

Awareness and Health Seeking Behaviour Regarding Cataract among Urban Slum Population, Raipur, Chhattisgarh

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Abstract :-

Background: Vision is one of the most cherished sense and most of us can hardly imagine what it would be like to lose it. Blindness is a chronic non – communicable disease, which is major public health problem worldwide specially in developing countries like India. Major contributing factor of blindness is cataract, by timely intervention, blindness can be prevented, this study based on assessment of awareness and healthcare seeking behavior, can fill the gap in knowledge related to cataract.

Methods: This Community based cross sectional study was carried out in among 250 adult residents of Raipur City (C.G.). multistage random sampling was used. Data was compiled and analysed in MS excel.

Results: Majority (78.8%) of participants had heard of Cataract, 83.23% were aware of the symptoms of cataract. The most common reported symptoms of cataract were white opacity (59.89%) followed by diminution of vision (57.36%). (36.04%) study subjects with self or family member were detected with cataract in last 2 years. Out of them, 65 participants went to doctor (41.26% to Govt. doctor and 50.70% to private doctor) and 9.85% did nothing about it.

Conclusion: There was good awareness about symptoms of cataract and good health seeking behavior related to cataract.

Keywords:- Awareness, Cataract, Health Seeking Behaviour.

I. INTRODUCTION

Blindness a non – communicable disease is a big public health problem of developing countries including India. There is huge reduction in prevalence of blindness by 47% from 2007 to 2019 and reduction in visual impairment by 51.9%. India has additionally reduced the number of blind from 12 million to 4.8 million during that same period. Despite this phenomenal success, cataracts continue to be a challenge (1).

Cataract was the principal cause of blindness (66.2%), severe visual impairment (80.7%), and moderate visual impairment (70.2%) (2). Increased awareness amongst large population group is a major determinant for the prevention of Cataract and its complications as well as knowledge related to visual impairment and blindness are the principle marker of awareness and health seeking behavior that need to be studied in community in specific population.

II. MATERIAL AND METHODS:

This was a community based cross sectional study conducted by the Department of Community Medicine, Pt. J.N.M. Medical College, Raipur amongst the residents of urban slum areas of Raipur city. Study duration was of 3 months from December 2019 to February 2020. Sample size was 250. Sample size estimation was done by using the formula, $n = z^2 \cdot pq / (d)^2$ (3). Study population was adult of above 35 years of age. Data collection was done by interview method by using semi- structured questionnaire. A pilot survey was conducted before starting final survey. Informed verbal consent was taken prior to interview with study participants. Multistage Random sampling was used. Raipur city is divided into 8 zones, from these zones 4 zones were randomly selected by lottery method. From this selected zones, 4 wards were randomly selected. For collection of data house to house survey was done. The collected data were compiled, cleaned and analysed in MS excel. Descriptive analysis for demographic characteristics were presented in the form of frequencies, proportions and means where appropriate.

III. RESULT

Table-1: Socio-demographic Profile of study participants (n=250)

Variable	Total (%)
Age (in years)	
35 - 44	28.4
45 - 54	28.0
55 – 64	24.8
65-74	14.8
>75	4.0
Gender	
Male	38.0
Female	62.0
Education	
Illiterate	38.0
Primary	21.6
Middle	21.6
High	14.8
Higher Secondary	11.2
Graduate	6.4
Occupation	
Employed	41.6
Unemployed	58.4
Marital status	
Married	84.0
Divorced	0.8
Widow	15.0
Socioeconomic-status	
Upper class	4.0
Upper Middle Class	11.2
Middle Class	16.0
Lower Middle Class	36.4
Lower Class	32.4

A total of 250 people participated in the study, with preponderance of female participants (62%). Majority of the study subjects were belonging to the age group of 35-44 years (28.4%), 38% were illiterate, 58.4% unemployed, (84%) having lower middle class socio-economic status as per Modified BG Prasad Scale. (Table 1).

