

**First Planning Meeting
of the Steering Committee of
the Middle East Association For Managing Hearing Loss (MEHA)**

June 8, 1999

FINAL REPORT

1. OPENING OF THE MEETING (Agenda item 1)

1.1 The chairman of the meeting, His Royal Highness, Prince Firas ben Raad, Patron of the Association, welcomed the dignitaries, participants, and observers to the First Planning Meeting of the Steering Committee.

1.2 The list of participants is given in Appendix A.

1.3 HRH Prince Firas identified the key challenge that the Steering Committee faces in its deliberations including decisions on programs and projects for the 1999-2000 period and identifying resourcing for MEHA programs and projects.

1.4 HRH Prince Firas expressed his ongoing interest in MEHA's objectives of managing hearing loss on a regional basis and in advancing peacebuilding in the region. He also thanked the Canada International Scientific Exchange Program (CISEPO) for its considerable efforts in assisting MEHA and in preparing for the meeting.

1.5 The chairman invited HE Ambassador Molloy (Canada) and HE Ambassador Eran (Israel) to address the meeting.

1.6 HE Ambassador Molloy expressed his pleasure in participating in the MEHA meeting. He identified the meeting as of symbolic importance demonstrating neighbours working together despite regional tensions. He also identified the role that CISEPO, Mount Sinai Hospital and the University of Toronto had played in MEHA and the intention of Canada to support MEHA in the future.

1.7 HE Ambassador Eran identified MEHA as re-enforcing the process of individuals, organizations, and countries seeking peace. He recognized the role that the Canadian government and voluntary organizations have played in peacebuilding. He particularly, thanked Prof. Noyek for his tireless and effective efforts. The Ambassador announced that the Government of Israel would direct existing programs to provide direct support to MEHA for its professional education projects.

1.8 The chairman invited the members of the Steering Committee: Dr. Goussous, Dr. Shalit, and Prof. Noyek each to address the meeting. The three members of the Steering Committee each indicated their satisfaction with the development of MEHA and with the cooperation they had experienced in both scientific advancements and in peacebuilding.

2. ADOPTION OF AGENDA (Agenda item 2)

2.1 The meeting was invited to comment on the agenda.

2.2 The agenda was adopted as reproduced in Appendix B.

3. EXPANSION OF THE STEERING COMMITTEE (Agenda item 3)

The chairman identified the desire to expand the Steering Committee to include members from other areas of the region and, in particular, from the Palestinian Authority initially and thereafter with Egypt.

4. OPERATING COMMITTEE STATUS REPORT (Agenda item 4)

4.1 The Operating Committee reported on its activities which, inter alia, included developing: policy recommendations for operating MEHA, an administrative infrastructure for MEHA, and a portfolio of program and project proposals for 1999-2000 which reflect MEHA's objectives.

4.2 The Operating Committee's report was received and is included in the records of the meeting as Appendix C.

5. OPERATING GUIDELINES FOR MEHA (Agenda item 5)

The Steering Committee adopted the Guidelines proposed by the Operating Committee as the operating principals for MEHA as amended and recorded in Appendix D.

6. MEHA MEMBERSHIP AND PARTNERSHIPS (Agenda item 6)

6.1 The Steering Committee directed that membership in MEHA should be open to representatives of medical and non-medical institutes, to individuals from all Middle Eastern countries, and to institutes and individuals from other countries, worldwide, who support MEHA's objectives. Membership entitlements shall be as reproduced in Appendix E.

6.2 The Steering Committee approved a formal announcement of the formation and purpose of MEHA to be sent to potential members and participants, included in the records of the meeting as Appendix F.

6.3 The Operating Committee was requested to provide distribution lists to the Steering Committee for its comments and forwarding to HRH Prince Firas for his use.

- 6.4 Dr. Arafat expressed keen interest in a closer Palestinian association with MEHA.
- 6.5 The Steering Committee deferred establishing annual MEHA membership dues.

7. MEHA ADMINISTRATIVE INFRASTRUCTURE (Agenda item 7)

7.1 The Steering Committee confirmed the need for both local and regional infrastructures to administer MEHA. In some instances, these infrastructures may be provided from within Steering Committee members' existing organizations. In other instances, independent organizational structures and facilities will need to be established.

