A model for eye care service delivery to urban underprivileged populations in New Delhi

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It is estimated that 40% of Delhi’s population resides in urban slums, in conditions of poverty, illiteracy and poor hygiene. The majority of the people are unskilled and semiskilled daily wage earners who spend a major share of their income on food for themselves and their families. It is estimated that Delhi has one eye surgeon per 23,282 persons, but most of the eye care services are located in the more affluent parts of the city. These services are generally beyond the reach of the economically disadvantaged due to the high cost of consultation and surgery. So there is a need to develop accessible health care services, including eye care for disadvantaged populations in urban slum clusters.

Dr. Rajendra Prasad Centre for Ophthalmic Sciences has been providing Comprehensive Eye Care Services in selected slums of South Delhi since 1993. Initially 3 slums were adopted and bi-weekly clinics organized at the clinical outposts in the slum clusters. A number of non-government organizations (NGOs) were identified; it was decided to build up partnership with those NGOs actively working in the local slums. The area has also been developed as a field practice area for training different categories of eye care personnel in community ophthalmology.

The objectives of the programme are as follows:
1. To provide comprehensive community-based eye care services to economically disadvantaged populations of selected urban slum clusters of South Delhi.
2. To create awareness in the community, provide eye health information and thereby generate demand for services.
3. To reduce the prevalence of blindness by mobilising primary services at the community level
4. To provide referral services for diagnosis and treatment of more complicated ocular conditions.
5. To facilitate sustainability of eye care services by working in close association with the community and local groups.

At present, the RP Centre provides comprehensive eye care services in 10 clusters of urban slums in south Delhi. The estimated combined population of all the slum clusters is 100,000. Primary Eye Care clinics (PEC clinics) and additional refraction clinics have been set up in all the clusters. Linkages have been established with two NGOs – Deepalaya and ASHA – which are active in these slum areas. The infrastructure used by NGOs for their own developmental activities is also utilized for eye health care services without any additional set-up cost. The following slum clusters have functioning PEC clinics: Govindpuri, Sanjay Colony, Gol Kuan, Gandhi Basti, V P Singh Camp, Ekta Vihar, Ambedkar Basti and Kanak Durga. OPD services are available once a week in Govindpuri, Sanjay Colony, V.P.Singh Colony and Ekta Vihar and fortnightly in Ambedkar Basti, Kanak Durga, Gandhi Basti and Gol Kuan. Additional refraction clinics for refraction services and spectacle distribution are functional in all the slum clusters. The clusters are located at a distance of 4 to 15 km from RP Centre. The eye care services are offered in the slums from 10.00 a.m. to 5.00 p.m. The PEC clinic and refraction clinic function in the morning and in the afternoon, field workers conduct eye health education events and training events for the volunteers in the community. They also make follow-up visits to operated patients.
primary eye care, flip charts, handbills and posters are used for eye health awareness. Special IEC materials have been developed for health awareness.

Training of volunteers: 6-8 volunteers are selected from each slum cluster from among community leaders, women’s groups, self-help groups and youth groups. They are oriented about common eye diseases and their prevention. The members of these groups spread messages for better eye health in the community. They also motivate people to seek eye care services from the PEC centres for their eye problems.

Performance During 2004
A total of 9,544 patients were examined in PEC clinics, of which 2,011 (21%) were children. 998 patients were referred to the RP Centre for surgery or diagnostic investigations. Subsidised spectacles were dispensed to 1,659 patients at the R.P.Centre including 160 children (9.6%). Eleven schools were covered under the School Vision Screening Programme. Training was conducted in the local schools and screening kits were provided to all the teachers. A total of 1,053 children were screened by the teachers. Children with subnormal vision were referred to the PEC clinics for refraction; 49 of these children were provided spectacles by the RP Centre. Seven women’s groups and 14 community volunteers joined the project in different clusters in the last year. A total of 7 training events were organised for the volunteers and were attended by 67 participants. Seventeen eye health awareness events were organised, and 1051 participants attended these events.

The Department of Community Ophthalmology has been providing Primary Eye Care Services in the slum clusters for more than 10 years. The programme is sustainable primarily due to active community participation and support of NGOs active in the area. The model is cost effective for prevention and control of blindness.

Staffing at the PEC Clinics
The staff at the PEC clinics consists of one ophthalmologist, one refractionist and 2 field workers. Another refractionist runs the refraction clinic with the help of a field worker. An additional worker is posted in the department at R. P. Centre to help patients who are referred here.

