

A stylized illustration of a human ear in profile, rendered in shades of grey and blue. The ear is positioned on the left side of the frame. Behind the ear, there are several concentric, semi-circular bands in various colors including pink, purple, and yellow, which represent sound waves or a hearing aid's field of effect. The background is a light, neutral color.

Talking Story

A coordinated approach to
Aboriginal children's ear health

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Why am I telling this story?

- 2010 - Aboriginal Community Controlled Health Service RMO
- 2015 - Aboriginal Health Council of South Australia (AHCSA) Registrar
- Involvement in ear health project and the South Australian Aboriginal Ear Health Reference Group
- Many children's stories unchanged (Jervis-Bardy, Sanchez et al. 2014)

Methods

- Literature review
- Review of coordinated state-wise approaches
- Stakeholder consultation and workshop
- State ear health Framework development
- Indicators for evaluation of Framework
- Stakeholder review and publication

Healthy Ears – Healthy Life

- Ear health contributes to overall well-being

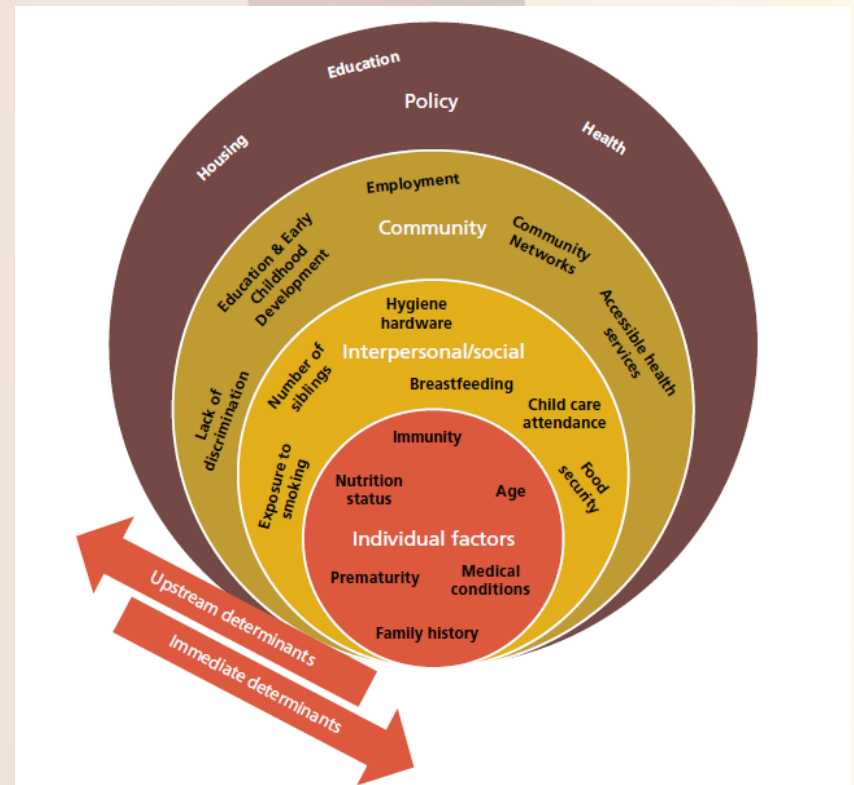
“Learning your language and hearing your stories from your old people and your family is really important in keeping your culture alive”

-Georgina Williams, Kurna Elder

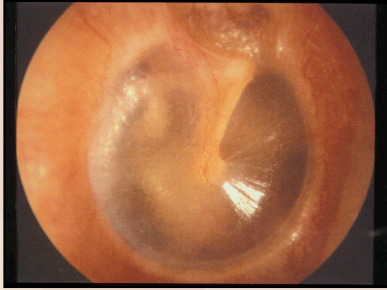
<https://radio.adelaide.edu.au/specials/get-the-drum-on-ear-disease/>