7.2 The Steering Committee was requested to explore different legal options for establishing local and regional MEHA offices. Information should be circulated within the Steering Committee and provided to HRH Prince Firas by December 1999.

7.3 In the interim, local office facilities and administrative support for MEHA will be organized in Jordan through HRH Prince Firas and in Israel through the Schneider Children's Medical Center of Israel (SCMCI).

7.4 Precedents for organizing cooperative Regional Centres were identified as potentially useful models. The Jordanian Ministry of Foreign Affairs had assisted such efforts in the past.

8. MEHA 1999-2000 PROGRAM AND PROJECT PROPOSALS (Agenda item 8)

8.1 The Steering Committee reviewed the list of MEHA programs and projects for the 1999-2000 period as recommended by the Operating Committee, noting the appropriate mix of Educational, Infrastructure, Research, and Service programs and projects.

8.2 It was confirmed that all MEHA projects must conform to four criteria:

- 8.2.1 Scientific excellence;
- 8.2.2 Formal involvement of Principal Investigators from both Jordan and Israel, currently;
- 8.2.3 Confirmation by the Operating Committee as meeting all its requirements including availability of funds;
- 8.2.4 Identification of habilitation requirements and costs likely to be identified through the project.

8.3 The Steering Committee approved all the recommended programs and projects in principle. The Operating Committee was requested to manage their implementation on the basis of the availability of financial and appropriate human resources and their judgement of priority.

8.4 The approved list is reproduced in Appendix G.

8.5 Dr. Shalit identified the availability of collaborative training programs in conjunction with SCMCI for MEHA projects.

9. RESOURCING MEHA PROGRAMS AND PROJECTS (Agenda item 9)

9.1 The Steering Committee noted the generous financial support for MEHA that CISEPO had identified for the 1999/2000 operating year and CISEPO's commitment of funding for operating years 2000/2001 and 2001/2002 if MEHA has not secured other sources of funding, i.e. CND\$150,000 for each year.

9.2 Further to MEHA's principal of operation regarding the seeking or providing of hearing aids when MEHA projects result in identification of individuals with hearing loss, Professor Noyek advised the meeting that through a generous, philanthropic donation from Unitron Industries Limited of Canada, CISEPO will provide up to 100 hearing aids a year for the habilitation of needy individuals with hearing loss who are identified in the course of MEHA research projects. This commitment will be reviewed in three years time.

9.3 The meeting identified a number of potential international sources for funding MEHA activities, including foundations in Germany (such as GDF) and the United States of America.

9.4 The Steering Committee approved specific projects for implementation for 1999-2000 to a total of available funding as reproduced in Appendix H.

9.5 The Steering Committee authorized the Operating Committee to implement additional projects from the approved list (Appendix G) as additional funding is secured.

10. CLOSING OF THE MEETING (Agenda item 10)

10.1 The Steering Committee will meet in approximately 12 months time.

10.2 The chairman thanked all the participants for moving the discussions ahead to productive conclusions which will benefit all people in the region.

10.3 The chairman also expressed his gratitude to Dr. Goussous and the Royal Medical Services for their hospitality and for the use of their excellent facilities and for the support.

10.4 Professor Noyek, on behalf of all the participants, complimented HRH Prince Firas for his fine work and leadership as chairman of the meeting and as Patron of the Middle East Association for Managing Hearing Loss. He noted the complexity of the issue and the success of the chairman in maintaining the productive mood of the meeting. The group expressed its sincere appreciation.

