

REPORT



WORLD HEARING DAY

2024



CHANGING MINDSETS

Let's make ear and hearing care a reality for all!



04th March, 2024

Organized by

Central Health Education Bureau (CHEB)

in association with

National Programme for Prevention and Control of Deafness (NPPCD)

Directorate General of Health Services, Nirman Bhawan, New Delhi

Table of Contents	Pages
1. List of Acronyms	2
2. Introduction	3
3. Process of observance of the World Hearing Day, 2024	3
4. Inauguration and welcome note address	4
5. Opening remark	4-5
6. Opening address 1	5
7. Opening address 2	6
8. Key Note Address	6-7
9. Session 1- Review and up-dation of IEC materials of NPPCD	7-11
i. Appraisal of existing IEC materials of NPPCD	8
ii. Recent advances in hearing loss and ear care to develop as IEC	8-9
iii. Group work to identify gaps & finalise the IEC materials	9-11
10. Session 2 – Current status of NPPCD programme	12-13
11. Session 3 – Report presentation of 2 review meetings of NPPCD	13-14
12. Session 4 – Panel discussion for developing guidelines of NPPCD	14-15
13. Way forward	16
14. Vote of thanks	16
15. Pictures of Group works (1, 2 & 3)	17-19
16. Glimpses of the observance of the World Hearing Day, 2024	20
17. Annexure – 1, Programme schedule	21
18. Annexure – 2, List of participants - Group work	22

List of acronyms

AIISH - All India Institute of Speech and Hearing

ASHA - Accredited Social Health Activist

AIIMS - All India Institute of Medical Sciences

BERA - Brainstem Evoked Response Audiometry

CCC – Central Coordination Committee

CHEB - Central Health Education Bureau

CI - Cochlear implants

DGHS - Director General of Health Services

Dte.GHS - Directorate General of Health Services

IEC - Information Education Communication

LHMC - Lady Harding Medical College

MAMC - Maulana Azad Medical College

MoH&FW - Ministry of Health and Family Welfare

NGO - Non Government Organization

NPO - National Programme Officers

NHM - National Health Mission

NPHCE - National Programme for the Health Care for the Elderly

NPPCD - National Programme for Prevention and Control of Deafness

RBSK – Rashtriya Bal SwasthyaKaryakram

RKSK – Rashtriya Kishor Swasthya Karyakram

RMLH - Ram Manohar Lohia hospital

SJH - Safdarjung hospital

UNHS - Universal Newborn Hearing Screening

WHO - World Health Organization

Introduction:

Hearing loss is a significant public health problem, which can occur due to impacted ear-wax, loud noise, aging, ear-infections, and genetic causes. Over 27,000 children are born deaf every year in India. Hearing impairment or loss is often neglected and in most cases the diagnosis is delayed.

World Health Organisation (WHO) has estimated that more than 1.5 billion people or 20% of the global population suffer from hearing loss; majority of these (1.16 billion) have mild degree of hearing loss. However, a substantial portion, or 430 million people (i.e. 5.5% of the global population) experience moderate or higher degrees of hearing loss, which can significantly influence their lives, their families, society and countries. It is estimated that some 2.5 billion (1 in every 4 people) will experience hearing loss by 2050. Hearing loss contributes to both social isolation and loneliness at all ages, more specifically in women and older adults because of decreased participation in activities, or by having a smaller social network.

The Central Health Education Bureau (CHEB) works on health education & health promotion. It develops and disseminates information, education & communication materials, provides trainings and conducts behavioral research on various health issues. Considering the profound impact of hearing impairment on individuals and communities, CHEB in collaboration with National Programme for Prevention and Control of Deafness (NPPCD) **observed World Hearing Day, 2024** with the theme "**Changing mindsets: Let's make ear and hearing care a reality for all,**" and following objectives:

- (i) Review and update the information, education & communication (IEC) material of NPPCD
- (ii) Bring the various stakeholders in ear & hearing care, together to discuss, review and assist in revision of the operational guidelines of the NPPCD.

Participants:

A total of 55 participants attended the World Hearing Day, 2024 event, including officers from NPPCD, Dte.GHS, Central Health Education Bureau (CHEB), National Professional Officer, WHO, State Nodal Officers (SNOs) of NPPCD, Representatives of Department of E.N.T, Community-Medicine & Audiologists from Maulana Azad Medical College (MAMC) All India Institute of Medical Sciences (AIIMS), Safdarjung hospital (SJH), Ram Manohar Lohia hospital (RMLH), Lady Harding Medical College (LHMC), All India Institute of Speech and Hearing (AIISH), and some civil society organizations.

Process of observance of the World Hearing Day, 2024:

The workshop included interactive lectures; panel discussion, group work, presentation on different themes for development of IEC, along with open session for participants to understand their perspectives and enhance knowledge on the issue of preventing hearing loss.

Inauguration of the observance of the World Hearing Day, 2024:



On this occasion dignitaries and participants were welcomed and invited for lighting of the lamp, as part of formal inauguration of the World Hearing Day, 2024 at CHEB followed by honouring them by presenting green welcome.

Director, CHEB was then invited for delivering the welcome address.

Welcome address by Dr. Gowri N. Sengupta,



Dr. Sengupta, welcomed Prof. (Dr.) Atul Goel, DGHS, Dr. Naresh Panchal, Addl. DDG, Dte.GHS, along with other respected dignitaries distinguished guests, speakers, faculty members, National Programme Officer (NPO) and representatives of WHO, civil society organizations and others at CHEB. She briefed the participants about the agenda, objectives and expected outcome of this event. After the inaugural session, first half of the day shall be devoted to appraisal of existing IEC material of NPPCD and group work on three different themes wherein participants would brainstorm on development of IEC.

