

Establishing Sustainable Ear & Hearing Healthcare Provision for Rohingya Refugees in Bangladesh

Miss Isobel Marks | Stefan Galeski Global Surgery Fellowship

ROHINGYA REFUGEE CRISIS

- In August 2017, armed attacks, large scale violence, and serious human rights violations forced thousands of Rohingya to flee their homes in Myanmar's Rakhine State.
- 1 million Rohingya sought refuge in Bangladesh, with the majority now living in the Cox's Bazar region – home to the world's largest refugee camp.
- 75% of Rohingya refugees and asylum seekers are women and children.

METHODS

- Multiple surveys to frontline staff (NGO managers and healthworkers)
- Course delivery to doctors delivering primary care within the camps
- Course evaluation



FELLOWSHIP ASSIGNMENT

Objectives:

1. Support RCF in equipping local doctors working in the refugee camps with the necessary skills and knowledge to effectively prevent, identify, and manage hearing loss and common ear diseases, with a particular focus on chronic suppurative otitis media (CSOM)
2. Ensure that trained local doctors are able them to cascade their learning and train other health professionals.

NEEDS ASSESSMENT

- 76 participants surveyed – NGO managers and primary care doctors
- 93% managed ENT conditions daily
 - 81% had access to otoscopy
 - 6% had access to microsuction



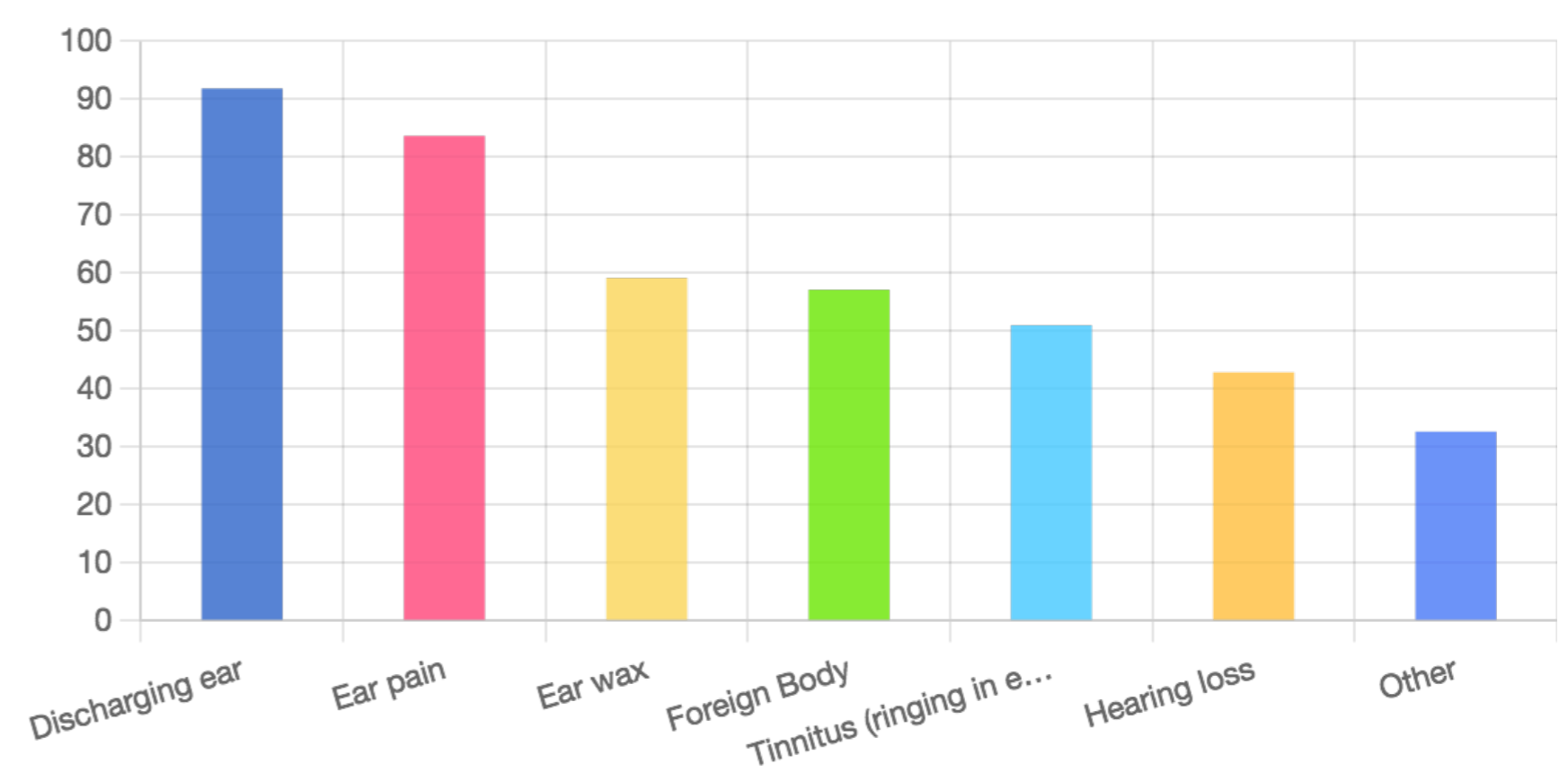
TRAINING PROGRAMME

- WHO Primary Ear & Hearing Care curriculum
- 2-day practical skills course
- 32 clinicians trained
- Multidisciplinary UK & Bangladeshi faculty



CHALLENGES IDENTIFIED BY NGO MANAGERS

	FREQ	PERCENTAGE
Insufficient training in ENT conditions	26	83.87
Inability to refer to specialists	19	61.29
Lack of diagnostic equipment (e.g., otoscope)	17	54.84
Limited access to medications	14	45.16
High patient load limiting consultation time	9	29.03
Other	4	12.9
Language or cultural barriers with patients	2	6.45



93% primary care doctors saw ENT problems daily, with discharging ears being the most common presentation



IMPACT

- 97% of participants reported increased confidence following training.
- Participants particularly valued practical skills stations.
- The project established a framework for sustainable ear and hearing care development.

LESSONS LEARNED AND FUTURE DIRECTIONS

- Train-the-trainer models are essential in humanitarian settings.
- Building local capacity is more sustainable than short-term missions.
- Develop referral pathways and local ENT champions.
- Explore sustainable surgical services for chronic ear disease.