Services provided through the centres
The PEC clinics provide treatment for common eye conditions. Medicines are dispensed free of cost to patients. Patients requiring further investigations and treatment are referred to the RP Centre, where they are provided free of cost. The health worker posted in the Community Ophthalmology department facilitates the patient visits; this includes steering them through OPD consultation, investigations, admission and care in the wards. Cataract surgery (with IOL) for these patients is free. Patients are provided subsidised spectacles from the Optical Research Unit of the National Society for the Prevention of Blindness (NSPB) at the RP Centre. Part of the payment for the spectacles is made by the patients. Sight Savers International supports the eye care services in these slum areas.

School vision screening programme
Teachers working in the schools around the slum areas are trained to screen the children in their schools. These teachers receive a screening kit that consists of a vision card, measuring tape and registers for record keeping. Children screened by the teachers undergo refraction in the clinics in their slums. Children diagnosed with refractive errors are prescribed spectacles. Free spectacles are provided to these children at RP Centre.

Eye Health Education Events are organised at regular intervals in the slums. Around 30-50 people from the slum cluster attend each education event. The event includes talks by doctors, social workers and optometrists on the prevention and control of common eye conditions prevalent in the community. Health talks on common eye conditions are delivered daily in the PEC clinics. Appropriate health education aids, e.g., films on
in the underprivileged population. It is recommended that similar eye care models be adopted in the entire country to provide eye care services especially for the underserved and deprived population.

Sources

VISION 2020 – India Forum Initiatives
April 2005 to September 2005

As published in the first issue of the Indian Supplement of the Community Eye Health Journal, the VISION 2020: the Right to Sight - India is conceived as a National Confederation of International Non-Governmental Organizations (INGOs) and National Non-Governmental Organizations (NNGOs) as a coordinating, umbrella organization to lead national efforts in mobilizing resources for blindness prevention activities. It is a national confederate body to strengthen the implementation of the VISION 2020 activities in alignment to national objectives and targets and thus contribute to the elimination of avoidable blindness. It is poised to develop as a “National Entity for Transformation, Human Resource Development, Research, and Advocacy". NETHRA (meaning eye) for action in eye care in India.

Within the mandate of combating avoidable blindness, the Forum has major objectives. These are:
- Disseminating ideas and information on successful approaches to eye care delivery.
- Increasing public awareness of needs and solutions and sharing experiences with others in the field.
- Supporting the programs and strategies of Government of India through close dialogue, mobilization of resources and facilitation of activities of VISION 2020: The Right to Sight India.

More specifically the forum has the following objectives
2. Advocacy -
   a. Pursue with states for their action plans for blindness control development
   b. Organizing events like World Sight Day, Eye Donation Fortnight etc.
   c. Collection, Collation & Distribution of Eye Health materials
   d. Contributing to development of the VISION 2020 India Newsletter
   e. Publishing Indian Edition of Community Eye Health Journal
   f. Featuring regularly in all National Journals, Media & National Health related events
   g. Enlisting Public/Corporate support
   i. Mapping National - Needs, Current Resources, Services, and Coverage
   j. Mapping & Website of INGOs - Information on Services, Facilities with Partners & Plans for enhancement
   k. Updating Information of the above. Establish methods of collection of information & data
   l. Facilitation of Workshops, Seminars, Conferences pertaining to Priorities of VISION 2020 - The Right to Sight
   m. Monitoring the above
   n. Programmatic involvement - Developing & facilitating Guidelines, Norms, Resource Materials, Forming appropriate Expert Committees for different aspects of the program to name a few
   o. Resource Management - Mobilization from members and new sources for carrying out the programmatic activities and the overheads of “VISION 2020 - The Right to Sight: India”.

Towards achieving these objectives, the following were the activities that were carried out during the period April to September 2005.


The Forum started playing very a strong advocacy role in India in the one year since its establishment not only to raise the profile of various stake holders and sectors (NNGOs, INGOs, Corporate and the Government) but also help different State Governments in developing State Plans. Prominently during this period it has the following activities that contributed to strengthening of advocacy and action in the country.

VISION 2020: INDIA Forum has strategically started facilitating the State VISION 2020- Action Plans and also the launch of State forums. To make this happen it has started interacting with all stake holders in the states and organizing and participating in conferences for the purpose among State Blindness Control Societies in the States of Rajasthan, Tamil Nadu, Jharkhand and West Bengal.

Eight members were co-opted into the Forum during the period from five states namely Orissa, Uttar Pradesh,
Maharashtra, Rajasthan and New Delhi. The NGOs are Sikshit Yuvak Sangh, from Basti, Uttar Pradesh, Serango Christian Eye Hospital from Serango, Orissa, Aditya Jyot Research Foundation, Mumbai, Maharashtra, PCB Trust, Jodhpur, Rajasthan, Kota Eye Institute, Kota, Rajasthan, Mahatme Eye Hospital, Nagpur, Maharashtra, Venu Eye Institute and Research Centre, New Delhi and JPM Rotary Eye Hospital, Cuttack, Orissa.

