



Indian Speech and Hearing Association (ISHA)

Regd. Under the Kamataka Societies Registration Act. Karnataka Act No. 17 Registration No. 25/67-68

PRESIDENTIAL ADDRESS

Presented by



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I am delighted, I am delighted because I am the president of ISHA. I am doubly delighted because I was elected to this post at my alumni in Mysore, place of my worship, where I qualified to be what I am today and I am being installed as president in Indore, again a place of my worship where I have been working for the past 33 years to be what I am today. Thanks to all of you for the trust you have placed on me and I hope I will be able to fulfill your aspirations. I am sure you will all help me do so.

While writing this speech, I was pondering about what my previous presidents wrote in their speeches. What their concerns were not too surprisingly my concerns too are the same as theirs-

1. Magnitude of the problem and lack of personnel and infrastructure
2. Early identification
3. Prevention

India has a population of nearly 110 crores and over 80crores of them are in rural areas. To meet the needs of such a large population, we need thousands of Speech & Hearing professionals but we have only a handful of them. There are 20 Institutions producing qualified professionals but the number is like a drop in the ocean. And nearly half the members forming that drop also migrate to other countries.



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This lack of qualified people has culminated in lot of non-professionals, professionals of other fields and scores of others intruding the field. It has become a breeding place for quacks. This matter should be taken seriously. There is an urgent need to have more training institutes. At least each state must have one such training centre.

In M.P. & Chhattisgarh the matter is worse, India's largest state had perhaps the least number of professionals. Both states put together there are only 15 professionals 12 in M.P. and 3 in Chhattisgarh (all in Bilai only). Government should take note of this. Thanks to some institutions who are conducting diploma courses. Perhaps the idea was to provide rural population with basic facilities where the problems could be identified and followed up. I wonder how many such diploma holders are working in rural area! Most likely they turn towards bigger cities for better prospects to be called Audiologists and Speech Pathologists!

At the same time, through outreach program conducted by some institutions, some relief is provided to at least semi urban community. But it is immensely inadequate. There are NGO's and clubs who conduct camps. But most of these camps end up distributing hearing aids without any further follow up. So the entire exercise becomes a waste. Government spends crores of rupees for this purpose. It is our duty to make these camps more meaningful, purposeful. May be a day will come when all the rural areas are covered by speech and hearing professionals. But till then, the onus is on the practicing speech and hearing clinicians to reach out and extend his work to villages, with or without the help of NGO's and social clubs. If every clinician devotes at least one day every month to visit villages, he would be doing a lot of service to the society.

The other points of concern are early identification and intervention and prevention. For all the above-mentioned reasons problems remain unidentified or are identified very late. Apart from government agencies, our contribution in this area is immense. Public awareness is the key factor. Our camps should aim at education the public in this regard. We need to encourage all the hospitals and paediatricians to arrange for hearing check of at least high-risk babies, if not all the newborns.

I believe ISHA can play a major role in this activity. During special events such as international day for the deaf, international day for the disabled, speech and hearing week etc, the association can run theme programs, so that it draws the attention of people. For this reason, there



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must be a unified effort from ISHA, through its state branches and city branches (of course we need to form such state branches).

Every year, during the conference a big question crops up. Brain drain. Why do people want to go away elsewhere? Are monetary benefits the only contributing factor? Or is it the deficiency in the working conditions and lack of good infrastructure? To my mind, one major cause for dissatisfaction is the kind of competition they have to face. If the competition is between two professionals from the same profession it is all right. But if the competition is with non-qualified, under qualified or ill-qualified persons it becomes very frustrating. From doctors to hearing aid and ear mould technicians and even hearing aid companies marketing people practice as audiologists and speech and pathologists. Unfortunately there are plenty of them with adequate support from ignorant public, not so ignorant professionals from other fields and totally non ignorant our own professionals who for their own selfish motives encourage them.

Unless and until such factors are eliminated it may be difficult to prevent our young generation from working elsewhere for better opportunities. ISHA must take strong steps to prevent such interference from such quacks.

But, if ISHA has to act strongly, it should become strong and that strength is its members. Though nearly 300 – 400 graduates pass out every year from various institutes, ISHA is barely touching 1000 members mark. ISHA should have had 2000/3000 members by now if all had enrolled as members.

Even some students here have enrolled as student members because it is mandatory if they have to present their papers. I do not understand the apathy for becoming members of ISHA. Is it that ISHA does not fulfil their expectations? Some people even ask what is the use of being a member of ISHA! My friend, what we cannot achieve as an individual, a small group can and what a small group cannot achieve, a larger group can. I need not give the example of the old adage, five fingers make a fist, which can punch. As a large group or community, we can be heard and heard we must be if we want our profession to grow.



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The association must also act in a manner to win the confidence of its members. Apart from providing relevant professional and scientific update to its members. It must also play a supportive and protective role in case of need. It also must provide guidance to new professionals who wish to set up practice. There is a need to form a guidance cell comprising of experts who can provide necessary information to the people.

Another matter of concern is the falling ethical standards. A few greedy professionals go to the extent of manipulating the reports to appease their referrals sources or for their own monetary gains. These may be very few, but they are sufficient to tarnish the image of the profession because people tend to generalize these issues. The association must play its role to expose such individuals. We need to revamp the committee on ethical standards and redefine its role. We may not have statutory powers but we have sufficient power to make our presence felt.

Talking of powers, I would like to repeat what Mr. Manoharan said in his speech during the Mysore conference. ISHA as an organization has no say in policy making high-level committees. Whatever representation is there it is essentially institutional. Association must have some representation.

Hopefully a time may come when we have our own council, but only if we make our association strong and powerful. Let us stay united and work towards these goals.

Whatever, I have had to say here are out of what I have learnt from my experience. My goals are small. As we all have responsibilities towards the association, the association also has responsibilities towards its members to provide hurdle free atmosphere to work honestly, sincerely and to the best of their abilities to serve humanity.

Thank you all.