The second half shall focus on current status of NPPCD programme, along with a panel discussion for the revision of existing operational guidelines of NPPCD, followed by open session, closing remark and vote of thanks.

Further, Dr. Gowri informed all participants that the program was designed to involve experts on related subjects of ENT, Community-Medicine, Audiology, etc. to seek their views and suggestion for development of IEC materials w.r.t. NPPCD programme, through collective group work. She also requested all the participants for their active and effective engagement during the event.

Opening remark by Dr. Naresh Panchal, Addl, DDG, Dte.GHS



Dr. Panchal, delivered the opening remarks and set the momentum for the workshop. He highlighted the importance of the World Hearing Day declared by WHO and observed every year on 3rd March, since the year 2007, all over the world and that in the same year 2007, the NPPCD program was launched in India.

Dr. Naresh Panchal stated that for a common man, be it a lawyer, a student, a musician, or a teacher, the World Hearing Day may mean differently, but in every situation, we first need to be able to hear properly, and for which we should have normal, functioning ears. Hearing ability is a great blessing for all of us from the nature, which is possible only with this wonderful sensory organ –‘Ear’, the importance of which is realised only when we lose it or start losing it. In today’s world, the noise pollution has emerged as the biggest threat to hearing ability, which needs to be addressed at all levels.

He emphasized that on this special day, apart from the NPPCD program division, Dte.GHS, the various medical/allied health professionals and all others working in the field of care of ear and hearing should come together to talk, to discuss and deliberate on how to improve the life of people with hearing impairment and deafness. He added that the discussions held today would go a long way to revise existing operational guidelines of NPPCD and its IEC material.

Dr. Naresh Panchal thanked Prof. (Dr.) Atul Goel, DGHS for taking special interest and initiative for the rejuvenation of NPPCD programme, with the Secretary (H), MoHFW, in establishing communication with the SNOs (NPPCD) of various States/UTs and bringing all together at one platform. He specially thanked Dr. Gowri N. Sengupta, Director, CHEB and the team CHEB for assisting programme division in organising World Hearing Day, 2024.

Opening address 1 by Dr. Mohammed Asheel, National Professional Officer, WHO



Dr. Asheel, started his opening address by quoting Director-General, WHO "Hearing loss has often been referred to as an **invisible disability**, not just because of the lack of visible symptoms, but because it has long been stigmatized in communities and ignored by policy-makers".

Further, Dr. Asheel, emphasised that during the last few years, improvement in programme has been observed under the guidance of DGHS and Addl DDG, NPPCD. Initiative has been taken to revise this 17 years’ old National Programme. One of the key visible efforts was to constitute Central Coordination Committee (CCC) to conduct meeting for establishing linkages between different stakeholders for revamping the programme.

He talked about the theme of the day and mentioned that changing mindset is an integral part of the issue which can be addressed through health education and health promotion. He emphasised that CHEB can play an important role in taking this issues forward and spreading awareness through IEC and training programmes.

At the end, he reiterated WHO’s commitment to address the ear health and hearing problem and ensured to provide all kind of support to NPPCD.

Opening address 2 by Prof. Dr. M. Pushpavathi, Director, AIISH, Mysore



Prof. Dr. Pushpavathi stated in her opening remark about the beautifully designed NPPCD programme, launched in 2007. She mentioned that since last 4-5 years, the programme pace has slowed down and despite all efforts made to ensure proper implementation the program did not see expected progress. As a result, the apex authority decided to revisit and revise the operational guidelines of the NPPCD.

Further, she thanked DGHS and Addl. DDG, NPPCD for having faith in her and entrusting her with the responsibility of heading the Central Coordination Committee, to establish linkages with stakeholders and get their opinion/inputs for redesigning the NPPCD programme and accelerating the pace of the programme. She mentioned that all efforts would be made to bring this issue in the core agenda.

She emphasised on new born hearing programme and requested DGHS for support. She also highlighted the role of audiologists and shortage of human resource for screening of ear for hearing problem. She stressed on the need to focus on youth who are more exposed to unsafe listening and accepted that an awareness programme is much needed to address the issue. She thanked CHEB for partnering with NPPCD. Today is an opportunity to contribute towards the betterment of the NPPCD.

Key Note Address by Prof. (Dr.) Atul Goel, DGHS



The key note address was given by Prof. (Dr.) Atul Goel, who shared his views and experience about hearing loss. He informed that for the first time, a proper Central Coordination Committee has been constituted, which has also conducted two meetings with the SNOs (NPPCD) of all States/UTs. However, despite all efforts, 14 states still did not participate in these meetings, which clearly reflect that "Hearing loss" is not a glamorous disease as compared to other diseases like Diabetes, Stroke, Blindness, Cardiovascular etc".

He stated that problem of hearing loss is something which is not appreciated or not even diagnosed. Another major issue is the lack of dedicated manpower in this sector. At the Central Government hospitals, including SJH, RMLH, the experts like-Audiologists, speech pathologists, etc are not in position even. Only LHMC has this facility which works on detection of deafness and hearing impairment for disabilities.

Further, he stated that the data is not being reported from across all states and that is perhaps one of the reasons why people do not have idea about the extent of the problem in various age groups. He emphasised that generally there is some focus on new born screening because there is a need to help them in speech development, but information about the problem among rest of the age groups is lacking. He highlighted that today's youth uses earphones for long duration and has quantum of exposure to loud noise. There is a need to assess the hearing capability amongst youngsters and that need to be focused on priority. He categorically mentioned about the following issues which cause hearing loss.

