

Students receive their certificates after completing a course on public health planning for hearing health.
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Human resources: what happens after training?



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Equitable access to services for people with ear diseases or hearing loss depends primarily on a trained health workforce that provides Ear and Hearing Care (EHC) for different ages and across all care levels. Availability of a well-trained specialist workforce such as ENT specialists, audiologists, and speech and language therapists continues to be a challenge. The World Health Organization (WHO)'s 2021 *World Report on Hearing*¹ shows that in many low- and middle-income countries (LMICs) specialist workforce in the field of EHC is sparse or even sometimes nonexistent, with less than one professional per million population. It is therefore crucial to increase the number of health personnel providing EHC. This should be done not just by creating greater opportunities for education and training of specialist cadres (such as ENT specialists, audiologists, speech therapists, and others) but also by designing training programmes for other cadres of health workers that facilitate integration of EHC at primary health care level, notably health care professionals with lesser training requirements, such as community health workers and general practitioners or family doctors.²

However, while it is essential to augment the overall numbers of personnel trained in EHC, it is equally important to ensure that those who have been trained are enabled to perform to their fullest potential once they are back in the workplace. To do so, it is relevant to consider factors like:¹

Quality assurance mechanisms

These should be put in place at the time of designing and implementing educational programmes for human resource capacity development. Technical oversight and practical support by higher trained professionals, as well as regular performance monitoring, will be key to ensuring that services provided are of high quality.

On-the-job training

This aspect will play a crucial role in ensuring that knowledge and skills are kept up to date and refreshed regularly. It will also serve to ensure continued engagement and high levels of commitment among various professional cadres.

Support of in-service provision through the use of technology, including mobile health and telehealth services

This would assist by, on the one hand, facilitating the provision of certain services like hearing screening or testing and, on the other hand, by ensuring that nonspecialised workforce in remote areas can access expert support.

Allocate/share tasks to ensure trained specialists can focus on specialised care

Once back in the workplace, returning trainees may face work duties that do not allow them to practise their skills. Similarly, highly trained specialists may

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