LESSONS LEARNED

National Hearing Project Papua New Guinea
Access to Education and Health for Young People with Hearing Impairments
6 year old girl in Madang learning sign language
The Project

The National Hearing Project in Papua New Guinea tackles the marginalization and exclusion of children and youths with hearing impairments all over Papua New Guinea, reaching more than 100,000 children, young people and adults in 19 regions.

Persons with a hearing impairment had largely been excluded from earlier projects, despite the fact that ear problems were known to be a frequent and serious problem. Among the children with ear problems a high number had and still have sustained severe hearing loss.

The government’s Special Education Unit has established a network of Special Education Resource Centres (SERCs) throughout Papua New Guinea to support the education and inclusion of persons with disabilities. The SERCs’ education approach is embedded in Community Based Rehabilitation (CBR). CBR aims to reach persons with disabilities in all areas of life, including health, education, social life, livelihood and empowerment. Callan Services for Disabled Persons Papua New Guinea – Agency of the Congregation of Christian Brothers (known as Callan) is LIGHT FOR THE WORLD’s local partner and is also the main partner to the government in supporting the conduct of the majority of these centres.

In a national approach, Callan implements educational and health support to children and youths with hearing impairments at a local level. Ear screenings, referrals to further health care, preparatory and sign language classes, support in mainstream education and vocational training lead to active participation and inclusion in community life. In addition, the project promotes and spreads a national PNG sign language, provides training workshops and strengthens deaf culture in Papua New Guinea.
**Lessons Learned**

The 18 lessons learned during the implementation of the national project, are organised in four main categories:

1. **Lessons learned with regard to General Planning and Management of a national project**
2. **Lessons learned with regard to Education of students with a hearing impairment**
3. **Lessons learned with regard to Sign Language**
4. **Lessons learned with regard to Ear and Hearing Health**

### 1. General Planning & Management

**#1 Standardisation makes your national project easier.**

In a national project, it is important to introduce standards right from the beginning. With regard to staff, relevant skills and qualifications need to be defined and project staff equipped with these qualifications using internal and external experts, such as sign language teachers, health workers or project managers.

**#2 No parallel structures please!**

Collaboration between existing national and state organisations, as well as NGO education agencies, deaf associations and disabled persons’ organisations is important for establishing a nationwide and comprehensive programme. Enhanced advocacy and cooperation with ministries and other state institutions maximizes the sustainability of the project and eases the way for inclusion of the programme’s approach in government structures.

**#3 You need to walk the extra mile to identify persons with hearing impairment.**

Efforts must be made to actively identify children and youths with a hearing impairment as they won’t come forward by themselves. Focused screening camps for ear and hearing health care in local villages and schools have proved to be an important method. Many problems, such as minor hearing impairments, can be resolved with primary screening and basic medical help.

**#4 Keep your project area realistic, so that you can plan regular visits to clients.**

To enable regular support from project staff, a project catchment area should ideally take less than two hours to reach. Frequently repeated visits by health staff and deaf assistant teachers, as well as regular support to mainstream teachers, parents and the children increase the progress to inclusion.

**#5 Plan for a comprehensive support based on individual needs.**

Education and health projects for hearing impaired persons should be embedded in CBR, ensuring comprehensive support based on individual needs and involve families and communities. It should cover the areas livelihood, social inclusion, awareness and empowerment. Particular attention should be paid to ensuring referrals from health to education and vice-versa.
#6 The younger you start with the education of hearing impaired children, the better.

Supporting early sign language learning and other intervention skills makes an essential difference for the development of hearing impaired children and their subsequent ability to participate in their community, to access educational and other opportunities. Programmes should therefore include pre-primary as well as primary schools and even mother/baby clinics and community based screening where clinics do not exists in order to identify children with a potential hearing problem as early as possible.

Elementary school Ningerum, pupils in grade 4

#7 Include deaf persons in the project and in the teaching of deaf students.

Children with hearing impairments gain a great benefit, as well as self-esteem, and a sense of identity from specially trained assistant teachers who are deaf themselves. It is recommended that this be combined with an individual education plan and support from special education teachers.

#8 Make sure to always enrol deaf students together in mainstream education.

Enrolling at least two hearing impaired students together helps them to integrate more quickly into mainstream education, which contributes to their academic progress, their social empowerment and a strengthening of their sense of identity.

#9 Inclusion works – with professional and quality support!

Hearing impaired children are more likely to succeed in mainstream education, to improve their skills and participate more in school activities, if they get regular support adapted to their individual needs from trained teachers, sign language teachers and deaf assistant teachers.

#10 Offer alternatives for youths with sign language and livelihood initiatives.

Deaf and hearing impaired teenagers for whom an academic career may no longer be appropriate should be offered individual support, including sign language training and targeted vocational training with peers of their own age. This will prepare them for employment or for the development of their own livelihood projects, thus giving them the opportunity for an independent life in the future.
## 3. Sign Language

**#11 Access to sign language is crucial for deaf persons.**

The ability to sign in their own language is an essential precondition if deaf and hearing impaired students are to benefit from education and to actively participate in society. In order to encourage the widespread use of sign language and to teach as many persons as possible how to use it including trainers, deaf assistants, native speakers, and sign language interpreters, teaching materials, and a locally suitable vocabulary need to be available.

**#12 Only a sophisticated sign language enables achievement in a complex environment.**

The increasing number of deaf and hearing impaired persons entering higher education and the workplace, as well as an increasing awareness of deaf culture and the use of sign language require the development of a more sophisticated sign language including new signs for work situations, academic studies, emotional, and relationship development, etc.

**#13 Remember to keep on signing whenever a deaf person is in the room.**

Continually raising the awareness of teachers and others fluent in sign language of the need to always use sign language and/or interpretation in the presence of hearing impaired persons is crucial.
4. Ear and Hearing Health

#15 Teachers, parents and community members can help in primary ear care too.
Use all available resources: e.g. teachers and non-health community workers can also be trained to provide primary ear care. Teaching ear toiletry in schools and providing advice to parents, as well as organizing screenings in school prevent ear diseases and hearing problems.

#16 Envisage a referral system for different cases and start planning for a national system.
Links to ENT doctors and regional audiology clinics must be set up, together with a referral system to ensure prompt treatment for all persons with hearing impairments. While intermediate solutions might help to alleviate the need, start planning for a system which fits into a national system.

#17 Standardised medical equipment facilitates procurement and maintenance.
Providing local health staff with adequate and standardised portable testing equipment, including audiometers and tympanometers as well as consistent access to medicines is very important to improve medical services and to facilitate maintenance and procurement.

#18 Data collection helps finding solutions for future project implementation.
Standardized data collection including the name, location, condition of ear, curative interventions, referrals (what, where, when), follow up needs, etc. helps to communicate important information on the programme to all involved parties. Health and community workers should also collect data on rates of drop out from education, the reasons for it and possible solutions.
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