Causes and consequences of ear disease

- Strong socio-economic determinants of ear disease
- Preventable condition
- Education
- Employment



Types of disease



Acute Otitis Media



Otitis Media with Effusion



Chronic Suppurative Otitis
Media

Pictures provided by Dr N. Spurrier

Prevalence of ear disease

Remote Aboriginal
children

Aged 5-12¹ with
TM perforation:

37%

Hearing test fail Uni/bi
laterally:

55.6-66.3%



Metro Aboriginal
children

Aged 5-12¹ with
TM perforation:

around 1%

Hearing test fail
Uni/bi laterally:

13.9-33%

Aged 0-8² with
Hearing test fail
uni/bi laterally:

21%

¹SANCHEZ, L., K, S., CARNEY, A. S. & D, T. 2010.

²QUIRINO, L., O'DONNELL, C., NORI, A., AXLEBY-BLAKE, T., NOTTAGE, C. & SPURRIER, N. 2015.

State-wise coordinated activities

- **NT** – Child Health Check Initiative and follow up (we know what the problems are; let's fix them)
 - Hearing Health Coordinator program
- **NSW** – Government - screening is not enough
- **QLD** - 'Deadly Ears' – a large annual budget

South Australian services

- Aboriginal Health Council of SA Ear Health Project- supports Aboriginal Community Controlled Health Services
- General practice and public surgical services
- Newborn and Children's Hearing Service
- NGOs



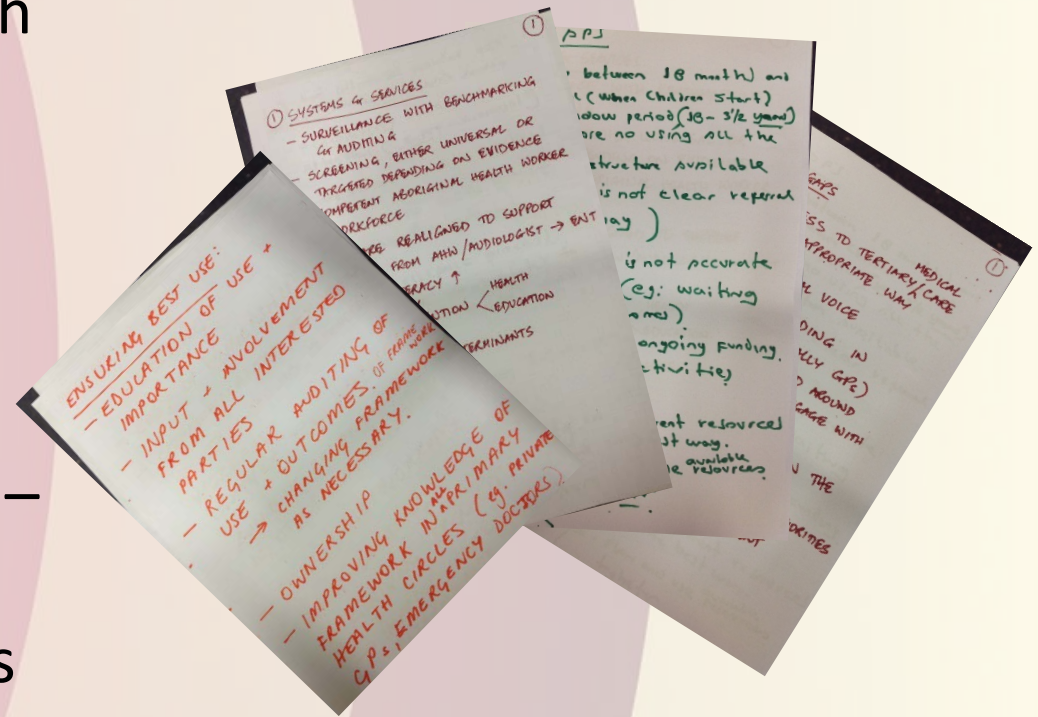
Current initiatives for Aboriginal children

