

STEVE KITTUR, KENYA

BRIDGING THE GAP: NAVIGATING THE CHALLENGES OF COCHLEAR IMPLANT PROVISION IN LOW-RESOURCED COUNTRIES

Steve is a parent of a child with CI – and is developing audiology services in Kenya against lots of challenges



Challenges of Cl provision in Low-Resource Countries (Sub-Sahara Africa)

Bridging Sound and Opportunity!

Mr. Stephen Kittur

Introduction

Cochlear implants offer hope for severe hearing loss, but access in Sub-Saharan Africa is limited due to unique regional challenges.

Cost and Accesibility

- **High cost**: High cost: US\$20,000-\$30,000 per implant, unaffordable for most families.
- Average household income is around \$1,800 USD annually, means the cost of a CI is many times higher than a family's yearly income!
- Lack of funding: Limited govt and donor support for Cl
- Financial burden on families.
- In some cases, insurance policies exclude hearing implants from their coverage.

Limited Specialized Centres

- Geographical Barriers-Limited or no facilities within reach:
 e.g Only one CI facility in Kenya, located in Nairobi, serving
 54 million people.
- Long travel distances for rural patients; delays in treatment due to high demand.
- Some centers represent one brand of CI manufacturers, limits options/choices for consumers

Shortage of Trained Personnel

- Lack of ENT specialists, audiologists, and speech therapists trained in CI surgery and rehabilitation.
- Average of only 1 Cl specialist for every 1,000,000 people, compared to about 1:25,000 in the US!!

Awareness and Diagnosis

- Low awareness of Cls, especially in rural areas.
- Late diagnoses: Many children are identified after age 2, reducing CI effectiveness.

Post Implantation Challenges

- **Rehabilitation services**: Lack of rehabilitation services (audiological follow-up, mapping, speech therapy).
- Device maintenance and replacement: Difficulty in maintaining and replacing Cl devices due to limited service access

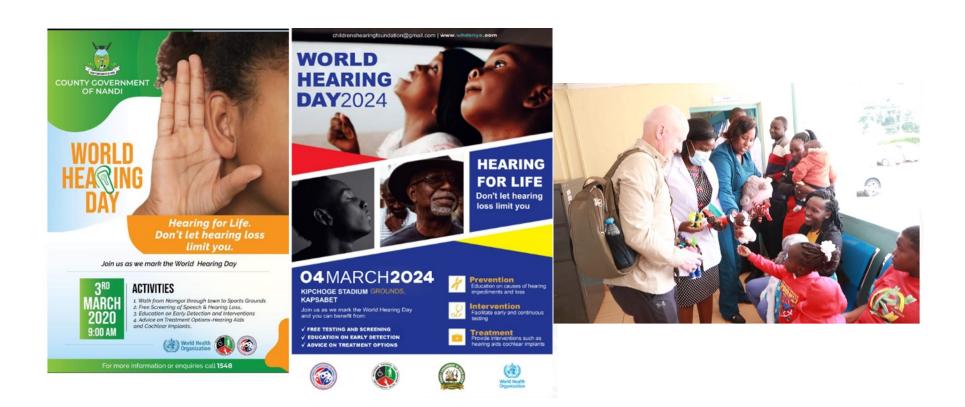
Cultural and Social Barriers

- Cultural beliefs and stigma surrounding hearing loss and Cls.
- Resistance to surgery and technology due to fear or misunderstanding.

Policy and Governmental Support

- No national policy or framework for supporting Cl programs.
- Limited integration of hearing health into healthcare infrastructure.
- Govt still imposing tax on CI products and accessories, making them more expensive

Potential Solutions and Approaches



1. High Cost of Cochlear Implants and Surgery

- Subsidize CI services through government, NGO, and donor partnerships..
- National Health Insurance Inclusion: Include Cl services in national insurance schemes (e.g., NHIF).
- **Corporate Sponsorships**: Secure corporate sponsorships for CI surgeries.

2. Lack of Trained Professionals

- **Training**: Establish training programs for CI surgeons, audiologists, special education teachers and speech therapists.
- Fellowships and Workshops: Provide fellowships and mentorship opportunities for local professionals.

3. Limited Access to Cochlear Implant Centres

- **Regional CI Centers**: Set up regional CI centers outside capital cities.
- Telemedicine and Remote Support: Implement telemedicine for remote CI support.
- Reverse medical tourism (where specialists come to treat and tour in SSA)

4. Lack of Awareness

- Awareness Campaigns: Launch public awareness campaigns and community outreach programs. Use all media platforms
- **School Outreach**: Partnering with schools to educate on hearing loss and CI benefits-children are better ambassadors and can influence parents.

5. Sustainability of CI Programs

- Government Support: Advocate for government support and integrate CIs within EHDI programs.
- Ensure long-term rehabilitation services (speech therapy, audiological follow-up).
- Demonstrate and provide cost-benefit analysis to stakeholders.

6. Cultural and Social Acceptance

- **Support Group**: Establish strong parent support groups for families undergoing CI procedures.
- **Community Engagement**: to address cultural barriers and stigma.

7. Research and Policy Development

- **Policy Advocacy**: Collaborate with government to include CIs in national health strategies
- Data Collection and Research: Collect data on Cl outcomes to advocate for policy changes.

Conclusion

While challenges may seem daunting, we draw inspiration from the African proverb: "The best time to plant a tree was twenty years ago; the second best time is now." This wisdom encourages us to take action today, regardless of the obstacles we face, to foster meaningful change. Together, we can make a difference!