- i. Loud music
- ii. Noise pollution
- iii. Drugs/Medicines
- iv. Metabolic diseases
- v. Heavy metals

Finally, he reemphasised upon the need to work more on preventive measures for hearing impairment and deafness, esp.- role of IEC and appropriate health education for all age groups. He ended his speech by saying that “this is the time to educate people and pay special attention to youth population to identify signs, symptoms and other consequences of hearing issues”.

Vote of thanks by Dr. Mohammad Shafeeq, Medical Officer, CHEB

The vote of thanks was delivered by Dr. Shafeeq and he thanked all distinguished guests, speakers and participants for attending World Hearing Day, 2024. He once again requested participants for their active engagement in the rest of the sessions and group work.

SESSION-1

Review and up-dation of IEC material of NPPCD



One of the important session of the day was to review and up-date the available IEC materials under NPPCD programme. The first session had two presentations and a group work on different themes for exploring the opportunity to develop IEC materials. The chairperson and moderator of the session kept the participants engaged to get their valuable inputs/suggestions on IEC.

Chairperson: Dr. Amod Laxmikant Borle, Associate Professor, Maulana Azad Medical College (MAMC)

Moderator: Dr. Samuel Rajan, ENT specialist, Ram Manohar Lohia hospital (RML)

Presentation 1: Appraisal of existing IEC materials of NPPCD by Mr. Shashi Kant Yadav, Consultant-Social Science, CHEB:

Mr. Yadav, briefed the participants about available IEC materials on NPPCD shared by the central programme division. The total informative IEC materials are eighteen in numbers in both languages i.e. nine IEC in Hindi and remaining nine materials are in English.

The current IEC materials focused on different target groups such as general public, school students, new born and pregnant mother for creating awareness. The available materials focused on the followings;

- i Ear care
- ii Primary ear and hearing safety
- iii Ear care for child (Suggestions for the teachers)
- iv Encourage the child with hearing impairment
- v Ear Discharge ? Beware !Protect your ear
- vi Step wise approach to check ears and hearing
- vii Healthy mother and healthy child etc
- viii Selfie stand with message “Ear and Hearing care for all”

He invited comments from experts and participants, whether these existing IEC materials can be utilised in any formed

Recent advances in hearing loss and ear care to develop as IEC by Dr. Raman Sharma, Assistant Professor, ENT & Head-Neck Surgery, MAMC



Dr. Sharma made a presentation which focused on development of IEC on hearing loss and ear care. He informed participants about the burden of hearing loss at global and National level. He mentioned that rehabilitation was a key aspect that needs to be taken care to address hearing loss. Around 1.5 billion people experience hearing loss, of which at least 430 million require rehabilitation services. He discussed about the anatomy of ear for understanding the importance of ear care.

Further, he shared the types of hearing loss and its preventive measures, which was focused on primary, secondary and tertiary prevention. He also elaborated about personal hearing protective devices. Dr. Sharma shared the status of Universal Neonatal Hearing Screening (UNHS), which focuses on early hearing detection and intervention. Kerala is the only state in India which implemented UNHS programme, while Delhi has launched UNHS on 3rd March, 2023.

He explained different hearing – assistive technologies and their use. He also informed participants about government schemes like Assistance to Persons with Disabilities (ADIP)

for purchase/ fitting of aids / appliances and Delhi Arogya Kosh (DAK) which provides financial assistance to people having poor affordability. At the end he emphasised upon the importance and use of IEC materials which may focus on causes, sign & symptoms, different hearing devices & their importance and Government schemes which provide financial support etc.

Group Work

After the session and with the permission of Chair, the participants were divided in three different groups and it was ensured that at least one ENT specialist, one community medicine and Non Government Organization (NGO) representatives or audiologist be part of each group along with other members. Moderator facilitated the process and three themes (i) IEC for print media, (ii) materials for audio/video spots and (iii) IEC for community engagement were allotted to groups for brainstorming on key messages or information that should be part of the revised IEC materials.

The group members conducted detailed discussions about the existing IEC materials available in this domain. Each member shared their perspectives and came up with different ideas for possible IEC materials targeting different stakeholders, including children, school teachers, elderly, traffic police, industrial workers, new born and pregnant women, etc. Each group identified a leader amongst themselves for presenting their group outcome.

Group- 1, Presentation (IEC for print media)

The group members conducted deep discussions about the existing IEC materials available in this domain. Each member shared their perspectives and came up with different ideas of possible IEC materials targeting different stakeholders, including children, school teachers, the elderly, traffic police, industrial workers, Newborn and pregnant women, etc.

The group came up with the catchy slogans and tag lines for proposed IEC materials, accompanied with attractive pictures

• Slogans:

- जन्म के तुरंत बाद, बच्चे की सुनाई की जांच अवश्य कराये।
- बच्चे और माँ का सम्पूर्ण टीकाकरण कराये।
- कान में भारीपन दर्द या चक्कर हो तो तुरंत जांच कराये।
- कुछ दवाइयों से जन्मजात बहरापन हो सकता है। डॉक्टर की सलाह के बिना दवाइयाँ न लें।
- यदि आपका बच्चा आवाज़ पर चौंकता नहीं है, तो सतर्क रहें और सुनाई की जाँच करवाएँ।
- लगातार Headphone/Earphone इस्तेमाल करने से आपकी श्रवण शक्ति को नुकसान पहुँच सकता है इससे दूर रहें।
- श्रवण रक्षा उपकरण का इस्तेमाल करे।
- खुद से कान साफ़ न करे।

- **Tag Lines:**

- हमारे कान, हमारी जान,
- बढ़ाओ ज्ञान, सुनने के उपकरणों का सावधानी से करें इस्तेमाल ।
- सुनने का महत्व जानिये और सुनने की सेवाएं प्राप्त कीजिए।
- समय पर पहचान, समय पर उपचार।
- नो हॉर्न डे।

- Develop IEC materials on 10-12 pointers for easily identification of ear and hearing problem at community level

The discussion concluded with a proposal to implement a ‘**NO HORN DAY**’ to raise awareness about impact of noise on hearing health.