To understand the member organizations better and also to spread the message of VISION 2020, the Forum has been individually visiting and interacting with agencies at the field level. Several such field visits to various partners were undertaken during the period.

VISION 2020-India had participated in various programmes organized by its partners with an intention to spread its initiatives and build a strong network among all stakeholders during the period.

In its endeavor to spread the message of VISION 2020: The Right to Sight and to provide tailor made services to members, VISION 2020 India Forum had organized several workshops during this period.

The Regional workshop (Central India) on VISION 2020 initiatives at Chitrakoot, MP.

The Resource Mobilization workshop in Hyderabad, Andhra Pradesh.

National workshop on Low Vision in Ahmedabad Gujarat.

A total of about 250 delegates from all over India had participated in these workshops.

Under the thrust area of the research and development VISION 2020: The Right to Sight – INDIA Forum organized its first Operational Research Advisory Board (ORAB) Meeting during this period. ORAB had suggested that the first operational research study, “to estimate work capacities of Human Resources for VISION 2020-India programs” to be awarded to the Dr RP Centre for Ophthalmic Sciences, AIIMS, New Delhi. A Memorandum of Understating has been signed between VISION 2020-India and Dr RP Centre with a view of providing better insight into better utilization of Human Resources for Eye care.

The Board of Management had met three times during this period to give proper shape, direction and inputs to the VISION 2020 India Forum. The first Annual General Board meeting (AGBM) was held in the month of August in Madurai. Prior to the AGBM, all the member partners along with founder members participated in a five-year Perspective Planning Workshop. In the workshop different themes were discussed on the strategic pillars and sub committees were formed to provide guidance and necessary inputs to streamline the activities of the VISION 2020-India and also to help the Government of India in formulating the national XI Five-year plan.

The International Centre for Advancement of Rural Eye Care (ICARE), L.V. Prasad Eye Institute (LVPEI), Hyderabad will be running its sixth Diploma in Community Eye Health (DCEH) course from 9 January to 30 June 2006. The course is a combination of different modules and the enclosed time table shows the names of the module, duration and dates.

<table>
<thead>
<tr>
<th>No.</th>
<th>Module Name</th>
<th>Duration</th>
<th>Dates</th>
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<tbody>
<tr>
<td>1</td>
<td>Introduction to Prevention and Control of Blindness</td>
<td>1 week</td>
<td>9 – 14 January 2006</td>
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<tr>
<td>2</td>
<td>Basic Epidemiology &amp; Survey Methods in Eye Health</td>
<td>3 weeks</td>
<td>16 January – 4 February 2006</td>
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<tr>
<td>3</td>
<td>Prevention &amp; Control of Blindness in Childhood</td>
<td>2 weeks</td>
<td>6 – 18 February 2006</td>
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<td>4</td>
<td>Community Needs Assessment for Eye-Care Delivery</td>
<td>1 week</td>
<td>20 – 25 February 2006</td>
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<tr>
<td>5</td>
<td>Common Eye Infections &amp; their Prevention &amp; Control</td>
<td>1 week</td>
<td>27 February – 4 March 2006</td>
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<tr>
<td>6</td>
<td>Prevention and Control of Blindness in Adults</td>
<td>3 weeks</td>
<td>6 – 25 March 2006</td>
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<td>7</td>
<td>Observation of Functioning of a Secondary Eye-Care Centre</td>
<td>4 days</td>
<td>27 March – 1 April 2006</td>
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<td>8</td>
<td>Vacation</td>
<td>7 days</td>
<td>3 – 8 April 2006</td>
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<tr>
<td>9</td>
<td>Human Resources Development for Eye-care Delivery</td>
<td>2 weeks</td>
<td>10 – 22 April 2006</td>
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<tr>
<td>10</td>
<td>Planning &amp; Management for Eye-care Delivery</td>
<td>3 weeks</td>
<td>24 April – 13 May 2006</td>
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<td>11</td>
<td>Infrastructure, Technology, Sustainability &amp; Health Economics</td>
<td>1 week</td>
<td>15 – 20 May 2006</td>
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<td>12</td>
<td>Basic Principles in Evaluation of Health Programs</td>
<td>1 week</td>
<td>22 – 27 May 2006</td>
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<td>13</td>
<td>Health Promotion and Education in Community Eye Health</td>
<td>2 weeks</td>
<td>29 May – 10 June 2006</td>
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<td>14</td>
<td>Donor Reporting and Fund Raising</td>
<td>1 week</td>
<td>12 – 17 June 2006</td>
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<td>15</td>
<td>Study Leave, Examination, &amp; Graduation</td>
<td>10 days</td>
<td>Exam dates 22 &amp; 23 June 2006</td>
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For more information on the course, fees and combination of modules to get a Certificate of Diploma, please contact

**Community Eye Health Courses Convenor**

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