ORIGINAL RESEARCH PAPER
Volume - 10 | Issue - 09 | September - 2021 | PRINT ISSN No. 2277 - 8179 | DOI : 10.36106/ijsr
INTERNATIONAL JOURNAL OF SCIENTIFIC RESEARCH

ASSESSMENT OF THE WORKING OF NGOs UNDER NPCBVI IN THE STATE OF HIMACHAL PRADESH

Community Medicine

Dr. Anjali Chauhan State Programme officer, National Health Mission, Shimla, H.P.

Dr. Asmita Singh Bachelor of Dental Surgeon, Masters of Public Health.

Dr. Nidhi Chauhan* Program Officer, National Health Mission, Shimla, H.P. *Corresponding Author

Dr. Manisha Bhatia Senior Programme Manager, MAMTA Health Institute of Mother and Child.

Dr. Gaurav Sethi State team Lead, MAMTA Health Institute of other and Child.

ABSTRACT

Introduction: To combat the challenges of National Program for Control of Blindness, the role of NGOs has been emphasised in the twelfth five year plan, to deliver eye care services in the country. They play an imperative role in organising camps and conducting cataract surgeries.
Material & methods: A cross sectional survey was carried out among the NGOs and eye surgeons working under NPCB, using a self-administered questionnaire in the four districts of the state of Himachal Pradesh.
Results: In four districts of HP, some organisations were working regularly under NPCB and some occasionally. Maximum surgeries were performed in district Kangra (10,000/year). Moreover, most of the camps i.e 13/year were organised by NGOs in district Kangra.
Conclusion: To implement the outreach services, community based screenings and to escalate the cataract surgeries to treat the avoidable blindness, the count of NGOs and organisations under NPCB program need to be up surged

KEYWORDS

NPCB, NGOs, cataract, camps

INTRODUCTION

National Programme for Control of Blindness was launched in the year 1976 as a 100% centrally sponsored Programme[1] with the aim to decrease the prevalence rate of blindness up to 0.3% from 1.4% by the year 2020[2]. It has been extended in more than 640 districts, and is proved to be an outstanding Public Private Partnership model. It is being implemented by the District Health societies working in every district of the country and is monitored by the State Health Societies[3]. According to 2010 World Health Organisation, globally 285 million people are visually impaired, out of which 39 million are completely blind and 246 million suffers with low vision. The highest prevalence of the disease is more in Africa, then in Asia and Latin America[4]. There are various causes of blindness in India such as cataract, glaucoma, refractive errors, corneal blindness, capsular opacification, surgical complications and others. Cataract being the most prevalent cause of blindness accounting 62% of the total prevalence of blindness[5]. According to the WHO/NPCB survey there are around 12 million blind people and the main cause of this impairment is cataract. The incidence rate of cataract blindness per year is 3.8 million. This condition just not leads to morbidity but also cause social burden and loss to the economy. And to reduce this disease burden around 5-6 million cataract surgeries have to be performed per year. Under the program various initiatives are taken such as providing financial support, creating awareness regarding the cataract blindness programme in the underserved areas, giving more importance to the modern techniques for cataract surgery, increasing human resources, collaborating non-governmental organization and the public sectors to reach out to the tribal and rural areas, and to arrange cataract blindness campaigns in state and national levels so as to increases the demands for cataract services[6].

In India around 6 million cataract surgeries are carried out in a year with the cataract surgery rate of 4800 surgeries per 10 lakh population. In our country NGOs plays an important role in providing eye care services.[3]

AIM

- To evaluate the working and involvement of the NGOs under the program.

MATERIALS & METHODS

STUDY DESIGN: Survey based cross-sectional study.
STUDY POPULATION: The study included the eye surgeons, NGO programme managers and District Programme officers of Kangra, Una, Kullu and Mandi district, working under National Programme for Control of Blindness, in Himachal Pradesh.

INCLUSION CRITERIA: It included eye surgeons, NGO project managers and District Programme officers working under the NPCB program.

EXCLUSION CRITERIA: NGOs and eye care units that were not registered under the NPCB program.