Group- 2, Presentation (IEC materials for audio/video spots)

The aim of the group was to explore and identify gaps & finalise the IEC materials and modalities”. The group engaged in a comprehensive discussion and agreed that it is necessary to have audio/video spots for hearing loss.

- **New Born Hearing Loss:** Early intervention services, such as hearing aids, cochlear implants, and speech therapy, can help children with hearing loss develop age-appropriate communication skills and reach their full potential.
- **Hearing Loss in School Children:** Implement universal hearing screening programs in schools, and screenings can be conducted at specific grade levels or at regular intervals throughout a child's school years.
- **Safe Listening Habits:** Develop AV for safe listening habits such as for how long any person/individual should use headphones, should indulge in loud music such as weddings, religious gathering etc
- **Occupational Hearing Loss:** Educate about the causes and consequences of occupational hearing loss, Promote the use of personal protective equipment (PPE), such as earplugs and earmuffs, to reduce exposure to hazardous noise levels. Provide information on how to access hearing screening services.
- **Age related Hearing Loss:** Provide information on age-related hearing loss, prevention strategies, and available interventions.
- **Stigma of Hearing loss aids/Cochlear implants:** Provide informative content, testimonials, and success stories to challenge stigma and promote acceptance.
- **Preventable causes:** Provide information regarding improper ear care practices, such as inserting objects into the ear canal (e.g., cotton swabs, hairpins).
- **Role of Parents/Caregivers:** Educational materials about risk factors, signs, and symptoms of hearing loss, and actively seek information about available resources and support services.

Each AV should be of 20-30 seconds with specific messages. The messages should be simple and crisp and AV should start right from prevention till management.

- **The other ideas and suggestions from all the team members were:**
 - Brand Ambassador: Bollywood celebrity can be involved in the program and can be made brand Ambassador.
 - Radio Jingle
 - TV/ Theatre advertisements 2-3 minutes
 - Social Media advertisements 2-3 minutes
 - Caller tune for mobile focus on awareness on ear & hearing problem.
 - Success stories of people who are already using hearing aids/ implants can be shared

Group- 3, Presentation (IEC for community engagement)

The group members involved in profound discussions and each member shared unique perspectives and experiences. At the community level, the group explored strategies for reaching out to diverse demographic groups to promote ear care and prevent hearing loss. The suggestions were;

- Ear care initiatives can be seamlessly integrated into Health Melas within the existing Ayushman Arogya Mandir framework as a vital component of primary health care
- Accredited Social Health Activist (ASHA) workers can undergo sensitization, training, and reorientation to incorporate awareness activities alongside their existing responsibilities
- Integrating hearing health promotion into the existing programmes i.e. Adolescents (Rashtriya Kishore Swasthya Karyakaram), older people (National Programme for the Healthcare of Elderly), Pregnant mothers and Newborn, etc
- Health educate and awareness in occupational settings such as factories, where workers, expose to noise pollution. Provision of screening for the factory workers for hearing impairment and sensitisation for importance of ear care.
- Cultural events and gatherings play music with high volumes sometime exceeding the permissible limit. Creating awareness on the potential harm caused by loud music, law enforcement agencies can ensure compliance with noise regulations.
- Engagement of NGOs for conducting health camps and facilitating the screening for hearing impairment at community level.
- Awareness initiatives targeting labour rooms, post-natal wards, and integration with the Reproductive and Child Health Unit, Special New-born Care Unit etc
- Conduct research in this domain for gaining insights from the ground level to understand about effectiveness of information, Education and Communication (IEC) activities.

SESSION-2

Current status-National Programme for Prevention & Control of Deafness-NPPCD by Dr. Naresh Panchal, Addl. DDG, Dte.GHS



Dr. Panchal initiated the session by explaining the rationale behind WHO declaring observance of World Hearing Day across the world on 3rd March every year, as well as the launching of National Programme for Prevention and Control of Deafness (NPPCD) in India, both of which happened in the year 2007. He informed that NPPCD, is a 100% centrally sponsored scheme, which was started on pilot mode in only 25 districts of country, spread over 11 States/UTs, in 2007, and at

present it is being implemented in 595 districts across the country.

Dr. Panchal then stated briefly about the goal, the objectives of the NPPCD program and the extent of deafness problem in India, whereby hearing disability is the 2nd most common disability in India (as per NSSO 2001 report). The Estimated prevalence of Hearing-impairment is approx. 6.3 % (as per population based survey of 2001). He informed about common causes of hearing loss & deafness, like - i.e. Impacted Ear wax, Infections of ear (CSOM), Congenital, trauma-induced, etc.

He talked about the existing NPPCD guidelines document, which mentions the various components like, (i)-organizational structure at centre, state, district and sub-district levels of the country, (ii)- the training activities undertaken at 7 levels from the top to grass-root workers' level, (iii) the various health services delivered at primary, secondary & tertiary levels for ear & hearing care, in the community. He also informed that, the activity of provision of hearing-aids to the needy, is being done as rehabilitation, but, it is by Department of Empowerment of Persons with Disabilities (DoPWD-Divyangjan), under the Ministry of Social Justice & Empowerment (MoSJE).