- State **Closing The Gap** funding for 'Under Fives' Watto Purrinna
- Rural Doctors Workforce Agency outreach – part of Commonwealth **Better Hearing -Better Listening**



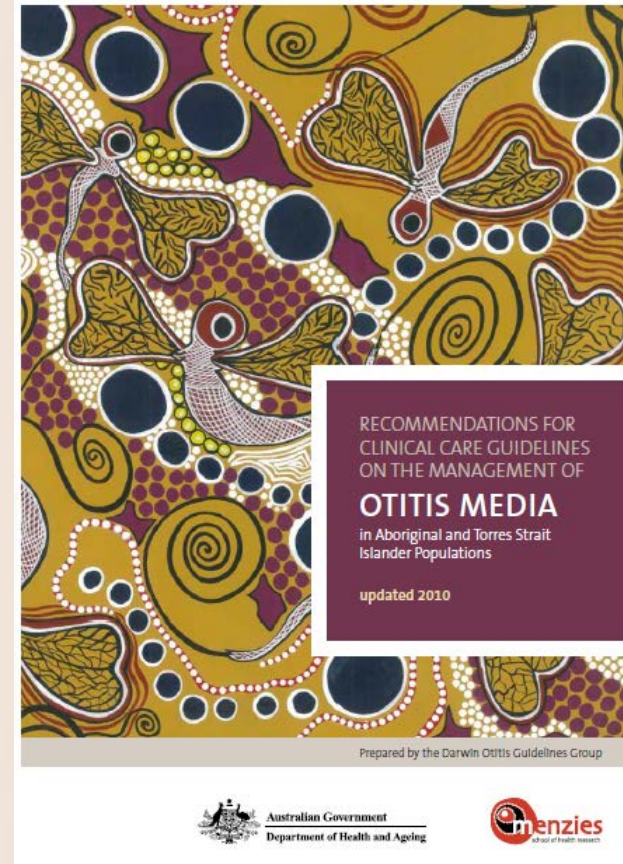
The process of Framework development

- SA Aboriginal Ear Health Reference Group identified need for written plan
- Literature review and background paper
- Workshop - June 2015 – around 30 attendees
- Individual consultations
- Plan for stakeholder review, endorsement



