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Bangladesh: Sight is the greatest gift

Free eye surgery is changing the fate and attitudes of the people living on the precarious sandbars of Bangladesh



People from the chars wait to receive post-operative counselling at the Deep Eye Care Foundation hospital in Rangpur. Photograph: Abir Abdullah/EPA

When the floods come, the blind people die," says Abdul Aziz, sheltering from the driving rain beneath a crowded market stall. "How can they escape? Everyone must save his own life first."

Wooden boats offer the only rescue from this lush river island when the waves rise too high. Beyond the market, the world is flat: silted banks barely skim above the surface of the water; sodden paddy fields grow so close to the tide it is unclear where the land ends and the river begins.

Every year, these fertile sandbars, known as chars, emerge and retreat from the Jamuna River as it redraws its course from the Himalayas to the Bay of Bengal. It is not choice or tradition that drives Aziz to make these evanescent islands his home, but extreme poverty and a burgeoning population competing for land.

Six to 7 million people live on chars in Bangladesh without government services: no police, no healthcare, no electricity. Eye care is an unaffordable extravagance for families facing "monga", the annual three-month famine between harvests. Among people who can rarely scrape together the 10 taka (less than 1p) boat fare to the mainland, blindness is accepted as fate or the will of God.

Poor vision steals lives during floods, but it also breaks down every aspect of char society. When Mrs Kodbanu lost her sight to cataracts, her adult sons cursed her. "They told me: 'If you cannot cook for us, what use are you?'" she says. "I used to cry, because I had no money for treatment."

Meanwhile, neighbour Abdul Jalil had to trust other people to manage the accounts of his small grocery business. "I couldn't tell if they were cheating me," he says.

Mokbul Hussain, one of the village elders, lost his social standing when his eyesight failed. "I stayed indoors," he says. "I could not attend weddings or funerals, or give judgments when people came to me with conflicts."

Yet blindness could be prevented in 75% to 80% of cases. Cataract surgery, for example, is a cost-effective way to improve family welfare – returning parents to work and children to school. A study in Bangladesh published in the British Medical Journal found that, a year after their operation, cataract patients significantly increased their household wealth compared with their blind peers.

"The research suggests that per capita income increased by 50% after surgery as those involved became more productive," says Julian Metcalfe, director of advocacy at the International Agency for the Prevention of Blindness.

But, prohibitive costs, scarcity of services and the remote location of the chars prevent inhabitants from reaping these benefits. In addition, people have fears surrounding surgery, such as the idea that God will not accept your spirit if you go to the grave with an implanted lens.

However, the Deep Eye Care Foundation, supported by Orbis, is finding ways to overcome these obstacles, one by one. Their aim is to offer that great gift, restored sight, to people who could not possibly afford to pay for it.

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"All types of patient should come here, rich and poor, and they should all have a quality service," says Dr Khairul, the ophthalmologist who pioneered the eye hospital in Rangpur. His team offers the latest surgery techniques to private patients to subsidise a free service for people from the chars.

For cataract patient Ruhul Amin, the free operation was a lifeline. He says: "If I had to pay, it would be impossible for me to have surgery and I would remain blind."

Amin heard about the Deep Eye Care Foundation at an outreach camp on his island. As people gather in the market, cataract patients are identified and offered free transport to and from the hospital. Female patients, who would never normally travel unaccompanied, may bring a chaperone free of charge.

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Counsellors such as Afroza Parvin help the patients to feel at ease during their first hospital encounter. "If the patient is afraid of surgery, we help them to relax. We tell them they have nothing to fear," she says. Patients are away from home for two days, guided into the hospital blind, and walk out unaided, able to see.

But, considering their homes may be swept away at any moment, is eye care really a development priority for the people of the chars?

"Char people rank income generation first, then education, then water and sanitation. Health is last," says Dr Shehlina Ahmed, health and population adviser for the UK's Department for International Development in Bangladesh. "We need to raise awareness to show the impact of improved health on other aspects of life."

The DfID Chars Livelihoods Programme raises households on plinths above the normal flood level, provides clean water supplies during flooding and offers microfinance loans.

"With planning, the programme has the potential to include eye care," says Dr Ahmed.

This integration of services is essential to meet Bangladesh's commitment to the Vision 2020 target launched by the World Health Organisation – eliminating avoidable blindness by 2020.

"We will use community clinics, one for every 6,000 people, to implement Vision 2020," says Dr Deen Mohammad Noorul Huq, line director of the National Eye Care Plan for the Ministry of Health in Bangladesh. "These clinics will provide primary healthcare, such as iron tablets for pregnant women and saline for diarrhoea. At the same time, they can promote eye care messages, such as: 'Bring blind people to the doctor'."

Dr Khairul welcomes the plan, but adds the caveat, "if it works". So far, only 8,000 clinics are functioning for a population of 160 million and few reach the chars. "The government should recognise the chars are here – and take specialist steps to visit frequently," he says.

Meanwhile, Saiful Islam, community leader of Char Nauhali in Rangpur district, is under no illusion: among his people's myriad needs, sight is imperative when the ground beneath their feet cannot be taken for granted. "Our lives are always at risk," he says. "So the eye is the most important organ of the body. A man without sight is like a dead man."

Catherine Prescott's assignment in Bangladesh was hosted by Orbis

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