He expressed great concern about the gradual and consistent decline in activities done under the NPPCD, over the past few years and gave the available data from few of the states/UTs, which did report at least, according to which only about 6,58,551 number of deafness cases were examined in 1 year time, in a country with population of 140 crores; only 45,107 number of persons were being referred for rehabilitation; and only 17,452 persons had hearing aids fitted, in the year 2022-23.

After this, Dr. Panchal highlighted upon the main challenges and limitations being faced by NPPCD at present. He explained the ground situation and details of following three big challenges:

- (1) The key deliverables to assess the progress of activities under NPPCD & achievements of NPPCD were found to be very crude in nature, viz. ---
 - (a) - Number of districts covered under NPPCD, in the state/UT programme.
 - (b) - Number of Hearing-Aids fitted in the state/UT.
- (2) The poor state of reporting of NPPCD program activities by state/UT (Monthly & quarterly) and non-uniformity in reporting by different states/UTs.
- (3) The shortage of manpower under NPPCD, at several levels in NPPCD, including the centre itself and the reasons for this shortage, esp. salary-structure of the contractual persons.

Finally, he stated that efforts are now under way since past 1 year to revamp the NPPCD program with support from the DGHS and Secretary (H), MoHFW. He informed that a fresh Central Coordination Committee of NPPCD, has been constituted under Chairpersonship of Prof. M. Pushpavathi, Director, AIISH, Mysuru. The Committee has successfully organized two review meetings with State Nodal Officers (SNOs) of NPPCD, from states/UTs all over the country in January-February, 2024, to collect inputs/suggestions for undertaking revision of NPPCD program guidelines in a major way, and looking forward with good hopes for revamping of NPPCD program.

SESSION-3

Report presentation of two review meeting of SNOs (NPPCD) by Prof. M. Pushpavathi, Chairperson, CCC-NPPCD



Prof. M. Pushpavathi, presented the report of proceedings of the two review meetings with State Nodal Officers (SNOs) of the NPPCD programme.

She informed that the 1st review meeting of SNOs (NPPCD) was held at AIISH, Mysuru, for the States/UTs of Southern, Western & Central zones on 11th& 12th January, 2024, and was attended by 11 states/UTs.

The 2nd review meeting of SNOs (NPPCD) was conducted at the NCDC, New Delhi, with States/UTs from Northern, Eastern and North Eastern zones of country on 5th& 6th February, 2024, which was attended by 12 states/UTs.

Number of suggestions/comments emerged from these two review meetings, which included:

- Revision of the following:
 - Title of the programme as National Programme for Prevention and Control of Deafness and Hearing Impairment (NPPCD &HI)
 - Programme objectives
 - Operational guidelines of the programme in several domains
- Need to revise the key deliverables;
- Need to introduce new activities under the programme;
- Research on current prevalence of hearing loss and its causes such as environmental noise, drugs etc. in the country;
- Inclusion of hearing loss in the Integrated Health Information Platform (IHIP);
- Introduction of budgetary provisions for screening camps;
- Increase in the salary of the contractual staff working under NPPCD;
- Increase in the number of staff;
- Purchase of new equipment after few years;
- Procurement of hearing aids under the program;
- Purchase of Brainstem Evoked Response Audiometry (BERA) equipment.

SESSION-4

Panel discussion on revision of guidelines of NPPCD



This was the last but very vital session of the day, which aimed to know the views/opinion of the experts and participants on the current operational guidelines of the NPPCD programme. The chairperson of this session was Dr. Ravi Meher, Director Professor, Department of ENT, MAMC and moderator was Dr. Kriti Yadav, Professor, Community medicine LHMC.

Dr, Ravi Meher, MAMC opened the session stating the importance of ear and hearing loss.

He shared about the initiative taken by MAMC with Delhi Government. The much needed awareness campaign need to be initiated with IEC materials on ear and hearing problem for different age group. Regular screening for identification of problem is required and it was suggested to include provision of hearing aid to support individuals in need.

Dr. Kriti Yadav, LHMC emphasised on the importance of screening, for which a basic infrastructure is essential. It is difficult for staff to go out in the community for screening. She also expressed that the over view of NPPCD programme presented in workshop and the suggestions emerged from review meetings of SNOs (NPPCD) presented in workshop, would

help participants to think and come up with new ideas & thought for improving the existing programme guidelines.

Dr. Naresh Panchal, Addl.DDG, Dte.GHS, asked participants to think and suggest, if regular screening as per the existing guidelines of NPPCD programme in collaboration with Rashtriya Bal Swasthya Karyakram (RBSK) programme would be possible. He mentioned that there is already a well designed 7-level training provision and training-modules, under the NPPCD guidelines for all levels of health-workers under NPPCD program, with properly designed 'Reporting-Formats' for each level, right up to the ASHA worker and that all these are available readily on the MoHFW website. But, there is a need to work according to these well laid down formats and report to the concerned authorities so that proper collection, monitoring and compiling of data w.r.t. NPPCD program activities, occurs at district & state level, which can be communicated timely and regularly to the Central Cell of NPPCD, Dte.GHS.

Dr. Gowri N. Sengupta, Director, CHEB stressed upon the need to know about the status of elderly (aged 60+ years) people, for which there is a need to revise the reporting format. She informed that Geriatric OPDs (10 bed facilities) are well functional in all the districts, which can be used for screening in collaboration with the National Programme for Health Care of the Elderly (NPHCE). IEC materials for different target groups need to be developed and CHEB will extend its support to NPPCD programme. All The SNOs should identify one Medical college in all States/UTs which could support the programme and other activities related to NPPCD programme.

Dr. Mohd Asheel, WHO emphasised on available resources and need for proper resource mapping to identify the key players who need to be engaged for addressing the issue at large.