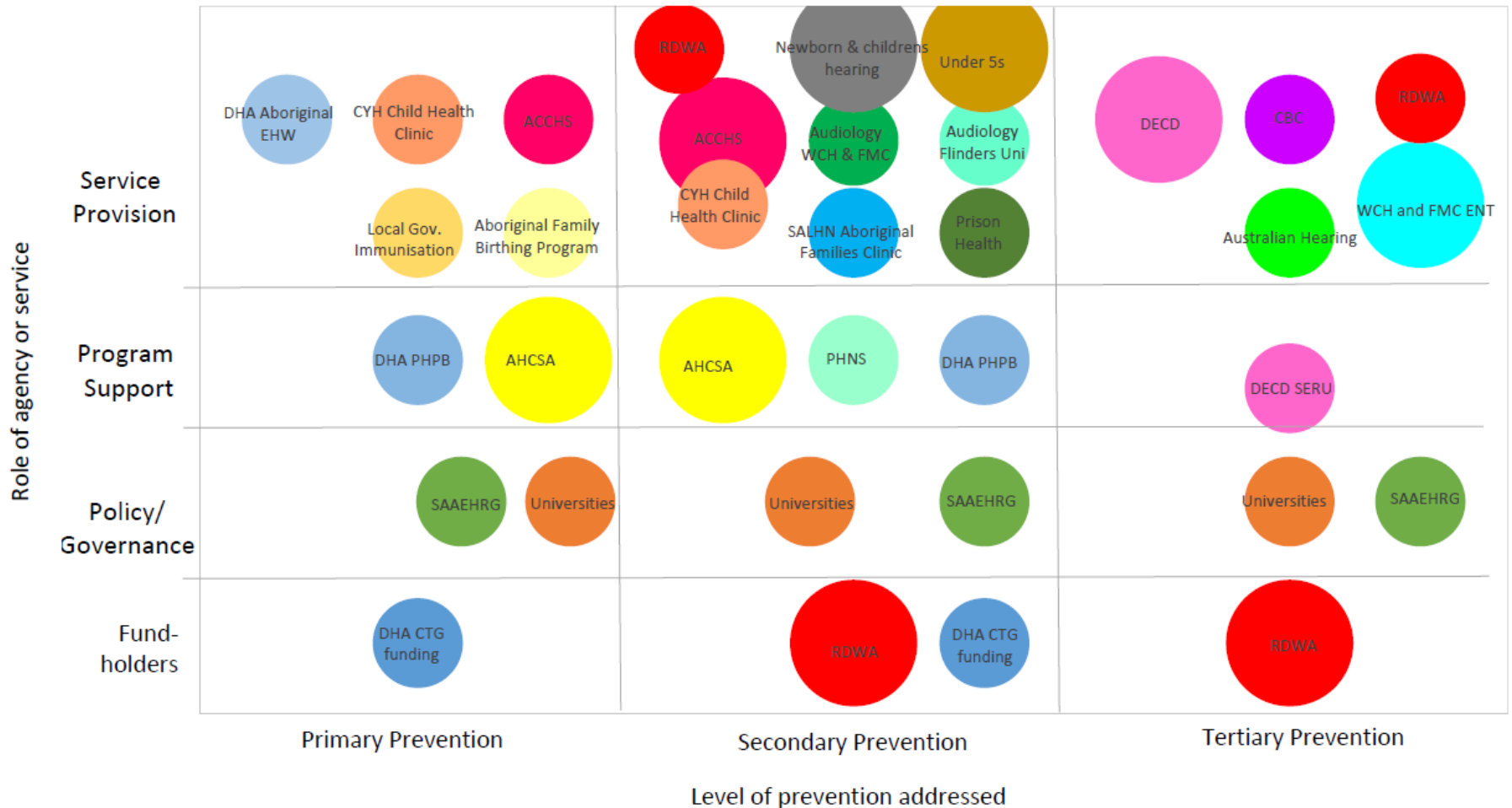
Principles of Framework Development

- Aboriginal governance and community involvement
- Prevention focus
- Advocacy
- Early and effective intervention
- Statewide care
- Evaluation



Recommendations for clinical care guidelines on the management of otitis media in Aboriginal and Torres Strait Islander Populations (April 2010)'

Service mapping



Consensus on what is needed

- Follow-up across continuum of care
- Identifying and replicating successes
- Directing funding to need

WHO Health Systems Components

- > Service Delivery
- > Health Workforce
- > Health Information Systems
- > Medical Products, Vaccines & Technologies
- > Financing
- > Leadership & Governance

Table 4. A Framework for Proposed Action in Secondary Prevention

Strategy Area	Action	Agency	Performance Indicator
Service Delivery	Increase access to annual ATSI health check incorporating ear health, with a particular emphasis on 0-4 year old children	ACCHSs SA Health sites Private general practice	Rate of Aboriginal and Torres Strait Islander children 0–4 years who have at least one health check in a year increased to 69% by 2023, per Commonwealth of Australia (2015a)

The moral of the story

- Already positive outcomes through talking about the story of ear health
- Rural Doctors Workforce Agency collaborative approach
- Engagement with Department for Education and Child Development
- Affirmation of SA Health successes
- Telling a new story

References

- COMMONWEALTH OF AUSTRALIA 2011b. Recommendations for clinical care guidelines on the management of otitis media in Aboriginal and Torres Strait Islander Populations (April 2010)
- JERVIS-BARDY, J., SANCHEZ, L., & CARNEY, A. S. (2014). Otitis media in Indigenous Australian children: review of epidemiology and risk factors. *J Laryngol Otol*, 128 Suppl 1, S16-27.
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