10.5 The session closed Tuesday, 8 June 1999, at 14:00.

APPROVED _____

DATE:

His Royal Highness
Prince Firas ben Raad of Jordan
Chairman of the Meeting
Patron of MEHA

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MEETING PARTICIPANTS

HRH Prince Firas	Patron of MEHA and Chair of the Meeting
Dr. Y. Goussous,	Steering Committee
Dr. I. Shalit	Steering Committee
Dr. A. Noyek	Steering Committee
Dr. M. Al Masri	Operating Committee
Dr. J. Attias	Operating Committee
Mr. P. Aber	Advisor and Secretary to the Meeting
HE Ambassador O. Eran (Israel)	Dignitary
HE Ambassador M. Molloy (Canada)	Dignitary
Dr. A. Abbas	Observer
Dr. Z. Abdeen	Observer
Dr. M. Al Omari	Observer
Dr. F. Arafat	Observer
Ms. Z. Caspi	Observer
Ms. M. Hamzeh	Observer
Ms. L. Jones	Observer
Dr. A. Shannak	Observer

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AGENDA

1. OPENING OF THE MEETING
2. ADOPTION OF THE AGENDA
3. EXPANSION OF THE STEERING COMMITTEE
4. OPERATING COMMITTEE STATUS REPORT
5. OPERATING GUIDELINES FOR MEHA
6. MEHA MEMBERSHIP AND PARTNERSHIPS
7. MEHA ADMINISTRATIVE INFRASTRUCTURE
8. MEHA 1999-2000 PROGRAM AND PROJECT PROPOSALS
9. RESOURCING FOR MEHA
10. CLOSING OF THE MEETING

**First Planning Meeting
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OPERATING COMMITTEE STATUS REPORT

Background

1. The Steering Committee formed the MEHA Operating Committee in May 1998. Dr. Mohammad Al-Masri, Head, Department of Audiology, King Hussein Medical Centre, Jordan and Dr. Joseph Attias, Director Institute for Clinical Neurophysiology and Audiology, Schneider Children's Medical Center of Israel were appointed as the members of the Operating Committee to act on matters delegated to it.
2. The Operating Committee is responsible for:
 - 2.1 Developing operational plans;
 - 2.2 Creating teams to plan and to carry out bilateral and multilateral, regional programs and projects;
 - 2.3 Advising the Steering Committee.

Program Planning and Coordination

3. The Operating Committee exchanged correspondence, participated in conference calls, consulted with CISEPO, and met to consider and to respond to the issues referred to it by the Steering Committee
4. Initial efforts by the Operating Committee were directed to developing a work plan for 1998-1999.
5. In pursuing the implementation of its work plan, the Operating Committee undertook to develop policy recommendations for operating MEHA with respect to:
 - 5.1 Expansion of the Steering Committee;
 - 5.2 The development of Operating Guidelines;

5.3 MEHA membership and partnerships;

5.4 An administrative infrastructure for MEHA.

6. The Operating Committee developed a portfolio of program and project proposals to reflect MEHA's objectives.

7. The Operating Committee established a number of Advisory focal points to advise on and to assist in planning bilateral and multilateral, regional programs and projects.

8. The Operating Committee reviewed the services currently provided for the hard-of-hearing hearing and Deaf in Jordan and Israel with a view to developing background knowledge of requirements, availability and responsibility for them.

9. The Operating Committee consulted with the Canada International Scientific Exchange Program (CISEPO) regarding the funding of initial activities and projects and seeking stable sources of funding to operate the Association's programs and projects.

10. The Operating Committee prepared documentation and reports on the above activities as support for the First MEHA Steering Committee meeting.

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**OPERATING GUIDELINES
for the
MIDDLE EAST ASSOCIATION FOR MANAGING HEARING LOSS**

**FORMATION AND OBJECTIVES
OF THE MIDDLE EAST ASSOCIATION FOR MANAGING HEARING LOSS**

1. The Middle East Association for Managing Hearing Loss (MEHA) was established May 24, 1998 as a not-for-profit NGO, by an Agreement signed by Major General, Dr. Yousef Goussous, Director, Royal Medical Services, Jordan, Dr. Itimar Shalit, Director, Schneider Children's Medical Center of Israel, and Professor Arnold Noyek, Chairman, the Canada International Scientific Exchange Program (CISEPO). His Royal Highness, Prince Firas ben Raad of Jordan, Private Secretary to His Majesty the King for Health Affairs is the Patron of MEHA.

2. The objectives of MEHA are to promote and support cooperation in the region in advancing medical knowledge, and health and service programs related to hearing loss; and to contribute to stability and peacebuilding in the region by sponsoring medical, scientific, and educational interactions among regional colleagues for scientific and humanitarian purposes.