Table -2: Awareness about Cataract among study participants

Questions	Total (%)
Heard of cataract (n=250)	197 (78.8)
Awareness of the symptoms of cataract (n=197)	164 (83.23)
Source (multiple answer)	
From relatives	154 (93.9)
Newspaper	3 (1.8)
Television	10 (6.00)
Social media	25(15.24)
Others	4 (2.44)
Awareness of common symptoms of cataract (multiple answer)	
White opacity in eyes	118 (59.89)
Diminution of vision	113 (57.36)
Others	1 (0.5)
Awareness about Risk factors of developing cataract (n=197)	
Ageing	51(25.89)
Trauma	3 (1.52)
Diabetes	2 (1.01)
Don't know	141(71.57)
Knowledge about treatment options of cataract (n=197)	151(76.65)
Knowledge that cataract can cause blindness (n=197)	158 (80.2)

Vision can be fully restored after surgery (n=197)	154 (78.17)
Surgery is done free of cost in Govt. and private hospitals (n=197)	136 (69.03)

Out of the total participants, 78.8% have heard of cataract, 83.23% were aware of the symptoms of cataract. The most common reported symptoms of cataract were white opacity (59.89%) followed by diminution of vision (57.36%). Majority (71.57%) of study participants were not knowing about the risk factors of cataract. The common reported risk factors were ageing (25.89%) followed by trauma (1.52%) and diabetes (1.01%). 76.65% of the study subjects were aware about the treatment options of cataract. Significant number of the participants (80.2%) knew that, if cataract is left untreated it can cause blindness. 78.17% and 69.03% study participants knew that vision can be fully restored after surgery and surgery is done free of cost in Govt. and private hospital respectively (Table 2).

Table - 3: Health seeking behaviour of participants regarding Cataract

Questions	Total (%)
Self or family member detected with cataract in last 2 years (n=197)	71(36.04)
What measures taken (n = 71)	
Nothing	7 (9.85)
Go to government hospital	29 (40.84)
Go to private hospital	36 (50.70)
Underwent surgery (n = 71)	63 (88.73)
Place of surgery (n=63)	
Go to government hospital	26 (41.26)
Go to private hospital	36 (57.14)
NGOs	1 (1.58)
Precautions taken post – operatively (n=63)	
Protection from bright light by wearing black spectacles	55 (88.89)
Avoid rubbing eye	38 (60.31)
Avoid watching television, mobile	23 (36.5)
Avoid lifting heavy weight	13 (20.6)
Avoid entry of water inside eye	13 (20.6)
Post – operative follow up (n=63)	55(87.3)

Health care seeking behaviour of cataract was found to be good among study participants. 36.04% study subjects with self or family member were detected with cataract in last 2 years. Out of them, 65 participants went to doctor (41.26% to government doctor and 50.70% to private doctor) and 9.85% did nothing about it. 88.73% undergone surgery, out of them 41.26% underwent operation in government hospital, 57.14% in private hospital and 1.58% in NGOs. Amongst the total operated patient, most of them seek post-operative precautions 2-3 times (protection from bright light by wearing black spectacles 88.89%, avoid rubbing eyes 60.31, avoid watching TV and mobile 36.5%, avoid lifting heavy weight for 1 month 20.6% and avoid entry of water inside eye 20.6% . Post-operative follow up was done by 87.3% (Table 3).

IV. DISCUSSION

Cataract is a major cause of preventable blindness. This study designed with aim to assess awareness about cataract and to know health seeking behaviour related to cataract, which is key intervention to prevent blindness. This study identified, out of the 250 participants, 197 (78.8%) had heard of cataract. This finding is similar to other studies, they found more than 85% of participants were aware of cataract (4)(5)(6)(7). This study identifies, majority of study participants got knowledge about cataract from relatives, this finding is similar to study done by Yezinsh Addis Alimaw et al. (4) and contrary to other studies (5)(6). Most common

reported symptoms were white opacity in eyes and diminution of vision, this finding is in line with study done in Saudi Arabia and North India (7)(8). Majority of the study participants (71.57 %) were unaware about risk factors of cataract development. This finding signifies there should be health education activity focussed on cataract needs to be strengthened. This finding is contrary to other studies (5)(9)(11). Health seeking behaviour related to cataract was found to be good among study participants. Majority went to health care professionals (government and private hospital), when self or any family member diagnosed with cataract, and 88% had surgery for cataract. Study participants were well aware about precautions taken post – operatively and post – op follow up after surgery.

V. CONCLUSION

The study findings suggest the majority of participants were aware of cataract, but there is low awareness about risk factors for development of cataract. Good health seeking practices observed for cataract in urban slum population. Gaps in awareness observed can be filled up by implementing proper eye health education programs. People need to be educated and encouraged to use eye health services. The referral system must be strengthened for quality eye health care delivery.

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