

# Community Eye Health

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## COMMUNITY PARTICIPATION

### 'Putting the Community into Community Eye Health'

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The challenge of promoting eye health and prevention of blindness can only be met through a change of emphasis towards active involvement of communities in order that:

- Persons with early symptoms are encouraged by their family to attend health services when their conditions are still treatable.
- Patients follow treatment procedures to ensure a full recovery.
- Families adopt changes in lifestyle that encourage eye health and prevent eye disease.
- Communities take action to improve their environment to reduce risk of transmission of eye diseases and promote eye health.
- The community demands that policy-makers give priority to improving eye care services.

#### Community Participation

A community participation strategy should take into account the many factors that can

influence community actions. These include community beliefs, perceptions and values concerning the cause, prevention and treatment of the different forms of blindness. Of basic importance are the felt needs and understandings and values that the community place on health in general and eye health in particular. A community-based approach should also consider the pattern of influences and decision-making in the family and community including family members, elders, local leaders and traditional healers. These influences are often rooted in local culture and traditional health practices.

Effective action therefore involves moving from a patient-centred approach to one which involves the family and community in making decisions and taking action. Communication and health education are at the heart of this community-based approach which was first outlined in the concept of primary health care that emerged in the Alma Ata Declaration in 1978. The development of community-based eye health promotion can benefit from the successes



Artwork: Victoria Francis

and failures over the last twenty years of many programmes on other health topics. These have explored a wide range of relevant strategies including: developing village health workers, working with traditional healers, using folk media and drama, social mobilisation and advocacy, self help groups, social marketing and improved patient education.<sup>1</sup> Of particular interest are developments in participatory learning and rapid appraisal methods.<sup>2-4</sup> These new approaches respect and build on community values and culture and use methods aimed at promoting decision-making skills and community empowerment.

#### Conclusion

There is an overwhelming need for a community-based approach to eye health promotion. Most of the methods needed have already been developed for other health topics. The challenge is to apply them to the most important goal of all - the prevention of blindness.

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- 1 Hubley J. *Communicating health: an action guide to health education and health promotion*. Basingstoke and London: Macmillan, 1993.
- 2 Keehn M. *Bridging the gap: a participatory approach to health and nutrition education*. 54 Wilton Road, Westport, Connecticut 06880, USA: Save the Children, 1982.

- 3 Welbourn A. *RRA notes 16: Special issue on applications for health*. n: International Institute for Environment and Development, 1992; 1-115.
- 4 Pretty JN, Gujit I, Thompson J and Scoones I. *Participatory learning and action*. London: International Institute for Environment and Development, 1995; 1-265.

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- ◆ MSc in Community Eye Health – 1 year (Sept. 2000 – Sept. 2001)
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**Enquiries: Courses Promotions Officer, International Centre for Eye Health,  
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