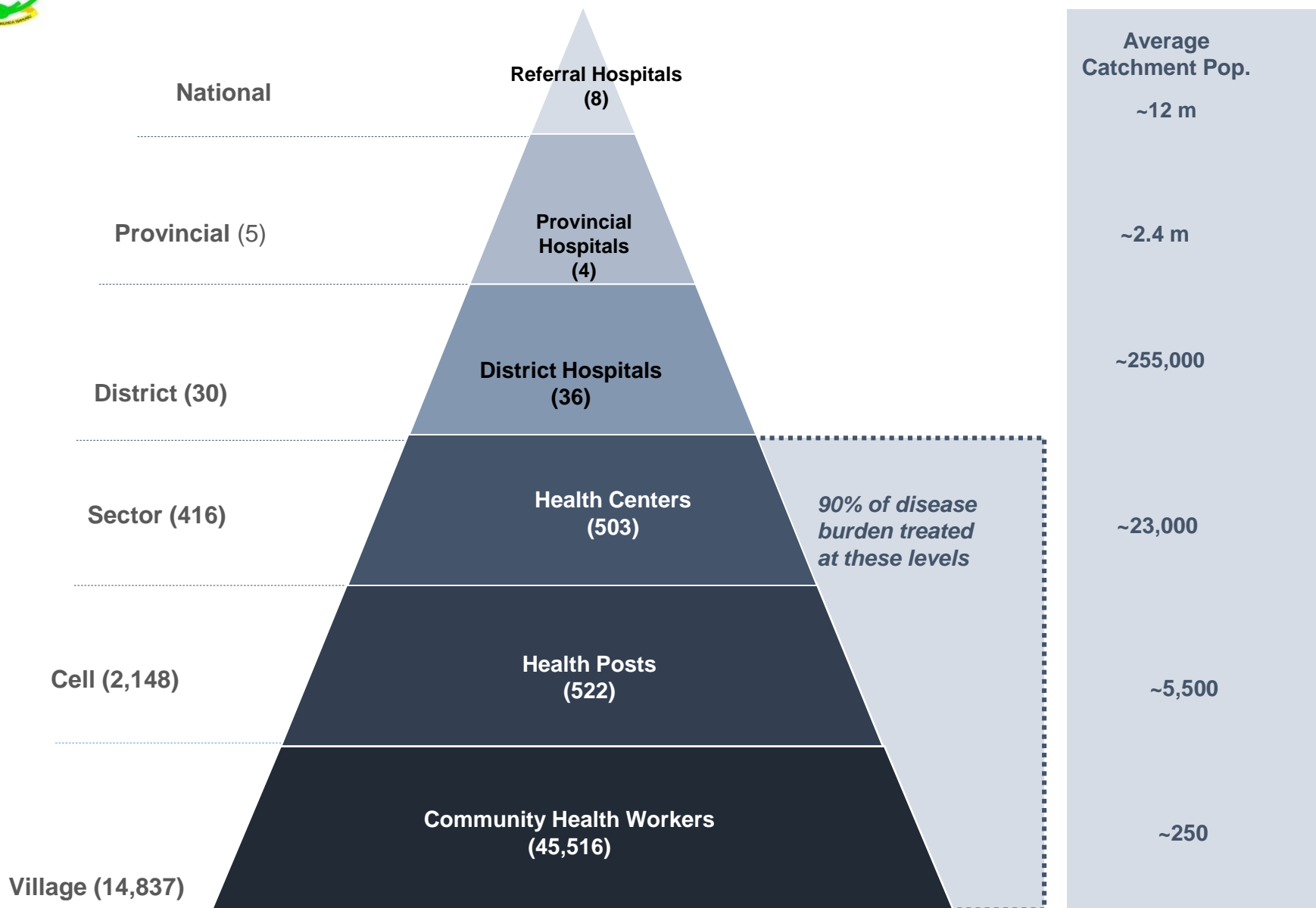


## EHC in Rwanda: Current Status & challenges (Cont'd)

- Services mainly available at the tertiary level and mostly in urban areas
- Shortage of skilled EH care providers
- Limited number of infrastructure and equipment for EHC services and rehabilitation centers (deaf centers)
- Hearing devices not easily affordable
- Public awareness is still low (hearing loss: silent problem)



# EHC NEEDS VS UNMET NEEDS





# Vision and Strategic Objectives

- **Vision:**

Contribute to the decrease of the prevalence and incidence of hearing loss in Rwanda and improving the quality of life of Rwandans

## Strategic Objectives

- To ensure effective governance in relation with Ear and Hearing Care
- To promote public awareness and advocacy through appropriate and effective IEC strategies
- To strengthen institutional capacity for EHC service delivery

### **HSSP IV:**

- Strengthening the prevention of hearing loss
- Early identification and treatment of causes of preventable HL
- Investing in rehabilitation services + making affordable hearing devices.