The participants also shared few suggestions for including following provisions under the revised operational guidelines.

- i Focus on screening and regular ENT check-ups;
- ii Multi-level work force deployed at taluka level;
- iii Identification of dedicated medical officer and district programme officer who is computer literate and will be able to provide over all support to the NPPCD programme;
- iv Process for digitisation of data;
- v Orientation of ASHA and provision of incentives for screening, conducting meetings;
- vi Engage NGO's for programme implementation/screening at community level;
- vii Day celebration in hospital setting with focus on special neonatal care unit, labour room and community level
- viii Provision for programme research to identify the gaps in programme implementation.

After a very interesting and thoughtful panel discussion along with participants' inputs/feedbacks Dr. Naresh Panchal, Addl. DDG, NPPCD summarised the key points for the way forward:

Way forward

- **(I) Revision of the existing IEC material under NPPCD:**
 - CHEB in coordination with NPPCD will work upon to finalise the IEC materials for all target age-groups;
 - A draft proposal with time line to be prepared for development of IEC materials;
 - States/UTs will be requested to share their IEC materials with NPPCD programme division for review and inclusion in development of new IEC action plan;
- **(II) Revision of the existing operational guidelines of NPPCD programme:**
 - A sub-committee will be constituted by the CCC-NPPCD, for putting up a draft proposal of revision of guidelines, including matters w.r.t. budget provisions for
 - (a) Increase in salary of contractual staff under NPPCD,
 - (b) Purchase/repair/maintenance of equipment under NPPCD,
 - (c) Procurement of essential drugs/medicines under NPPCD;
 - (d) Provision of incentives for ASHA worker for NPPCD program activities;
 - Budgetary provision for screening camp activities under NPPCD in school/community;
 - Reporting formats of the NPPCD program;
 - Convergence strategies with NHM, RBSK, RKSK, National Programme for the Health Care of Elderly” (NPHCE), Ministry of Youth affair and others departments/ministries for awareness generation to be identified.
- **(III) Development of a digital platform for NPPCD for reporting/monitoring:**
 - Sub-Committee will be constituted by CCC-NPPCD to put up a draft proposal on this matter. The CCC would organise review meetings with rest of the States/UTs;

Vote of thanks by Shri Shashi Kant Yadav, Consultant- Social Science, CHEB

The vote of thanks was delivered by Shri Shashi Kant Yadav, CHEB, on a delightful note who expressed gratitude to DGHS for his guidance & support. He also thanked all the distinguished guests, speakers for their support and valuable inputs during the sessions.

He conveys his sincere thanks to officials, NPOs and other participants for their active participation and involvement during the group work. He also thanked his entire programme unit for wholehearted support in organising the World Hearing Day.

At the end, he expressed his heartfelt thanks to Director, CHEB and the officials for extending support in planning and execution of the programme at CHEB.

Group - 1



GROUP-1

- ① समय पर पहचान, समय पर उपचार
- ② जन्म के तुरंत बाद, बच्चे की मुनाई की जाँच अवश्य करवाएँ
- ③ गर्भकाल
- ④ कुछ फाइलों में जन्मजात बढसपन हो सकता है। डॉक्टर की सलाह के बिना फाइलों न करें
- ⑤ माँ और बच्चे का सम्पूर्ण टीकाकरण करवाएँ
- ⑥ यदि आपका बच्चा आवाज़ धुर नहीं करता तो सर्जल रें और मुनाई की जाँच करवाएँ
- ⑦ सुनने का महत्व जानिये और सुनने की प्रेरणा प्राप्त कीजिये
 - a) यदि आपका बच्चा कक्षा में कम ध्यान देता है तो तुरंत श्रवण शक्ति की जाँच करवाएँ
 - b) बढसे नान, बढसे नाक की तुरंत जाँच करवाएँ
 - c) यदि बच्चे का बोलने की समस्या है तो तुरंत जाँच करवाएँ

- ⑧ लगातार Headphones / Earphones इस्तेमाल करने से आपकी श्रवण शक्ति को नुकसान पहुँच सकता है इससे बुर रहें
- ⑨ हमारे नान, हमारी जान
- ⑩ हमारे कर्ण बढाओ नान सुनने के उपकरणों का सावधानी से करें इस्तेमाल
- ⑪ नान में भारीपन / दर्द या चक्कर हो तो तुरंत जाँच करवाएँ
- ⑫ श्रवण सुरक्षा उपकरण का इस्तेमाल करें

सुनने Diphtheria Whooping Cough Scarlet
Measles Mumps Rubella

- ⑬ NO MORN DAY
- ⑭ कुजुर्गी की समय समय पर मुनाई की जाँच करवाएँ
- ⑮ शुद्ध से नान साफ न करें

X ————— X

Group - 2



GROUP-II

Modalities: Brand Ambassador, Radio jingles, TV/Theatre ads, Social media ads, Success stories in the program.

Themes: Newborn hg loss, Hg loss in school children, Safe listening habits, Occupational hg loss, age related hg loss, Stigma of hg aids/CI, High risk indicators of hg loss in children & adults, preventable causes, Management options, Individualizing hg aid fitting/CI, Significance of AVT/listening training in children with hg loss, facilities available under the program, Schemes, Role of parents/caregivers.

