Accessibility to Health Care: A Survey-Based Study of the Barriers Facing Patients in Receiving Eye Health Care in Rural Ghana

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One ophthalmologist for every 500,000 people in Ghana

Translates to 45 eye doctors for a population of 26 million

Those who are blind in Africa have a four times higher mortality rate

Around 7.1 of the world's 38 million blind people live in sub-Saharan Africa (Lewallen et al., 2001)
80% of blindness is preventable

Cataracts are the most common cause of blindness in the developing world, followed by trachoma.

Preventative education can significantly reduce cases.

Often times, only a 20 minute surgical procedure can restore sight.
Cataract Surgical Rates African Region 2004

The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement.
Objective

• Determine barriers that individual patients face in receiving eye health care in rural communities outside Accra

• Why are patients in extreme poverty not able to access medical care?

• Major issues of concern:
  • Financial
  • Education related
  • Awareness
  • Location
  • Transportation
Methodology

- Survey-based approach to identify barriers (n = 140)

- 20 random patients (> age 20) interviewed during each Unite for Sight outreach effort

- Use of translator
Methodology

• Interview questions:
  o “Is this your first time getting your eyes checked?”
  o “What barriers or obstacles did you face in receiving eye health care?”
  o “What would you consider as the major obstacle you faced in receiving eye health care?”

Outreach effort in Kpone, Ghana
Strong correlation between the rurality of the village (distance from the capital) and the patient’s ability to receive care

Lack of finances and awareness presented to be the two most frequent obstacles encountered

In one hospital (Juaso Hospital - Asante Akim South District), 76% of patients from a random sample of 55 reported that it was their first time getting their eyes checked.
Results

• Adansi South District - Twapease Village (3-4 hours)
  ○ 71% of patients interviewed reported that it was their first time getting their eyes checked
  ○ Major reasons presented: financial, distance, were not educated about eye health

• Adansi South District - New Edubiase (capital)
  ○ 35% of patients interviewed reported that it was their first time getting their eyes checked
  ○ Major reasons presented: heard about Unite for Sight; awareness
Statistics from Juaso Hospital (close to Kumasi):

- Total number of patients screened: 665
- Number of patients referred for surgery: 62
  - Cataract: 44
  - Pterygia: 15
  - Other: 3
- Number of reading glasses dispensed: 145
Data Analysis

- Correlation between distance of village from capital and number of patients that have received eye health care

- Transportation/financial issues become a major concern in rural areas

- Another cause for concern: education

- Awareness more of an issue closer to capital/urban center
Implications

- Highlights the fact that great barriers still do exist, but can be easily eliminated by creating better awareness and more sustainable community health programs.

- Patients are on the verge of blindness.

- Better eye health care can improve economic productivity.
Significance

- Global need for effective and sustainable health programs
- Education a key in preventing disease
- Partners: establish long term partnerships with local sister organizations
- Utilize a large volunteer core to bring about changes
Global Initiative

- VISION 2020 – The elimination of preventable blindness
- "Right to Sight"
- Partnership between WHO and IAPB

Frick et al., 2003 VISION 2020, WHO

**Graph:**
- Y-axis: Billions of US$ (year 2000)
- X-axis: Years (2000 to 2020)
- Two lines: Without successful VISION 2020 programme implementation and With successful VISION 2020 programme implementation.

Frick et al., 2003 VISION 2020, WHO
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Thank you!

Questions/Comments