MEHA MEMBERSHIP AND PARTICIPATION

3. Membership in MEHA is open to representatives from all Middle Eastern countries and other countries, worldwide. Participation in MEHA programs and projects will be on a people-to-people and institute-to-institute basis with the intention of involving governments in an official capacity at a later date. Medical and non-medical institutes and individuals involved with ENT, audiology, speech pathology, teaching and care of the Deaf, primary health care, social work, pediatrics, neurosurgery, neurology, neurophysiology and other disciplines, and hearing impaired individuals and their families are invited to participate in MEHA and in MEHA's programs and projects.

MEHA ORGANIZATIONAL STRUCTURE

4. MEHA is managed by a Steering Committee consisting of representatives from each entity that signs the Agreement. The Steering and the Operating Committees will be enlarged from their original membership as other entities become party to the Agreement.

5. An Operating Committee, initially made up of Dr. Joseph Attias, Schneider Children's Medical Center, Israel and Dr. Mohammad Al Masri, King Hussein Medical Center, Jordan, was established by the Steering Committee to address operational and administrative matters and to advise the Steering Committee.

6. The Operating Committee will initiate a call-for-proposals of projects to all Members on a regular basis. Notification of the status of proposals will be provided to proponents three to six months following the closing date for applications.

7. The Operating Committee will create Working and Advisory Groups to advise on, to plan, and to carry out bilateral and multilateral, regional programs and projects. Groups will be established based on specific program and project proposals and requirements.

MEHA ACTIVITIES

8. MEHA will undertake program and project activities in: research, education, training, the exchange of scholars and fellows, clinical and other services for the hard-of-hearing and Deaf in the region, development, assessment, and transfer of skills, applications, technology, and techniques, and public education, and advocacy. These projects and programs will address the needs of infants, children, adults, the elderly, parents, teachers, and other communities with respect to hearing loss and related issues.

9. MEHA, as part of its activities, will sponsor regular, regional conferences and short courses to address hearing loss and related issues. Such conferences will disseminate clinical and scientific knowledge, the exchange of experiences concerning education, training, and the provision of care. The conferences also will foster interactions among regional colleagues to contribute to better and closer collaboration and will raise the professional profile of practitioners serving the hearing impaired in the region.

MEHA PRINCIPALS OF OPERATION

10. Special care will be taken to assure patient confidentiality in all project work to avoid identification of patients by other than the personnel directly involved in their care.

11. When MEHA projects result in identification of individuals with hearing loss, MEHA will involve itself in seeking or providing a full continuum of care including, prevention, provision of hearing aids, or other habilitation.

FUNDING, DUES, AND GRANTS

12. MEHA's activities will be financed by contributions and by membership dues.

13. Each member shall pay annual dues to MEHA, as established by the Steering Committee.
14. MEHA will provide grants or matching funding for suitable projects and programs.
15. The Canada International Scientific Exchange Program (CISEPO) will assist in funding initial activities and projects until the Association becomes self-sustaining. CISEPO will assist the Association in seeking stable sources of funding to operate the Association's programs and projects.
16. Initially, financial administration for MEHA will be undertaken at the Schneider Children's Medical Center of Israel. Third parties, like CISEPO, will be approached for assistance where applicable and depending on circumstances.

For further information please contact:

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MEHA MEMBERSHIP AND PARTNERSHIPS

Members

1. Membership in MEHA is open to representatives of medical and non-medical institutes, to individuals from all Middle Eastern countries, and from other countries, worldwide, who support MEHA's objectives.
2. Members are entitled to participate in MEHA Working and Advisory Groups to advise on, to plan, and to carry out regional program and project activities in: research, education, the exchange of scholars and fellows, clinical and other services, development, assessment, and transfer of skills, applications, technology, and techniques, and public education and advocacy. These projects and programs will focus on hearing loss and related issues and will address the needs of infants, children, adults, the elderly, parents, teachers, and other communities.
3. Members will receive notification and invitations to participate in MEHA regional conferences which address hearing loss and related issues. Such conferences will disseminate clinical and scientific knowledge, facilitate the exchange of experiences concerning education, training and the provision of care, and foster interactions among regional colleagues to contribute to better understanding and closer collaboration.
4. Members will receive copies of all MEHA formal documentation and announcements including: the Agreement on the Formation and Operation of the Middle East Association for Managing Hearing Loss, Official Minutes from MEHA Steering Committee meetings, news letters, calls-for-proposals of projects, and listings of approved projects.
5. Members are eligible to receive grants or matching funding for approved projects and programs.
6. Each member shall pay annual dues to MEHA, as established from time to time by the Steering Committee.