STUDY PROCEDURE: A self-administered questionnaire with open ended questions was used to conduct face to face interviews of the eye surgeons and the NGOs project managers in the four districts of Himachal Pradesh.

DATA ANALYSIS: The data was collected, cleaned and entered into Microsoft Excel spread sheet and transferred to Epi info version 7.2.1.0 software. The categorical variables were expressed in terms of frequencies and proportions.

RESULTS

The data collected has been divided into two parts: one for the organizations working regularly, second for the ones working occasionally.

FOR ORGAINZATIONS WORKING REGULARLY: It was found that the four organizations were working on the regular basis under the NPCB programme in four districts.

It is evident form the graph (figure 1) that the larger man power appointed is with Palampur (Kangra) Rotary eye foundation, Maranda. Whereas Swami Pindi Dass Charitable Eye hospital and Research Centre in Una district has only one eye surgeon who perform the surgeries.

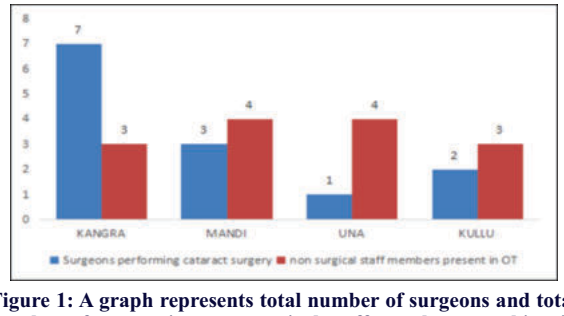

Figure 1: A graph represents total number of surgeons and total number of supporting non-surgical staff members, working in organizations under NPCB program.

It was found that, the most of the cataract operations were performed in Kangra district annually, followed by Mandi and Kullu with 1800 and 940 cataract surgeries in a year (figure 2).

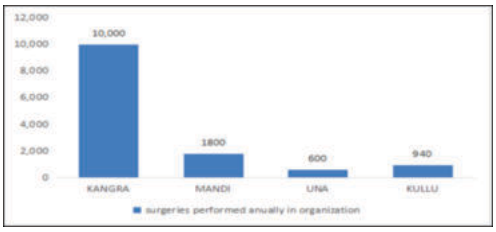

Figure 2: Surgeries performed in four districts annually

The average cost of the cataract surgeries in all the organizations of 4 districts was between Rs.5000 to Rs.7000, while in district Una free ashram seva was also provided occasionally.

The district Kangra was found to lead in performing the larger number of cataract surgeries as compared to other three districts. It was also found during the survey that out of all the surgeries performed, maximum surgeries (18989) were performed in government hospitals and 6626 patients were operated in private hospital in Kangra district, followed by Una with 2279 in govt. hospitals and 2089 in private hospitals. Whereas in Kullu and Mandi, more number of cases were operated under the private hospitals as compared to the government hospitals (figure 3).

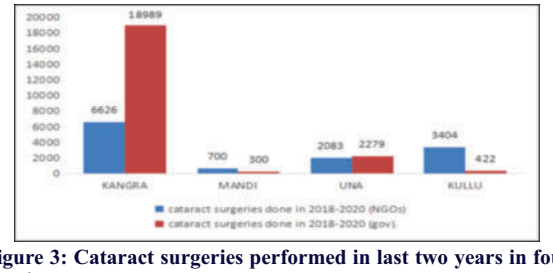

Figure 3: Cataract surgeries performed in last two years in four districts

FOR ORGANIZATON WORKING OCCASIONALLY:

In the camps and outreach services organized by various NGOs under NPCB program, the patients were screened and further referred to the eye hospitals for the cataract surgeries (figure 4). These camps are self-funded and the organizers advertise about the camps through newspapers, pamphlets, voice announcements etc.

