

## **Establishing Women's Vision Centres in Bangladesh**

### **Barriers Women Face in Getting Eye Care**

As women have lower status and lack of access to funds in the family, they are required to seek approval from male family members to visit hospitals. They are unable to make decisions for their own treatment. Women often wait several weeks before a male relative brings them to see a doctor.

Many hospitals are also located a distance away from these rural communities. Traditionally, women require a male relative to bring them to the hospitals. Many are afraid to travel alone to far places. Mothers are also expected to care for their children and are unable to leave them for extended period of time to travel to the hospitals to get treatment.

### **The Vision Centre Model**

The establishment of a Vision Centre provides communities access to primary eye care services and in turn, generates social and economic benefits to the overall population. Within a rural community setting, people who would otherwise not be able to afford or access eye care services can receive much needed care in a timely manner, before their condition becomes irreversible.

Vision Centres offer promotive, preventive, referral and follow up services. These services include primary eye care, early identification and referral of eye conditions such as cataract, Diabetic Retinopathy, pediatric eye problems and eye injuries. The centers will also largely address refractive error and will have provision for dispensing spectacles.

In a country with a shortage of available eye health professionals, with only 950 ophthalmologists, a Vision Centre provides technical employment opportunities for local community members and trains each cadre to their maximum potential.

The health sector is a growing area of employment (The Lancet Global Health, 2018) and training programs for eye care professionals do exist throughout the country. Mid-level ophthalmic assistants are trained for a little more than a year after which time they have the knowledge and skills to manage a VC; they are then supported in day-to-day clinical procedures by doctors and medical staff located at the base hospital through the VC's tele medicine capabilities.

By reaching into the community to identify local trainees, the Vision Centre model helps establish trust and informal information networks that can ease fears about seeking treatment, often a barrier to eye care uptake and follow up care in rural areas.

Orbis believes in eye care for all and specifically targets vulnerable, marginalised populations for eye care services by utilising the Vision Centre model. Vision Centres are set up in remote, hard to reach areas where there are no other eye care services available. With the creation of a Vision Centre, people who would not have normally accessed care are able to do so and experience cost savings as well.

## **Vision Centres for Women**

The Vision Centre model also addresses a variety of traditional barriers for women and girls. Vision Centres are strategically located nearby to communities, allowing women the opportunity to visit to receive services without the need to travel far distances, which can be a potential security risk, or take time off from their duties in the home or from formal/informal employment obligations. In traditional settings, women need a male relative to accompany them. Having a Vision Centre in their community reduces this need and encourages women to visit the Vision Centre.

Orbis established women-run vision centre, allowing women patients to feel more comfortable and accept counselling advice and diagnoses. Orbis and partners also train women volunteers to spread messages on prevention and promoting eye care. During school screening events and outreach efforts, special efforts are made to ensure girls and boys have equal access to receive eye care services.

Partners for this project are committed to ensuring Vision Centres are designed to be child and family friendly and include play areas with toys and dedicated spaces for families to wait while accessing services. Children make up approximately 10% of the patients receiving care at Vision Centres and 52% of all patients are female. These statistics suggest that Vision Centres are successful in designing interventions with a gender lens, ensuring barriers for accessing services are considered and addressed for both adults and children.

Orbis International has specifically chosen to work with partner organizations in Bangladesh that utilize a gender approach to ensure women are given ample opportunities for technical eye health training and employment at Vision Centres. Many partners, including Grameen, have mainstreamed gender into all their project activities. Grameen works toward achieving gender equality by providing access to services to the most vulnerable as well as specifically working to train and employ female eye care professionals and staff.

## **Sustainability of Vision Centre**

The cost to equip a Vision Centre is minimal and allows for financial sustainability in a relatively short period of time. With an upfront investment in the initial capital costs, the centre can focus on providing subsidized rates for services and designing innovations to allow them to better serve their community. A Vision Centre requires minimal medical equipment, basic furniture, a computer and accessories for internet connectivity. Other costs include installed signage for eye health messaging, marketing and branding the facility and its services.