Target Population: General public

Others :- Each AV should be focus on one specific topic Eg: Age of identification possible in NBS, - Should be within 20-30s. 1-3-6 guideline - Simple message



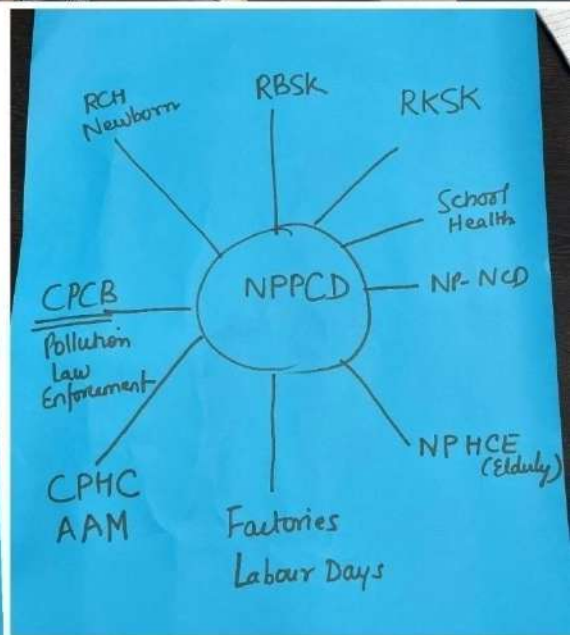
Group - 3



I. GROUP-III COMMUNITY ENGAGEMENT
 AT WHAT LEVELS COMMUNITY CAN BE ENGAGED.

- AAM (HWC) - HEALTH MELAS EAR CARE (AS PART OF CPHC)
- HEALTH FUNCTIONARIES ASHAs, ANW, MPW. (TRAIN / REDRIENT) -
- COMMUNITY MEETINGS / GROUPS AT ALL LEVELS (SPECIFIC GROUPS - PREGNANT, ADOLESCENTS, ELDERLY)
- SCHOOL - TEACHERS, RBSK TEAM.
- OCCUPATIONAL SETTINGS - (Preventive Messages / Screening) [Incorporated in programme 'tis qui delimita']
 FACTORIES
- CULTURAL EVENTS / IMPLEMENTATION
- NGOs - Screening, health Camps.

- HOSPITALS (Integration with RCH - SNCU, DEI Centres, Labour Room, Delivery Units, Post-natal Wards)
- Observing 16 Days (Hearing Day)
- Arranging Events - Sports, Drama, Quiz, Competition, Success Stories, Slogan Writing
- Advocacy Events / Walkathon / Street Shows / Nukkad Natak.
- Incentives to ASHAs Hearing Aids, Screening, Follow up
- NCD programme.
- Implementation Research.



Glimpses - World Hearing Day, 2024



Programme Schedule

4th March, 2024 | **09:30 AM - 04:30 PM**

Venue - Central Health Education Bureau, 5, Kotla Road, New Delhi-110002

Time	Activity	Resource person/Facilitator
09:30-10:00 AM	Registration	CHEB
10:00-11:00 AM	Inaugural Session	
10:00-10:05 AM	Lamp Lighting and Welcome	Dr. Gowri N. Sengupta DDG(PH) & Director, CHEB
10:05-10:10 AM	Opening remark	Dr. Naresh Panchal , Addl. DDG, NPPCD
10:10-10:15 AM	Opening address-1	Dr. Mohammed Asheel , NPO, WHO
10:15-10:25 AM	Opening address-2	Shri Rajiv Manjhi , Joint Secretary- NPPCD
10:25-10:35 AM	Inaugural address	Ms. L. S. Changsan , Additional Secretary & Mission Director (NHM)
10:35-11:40 AM	Keynote address	Prof. Dr. Atul Goel Director General of Health services
10:40-11:45 AM	Vote of thanks	Dr. Mohammed Shafeeq K. CHEB
10:45-11:00 AM	Tea	
	Session-1 Review and up-dation of IEC materials of NPPCD Chairperson: Dr. Amod Laxmikant Borle, Associate Professor, MAMC Moderator : Dr. Samuel Rajan, ENT, Specialist, RML	
11:00-11:30 AM	Appraisal of existing IEC materials of NPPCD	Ms. Nidhi Paliwal
11.30-12.00 PM	Recent advances in hearing loss and ear care to developed as IEC	Dr. Raman Sharma , Ass. Prof. ENT, MAMC
12:00-01:00 PM	Working group to identify gaps & finalize the IEC materials and modalities	Mr. Shashai K. Yadav, Ms. Nidhi P, Dr. Shamiksha Arora, Mr. S.K. Bhoi, Dr. Deepa A. Kumar, Ms. Shivani
01:00-02:00 PM	LUNCH	
02:00-02:30 PM	Session-2: Current Status of NPPCD	Dr. Naresh Panchal , Addl.DDG,NPPCD
02:00-03:00 PM	Session-3: Report presentation of two review meeting of NPPCD	Prof. M. Pushpavathi , AIISH ,Mysore
03:00-04:00 PM	Session-4: Panel discussion for developing guidelines of NPPCD Chairperson: Ravi Meher, ENT, MAMC Moderator: Dr. Kriti Yadav, Ass. Prof Comm. Med. LHMC	All Participants
04:00-04:20 PM	Feedback of participants	NPPCD
04:20-04:25 PM	Closing remarks	NPPCD
04:25-04:30 PM	Vote of thanks	Dr. Naresh Panchal , Addl.DDG,NPPCD