Partnerships

7. MEHA will seek and will welcome the development of relationships with other academic, humanitarian and peacebuilding organizations, and with governments, corporations, and institutes that share MEHA's objectives.

For further information please contact:

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LETTER OF INVITATION FOR MEHA MEMBERSHIP

Dear Colleague:

I am writing to inform you about the Middle East Association for Managing Hearing Loss (MEHA), and to invite you and/or your institute to participate in the Association's programs.

MEHA has been organized to promote and to support cooperation in the region in advancing medical knowledge and health programs related to hearing loss and, by so doing, to contribute to stability and peacebuilding in the region. To these ends, the Association sponsors medical, scientific, and educational interactions among regional colleagues which support scientific, humanitarian, and peacebuilding activities.

MEHA's projects are designed to address the needs of infants, children, adults, the elderly, parents, teachers, and other members of the community in the region. Projects are undertaken in areas which include hearing related: audiological and otologic research; education and training; clinical services; exchange of scholars and fellows; development and assessment of technology and techniques; and public education and advocacy related to hearing loss.

The Canada International Scientific Exchange Program (CISEPO) assists MEHA in carrying out its programs, facilitates linked activities with CISEPO's integrated programs, and is a member of MEHA.

Membership in MEHA is open to individuals, institutes, and non-governmental organizations from all Middle Eastern countries as well as other countries, worldwide. Membership will be of particular interest to professionals involved in audiology, otolaryngology, otology, language/ speech pathology, Deaf education, primary health care, social work, pediatrics, neurosurgery, neurology, and neurophysiology, as well as to hard-of-hearing and Deaf individuals and their families and to medical and non-medical institutes, managers, and administrators with an interest in hearing loss.

MEHA will develop cooperative relationships with Audiological, Hearing, and Speech Societies worldwide.

For additional information about MEHA, or to make application for membership, please make contact with any of the members of MEHA's Steering Committee or Operating Committee, as identified below. I also would ask that you distribute this letter to others whom you know will be interested in MEHA.

The contributions that the Association can make to the well being of the people in the region, and to peacebuilding are extensive. We hope that you will become involved.

Sincerely,

His Royal Highness
Prince Firas ben Raad of Jordan
Private Secretary to His Majesty the King for Health Affairs.
Patron of MEHA

STEERING COMMITTEE

Dr. Y. Goussous Director Royal Medical Services P.O. Box 2331 Amman 11831, Jordan Fax: 962 6 581 5572	Dr. I. Shalit Director Schneider Children's Medical Center of Israel 14 Kaplan Street Petah-Tikva 49202 Israel	Prof. Arnold Noyek Chairman, The Isabel Silverman CISEPO Program Mount Sinai Hospital, University of Toronto, 401-600 University Avenue, Toronto, Ontario, Canada, M5G 1X5 FAX: 1 416-586-8600 E-mail: cprato@mtsinai.on.ca
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OPERATING COMMITTEE

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APPENDIX G

**First Planning Meeting of the Steering Committee of
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**MEHA PROGRAMS AND PROJECTS 1999-2000
APPROVED IN PRINCIPLE**

<u>PROGRAM</u>	<u>PROJECT</u>	<u>DESCRIPTION</u>	<u>COST (US\$000)</u>
Education	Visiting Scholars Fellowships Continuing Education Exchange Conferences Workshops Visiting Professors	A series of educational and training programs and events related to hearing loss will be implemented at regional locations.	50
MEHA Infrastructure	Creating local administrative capability	Local administrative offices will be established within the region to permit MEHA to carry out its commitments in organizing, developing and implementing services, research and educational activities. Infrastructure considerations include: space, personnel, equipment, communications, operations, and financial management.	20 (for year 1 per office)