## NEHCP Priorities

Priorities set in line with those of HSSP IV on Ear and hearing care:

- 1. To prevent avoidable causes** of hearing loss and deafness: disease or injury (trauma, noise pollution).
- 2. To raise awareness** of the public (prevention, early detection of causes, advocacy)
- 3. To establish programs for early** diagnosis and treatment of ear problems responsible for hearing loss and deafness.
- 4. To develop institutional capacity** for ear care services by providing support for infrastructures, equipment and capacity building to EH care providers
- 5. To strengthen the existing inter-sectoral collaboration** for integrated and continuous rehabilitation of persons with disabling hearing loss



# Key strategies and interventions



## Challenges/Gaps

## Strategies/Interventions

**Limited coordination of stakeholders, interventions & reporting mechanisms on EHC interventions**

- Integration of EHC in the existing coordination structures at central and decentralized levels.
- Develop and implement national guidelines for the implementation of EHC interventions

**Legal and policy framework for EHC not satisfactorily implemented**

- Review existing ENT guidelines and adapt them to the existing structure of healthcare delivery from the community to referral level
- Strengthen the enactment and enforcement of legal and regulatory framework

**Strengthening the leadership and governance of efforts for Ear and Hearing Care in Rwanda**



## CHALLENGES

- **EHC services centralized in referral hospitals**
- **EHC minimum package not well defined at levels of the Rwandan healthcare system**
- **Limited number of EHC medicines from the essential medicines list**

## STRATEGIES/INTERVENTIONS

- Develop national outreach program for specialized EHC services
- Decentralize and integrate EHC services across the Rwanda Healthcare system
- Define and implement minimum packages of EHC services at each level of the Rwanda healthcare system
- Review existing EHC treatment and services packages
- Update the existing health services package at different levels.

Service delivery



<b>Challenges</b>	<b>Strategies/Interventions</b>
<ul style="list-style-type: none"><li>• <b>Shortage of equipment and infrastructure at all levels</b></li></ul>	<ul style="list-style-type: none"><li>• Ensure that HCs, DHs and Referral Hospitals are equipped with equipment and infrastructure for provision of EHC services at their respective levels.</li></ul>
<ul style="list-style-type: none"><li>• <b>Limited accessibility and availability of medical products, commodities and devices for EHC</b></li></ul>	<ul style="list-style-type: none"><li>• Adopt and implement a national policy for ensuring availability of and accessibility to EHC medical products, commodities and devices that are not covered by health insurances.</li></ul>

## Infrastructure and equipment





<ul style="list-style-type: none"><li>• <b>EHC procedures and devices not available at all levels</b></li></ul>	<ul style="list-style-type: none"><li>• Inclusion of hearing devices in the current tariffs for reimbursement by existing health insurance schemes</li><li>• Advocate for inclusion of procedures in the WHO essential list of medicines and procedures</li><li>• Engage the Private Sector to invest in hearing aids manufacturing in Rwanda</li></ul>
<ul style="list-style-type: none"><li>• <b>Limited accessibility to existing EHC facilities and services</b></li></ul>	<ul style="list-style-type: none"><li>• Ensure the integration of EHC services into day to day health care service delivery at every level of Rwanda healthcare system</li></ul>

Infrastructure and  
equipment



<b>CHALLENGES</b>	<b>STRATEGIES/INTERVENTIONS</b>
<ul style="list-style-type: none"><li>• <b>Limited number of skilled personnel at all levels</b></li></ul>	<ul style="list-style-type: none"><li>• Organize in-services training for personnel at different levels (CHW, Nurses, Medical Doctors)</li><li>• Strengthen and continue investing in the local training of specialized healthcare providers required at every level of EHC</li></ul>



## **CHALLENGES**

- **EHC indicators not clearly defined in the Rwanda HMIS**
- **EHC data at Health Facility & rehab centers not routinely and properly collected**
- **Limited number of researches on EHC in Rwanda.**

## **STRATEGIES/INTERVENTIONS**

- **Integrate EHC in the Rwanda Health Management Information Systems**
- **Establish and strengthen mechanisms to track data on EHC services**
- **Promote targeted researches on EHC interventions in Rwanda.**

**Monitoring and Evaluation,  
Information System, Research**



## CHALLENGES

- **Limited knowledge about risk factors for hearing loss and impairment.**
- **Limited compliance with laws, policies and regulations for minimizing risk factors for hearing loss or accidents.**

## STRATEGIES/INTERVENTIONS

- Raise the awareness of the general population on all aspects of ear and hearing care.
- Ensure that laws, policies and regulations for mitigating risk factors for hearing loss are implemented and enforced by all concerned parties

Public awareness raising on EHC



<b>Institutional capacity development</b>	<b>2018-2019</b>	<b>2019-2020</b>	<b>2020-2021</b>	<b>2021-2022</b>	<b>2022-2023</b>	<b>2023-2024</b>	<b>Total</b>
<b>Infrastructure</b>	2,834,064	2,834,064	4,464,444	4,384,699	4,198,705	379,140	19,095,116
<b>Trainings</b>	152,000	792,000	724,000	922,000	884,000	934,195	4,408,195
<b>Service delivery</b>	115,000	115,000	117,500	117,500	115,000	110,000	690,000
<b>Medicines, Commodities, HDs</b>	0	600,000	950,000	1,100,000	1,100,000	1,050,000	4,800,000
<b>M&amp;E, HIS, Research</b>	75,000	10,000	30,000	10,000	10,000	30,000	165,000
<b>Governance</b>	39,000	48,000	48,000	48,000	48,000	48,000	279,000
<b>Logistics</b>	65,000	25,000	32,500	32,500	32,500	32,500	220,000
<b>Grand Total</b>	<b>3,353,064</b>	<b>4,547,064</b>	<b>6,473,444</b>	<b>6,716,699</b>	<b>6,676,199</b>	<b>2,549,640</b>	<b>29,657,311</b>

Summary expenditures by Healthcare level (USD)

# Acknowledgement

- MoH
- Starkey Hearing Foundation
- TWG
- DPs

THANK YOU