

## **Negative Impact of Blindness in Children in a Rural Community Setting**

**PRIMARY READERS:** Ministries of Health and Social Welfare.

**MESSAGE:** Ensuring access to appropriate Eye care increases awareness on blindness in rural communities

### **INTRODUCTION**

Though the government of Sierra Leone has passed a policy on the access of free health care including eye health for all children under five years, some barriers still exist which hinder children in the remote communities from accessing appropriate eye care services. There are still people in some of these rural communities who hold negative views about children born blind or acquire blindness in their early childhood. These negative concepts or beliefs have resulted in denying so many children from getting cured of avoidable blindness. In order to increase accessibility to eye care services to children, there is need for appropriate stakeholders to address this problem.

### **A Case study of an Eleven year old boy in a village in Kono District – Eastern Sierra Leone**

Aiah Soluku is a little boy living with his mother in a small village called Kaima which is about 36 miles away from the district headquarter town of Koidu. He was attending the only primary school in the village but dropped out in 2008 because of poor eye sight while in class 4. However, even before Aiah dropped out of school, he used to complain about his poor eye sight to his mother but they did not take it seriously as he was still capable of moving about on his own. While still in school, his teacher was the person who detected that Aiah had a problem with his vision, which greatly affected his school work thus dropping behind in his grades. In addition to this, his movement became very slow and he even started asking his friends to help him around. The class teacher reported this observation to Aiah's mother who, although illiterate and a widow became worried and started looking for ways to address her son's problem singlehandedly. She began by visiting the native doctors/ sorcerers to find out why her active young boy should go blind from an unknown cause. She was given conflicting reasons from all the various sources she visited for the child's blindness.

According to Aiah's mother, one native doctor told her it's witchcraft by someone in their family and that no cure could be found. Another told her that the boy's sight was taken away by one of his colleagues in class who belonged to a secret cult. Some other community member told the mother that the boy visited the kitchen too regularly that is why he acquired the eye condition from smoke toxins. Though she was not given any hope for a cure for her son's predicament, nevertheless she tried another native doctor who also failed to cure her son's blindness. She finally gave up all trials in solving this problem and abandoned the little boy in the hands of the Almighty.

In this blind state the boy no longer went to school and his movement had become severely restricted for he could not enjoy a normal childhood, such as playing with his friends. There was also a risk of him getting involved in accidents and sustaining injuries.

Luckily for Aiah, a free medical programme was extended to Kono district by the Sierra Leone Medical and Dental Association with some support from Sightsavers in the sector of Eye Health. When an announcement was made for this exercise, a neighbour heard it on the radio and informed the Aiah's mother about the date and venue of the screening exercise. The mother visited the

hospital where the screening exercise was taking place. Aiah was diagnosed by the eye care team with ***Bilateral Developmental Mature Cataract***, which fortunately is curable by surgery. He was operated on by the eye care team on the 25<sup>th</sup> May 2011. After surgery on both eyes, the mother and boy were both thrilled as he regained his sight and could go on with his normal life activities and be able to realise his full potential.

#### **WAY FORWARD**

Had it not been for the intervention of the health sector in offering this free health services or making it accessible by coming closer to deprived communities, Aiah would have remained permanently blinded and lived with all the implications of a blind or disabled person in a village setting. Based on this, it is recommended that;

- The availability of eye health services in communities can go a long way in addressing situations such as Aiah's. With the presence of the services, community members will be persuaded to try the conventional means of treatment especially where others have failed.
- By proving positive and demystifying cultural beliefs in our work as Eye Health Care providers, trust is built and negative beliefs are consequently changed.
- Health educators for instance, district health education officers should engage the radio vigorously in disseminating information on eye health to dispel negative concepts among communities.
- Eye health workers should be supported to conduct extensive outreach activities including eye health talks in community gatherings
- Social workers should also engage community members in sensitization forums with the aim of changing their negative cultural beliefs that contribute to denying children their right to eye health.

If the abovementioned strategies are fully implemented in communities by the relevant stakeholders, some of these avoidable disabilities will be overcome thereby giving children the opportunity to become productive citizens and subsequently contribute to the nation's development.

#### **Written by:**

Lansana Sheriff  
Cataract Surgeon  
Eastern Province Eye Care Project  
Kenema, Eastern Sierra Leone