Group wise list of participants

Group – 1

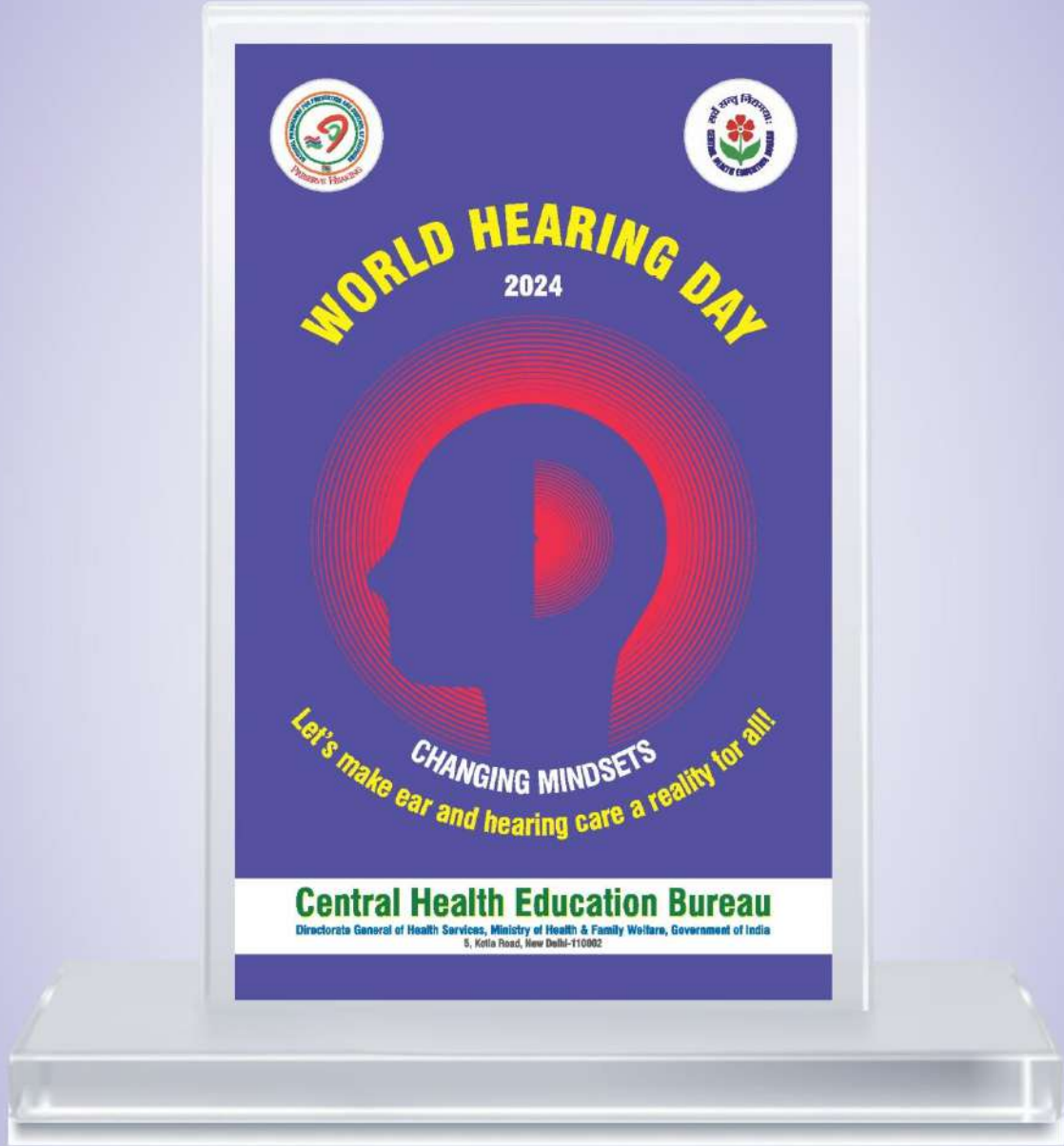
1. Dr. Abhishek Kumar, Post Grad. Student, Dept.of Comm. Med, VMMC, New Delhi
2. Dr. Kuldeep Kumar, Safdarjung Hospital, New Delhi
3. Dr. Naresh Bhardwaj, Sr. CMO, Safdarjung Hospital, New Delhi
4. Dr. Susanta kumar Swain, SNO, DHS, Odisha,
5. Dr. Sonam Sharma, Lok Nayak Hospital, New Delhi
6. Ms. Shivani Agarwal, Audiologist & Sp. Pathologist, Dept. of ENT AIIMS, New Delhi

Group – 2

1. Dr.Vineet, SPO-NPPCD, Punjab
2. Dr. Shalini Smanla, Prof. Dept. of Comm. Med, VMMC, Safdarjung Hospital, New Delhi
3. Dr. Raman Sharma, Assistant Professor, Dept. of ENT, MAMC
4. Dr. Richa Arya, State Audiologist, NPPCD, Punjab
5. Dr. Sandeep M. Prof. of Audiology, AIISH, Mysore
6. Dr. Md. Sharif Alam, JPN Hospital, Gaya- Bihar
7. Dr. Kiran Bhagat, Member, Suniye school, New Delhi
8. Dr. Baladalin Lyngdoh, Consultant ENT , NPPCD Meghalaya

Group – 3

1. Dr. Gyan Ranjan Singh, SMO, Dept. of ENT, Safdarjung Hospital, New Delhi
2. Dr. Shubham Sen, Resident, Dept. of Comm. Med, Lady Hardinge Medical College, New Delhi
3. Ms. Rashmi Agarwal, President, Suniye school, New Delhi
4. Dr. Howni Wothi Laloo, ENT Specialist, G D G MCH Hospital, Shillong, Meghalaya
5. Dr. Sumit Malhotra, Prof. Dept. of Comm. Med. AIIMS, New Delhi
6. Dr. Rita Chaudhary, SPO, NPPCD, New Delhi
7. Dr. Arushi Ghai, M.D Community Medicine at Lady Hardinge Medical College, New Delhi



Central Health Education Bureau

Directorate General of Health Services, Ministry of Health & Family Welfare, Government of India

5, Kotla Road, New Delhi-110002