<u>PROGRAM</u>	<u>PROJECT</u>	<u>DESCRIPTION</u>	<u>COST (US\$000)</u>
Research and Service		1. Early Detection of Hearing Loss in Infants To determine the effectiveness, risks, comparative costs, and other issues related to early detection programs performed on Israeli and Jordanian infants comparing testing at times before the child is discharged and at age around month.	184
			166
	2. Incidence of hearing loss in Israeli, Jordanian, and Palestinian children: risk factors for misses and neglected areas.	To identify risk factors for hearing loss by examining children in underserved regions.	
	3. MEHA Data Registry	To design and implement a unified, regional registry for all MEHA data which will: allow access for further studies into foci and possible risk factors for hearing impairments in the region; be expandable to include data from additional projects that follow; facilitate interaction, communication and the sharing of data and resources within MEHA.	10
	4. Epidemiology of hearing loss among Israelis, Jordanians, and Palestinians in the region	To identify and monitor the prevalence, incidence and causations of hearing loss in the Middle East region	200
	5. Noise Induced Hearing Loss	To study the early indicators of noise induced hearing loss (NIHL). Prophylactic measures and treatment of NIHL and hearing conservation program will be studied and implemented.	175
		185	
	6 An early identification and intervention School Communication Care Program	A qualitative and quantitative analysis will be carried out on communication problems in regular schools KG through grade eight.	

<u>PROGRAM</u>	<u>PROJECT</u>	<u>DESCRIPTION</u>	<u>COST (US\$000)</u>
Research and service (continued)	7. ENG and posturography	To evaluate otoneurologic differences between patients with persistent vertigo of traumatic vs non-traumatic origin. Normative data will be collected from clinical findings on subjects of different ethnic backgrounds using the results of posturographic examinations.	55
	8. Effectiveness of DPOAE and TEOAE on prediction audiograms: a review and data analysis	Existing files will be analyzed and recorded, including subjective and objective hearing data, to develop an objective relationship between the DPOAE and TEOAE measurements.	11
	9. Genetics of Hearing Loss in the region	Genetic information relevant to hearing loss in the region will be collected and analyzed.	40
	10. Speech disturbances among children in the region	A sampling of children in the region will be surveyed to assess the incidence and prevalence of speech disorders.	100
	11. A study of auditory function of middle school children with Attention Deficit Disorder (ADD)	Auditory functioning in children suffering from ADD and control subjects will be assessed through the recording of audiological measures.	10
	12. Studying the Vestibular Function and its Relationship to Age, Adaptation, and Noise	Vestibular Evoked potentials will be studied in animals to determine the effects of various factors.	10
	13. Differential Effects of Loop Diuretics on the Cochlear Hair Cells		<u>2</u>
		TOTAL	1,218

**APPROVED MEHA PROGRAMS, PROJECTS, AND EXPENDITURES
1999/2000**

<u>PROGRAM</u>	<u>PROJECT</u>	<u>DESCRIPTION</u>	<u>EXPEND (US\$000)</u>
Research and service projects	Early Detection of Hearing Loss in Infants	To determine the effectiveness, risks, comparative costs, and other issues related to early detection programs performed on Israeli and Jordanian infants comparing testing at times before the child is discharged and at age around month.	70
	An early identification and intervention School Communication Care Program	A qualitative and quantitative analysis will be carried out on communication problems in regular schools KG through grade eight.	50
MEHA Infrastructure	Creating local administrative capability	Local administrative offices will be established within the region to permit MEHA to carry out its commitments in organizing, developing and implementing services, research and educational activities. Infrastructure considerations include: space, personnel, equipment, communications, operations, and financial management.	20
Education	Visiting Scholars Fellowships Continuing Education Exchange Conferences Workshops Visiting Professors	A series of educational and training programs and events related to hearing loss will be implemented at regional locations.	10
Research and service projects	Effectiveness of DPOAE and TEOAE on prediction audiograms: a review and data analysis	Existing files will be analyzed and recorded, including subjective and objective hearing data, to develop an objective relationship between the DPOAE and TEOAE measurements.	11
TOTAL			161

* Confirmed funding of \$100,000 has been identified