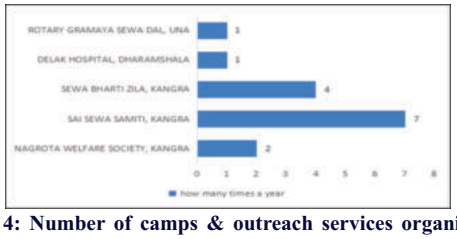

Figure 4: Number of camps & outreach services organized by NGOs (under NPCB program) in a year

The maximum numbers of camps in 2019 were organized by the Sai Sewa Samiti, Kangra (figure 5), and they further refer around 250 patients to Rotary eye hospital, Maranda. On comparing the total number of working Operation theatres with the total number of cataract eye surgeons in all the four districts it was evident that Kangra had more number of both, the working OTs and eye surgeons with ratio 9:8 than other districts (Mandi with 7:8, followed by Una with 4:5, and Kullu with 3:5).

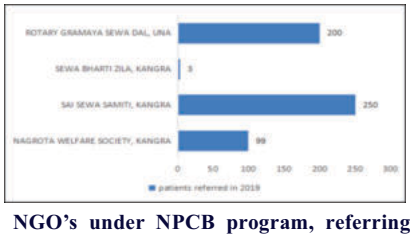

Figure 5: NGO's under NPCB program, referring cataract patients for surgery

DISCUSSION

National Programme for Control of Blindness(NPCB) has been the most successful programmes. The comprehensive eye care to the underserved population, development of sustainable infrastructure and strengthening of human resources while keeping abreast with latest technological advancements, still remain a major stumbling block for the program. NGOs play a crucial role in delivering the eye care services in the country and various financial schemes are available through public private partnership mode. Provision of Grant-in-Aid (GIA) for cataract surgery at the rate of Rs 1000/-per cataract surgery has been made.[3]

In our survey, it was found that substantial amount of surgeries were performed by various NGOs working under NPCB program, thereby assisting to reduce the preventable cause of blindness in our country. The camps being organised by NGO's aid in early detection of cataract in hilly terrains, so that further timely surgical interventions can be performed. Besides, the nominal charges for cataract surgeries have paved a way for many individuals to improve their vision. It is further evident form the survey that there is dearth of manpower observed in four districts and it need to be ameliorated for effective service delivery. An overview by Vemparala R et al[3] also reported the same.

CONCLUSION

National Programme for Control of Blindness developed with the aim of reducing the prevalence rate of blindness up to 0.3% from 1.4% and is one of the most successful programs. But there are few challenges that are holding the services back such as the less number of human resources, cost of the cataract surgeries and the less organizations working regularly under the program. Looking upon some of these issues mentioned above can improve the service coverage and also by increasing the number of organizations which can work on regular basis to implement the outreach services and community based screenings can increase the surgical outputs and can treat the avoidable blindness.

REFERENCES

1. Park K. Park's Textbook of Preventive and Social medicine. 20th ed. Jabalpur: Banarsidas Bhanot Publishers; 2009.. Health programme in India; p. 375
2. National Programme for Control of Blindness & Visual Impairment (NPCBVI) Directorate General of Health Services Ministry of Health & Family Welfare, Government of India
3. Available from https://npcbvi.gov.in/Home; last accessed on 14th august 2021.
4. Vemparala R, Gupta P. National Programme for Control of Blindness (NPCB) in the 12th Five Year plan: An Overview. Delhi Journal of Ophthalmology. DJO 2017:27:290-292
5. WHO releases new global estimates on visual impairment; Control and prevention of blindness and deafness: available from mro.who.int/control-and-preventions-of-blindness-and-deafness/announcements/global-estimates-on-visual-impairment.html: last accessed on 13th August 2021.
6. National Programme for Control of Blindness & Visual Impairment, directorate general of health services, Ministry of Health & Family Welfare Government of India; available from https://dghs.gov.in/content/1354_3_National Programme for Control of Blindness Visual.aspx; last accessed on 14th August 2021.
7. Vajpayee RB, Joshi S, Saxena R, Gupta SK. Epidemiology of cataract in India: combating plans and strategies. Ophthalmic Res. 1999;31(2):86-92. doi: 10.1159/ 0000 55518. PMID: 9933769.