Guidelines for Development of Messages for Prevention of Blindness

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Introduction

“One of the basic human rights is the right to see. We have to ensure that no citizen goes blind needlessly, or being blind, does not remain so, if, by reasonable deployment of skill and resources, his sight can be prevented from deterioration, or if already lost, can be restored.” —

“Ophthalmology is our profession, prevention of blindness is our business” – Pararajasegaram.

As the 20th Century comes to a close, every five seconds one person goes blind, and a child goes blind every minute. Seven million people go blind each year. If national and international efforts to avert blindness are not intensified, the number of people with severe visual disability will double by the year 2020. There are currently 45 million blind people in the world, and 135 million visually impaired people. Of these, the largest numbers are in India, which has a blind population of 14.7 million. Nine of the ten who are blind live in developing countries. 70% of the world’s blindness is due to cataracts. All of these are preventable if treated in time. Fully 80% of the world’s blindness is avoidable, and therefore needless. Blindness reduces an individual’s quality of life and has enormous implications for the world as a whole.

The National Program for the Control of Blindness was launched in 1976. The major obstacles in efforts to reduce the burden of blindness are the lack of adequate health care infrastructure, appropriate human resources, adequate funds, and insufficient awareness.

Awareness creation and service provision can help overcome these obstacles. This is only possible with the aid of a successful awareness creation program, which requires the effective communication messages on eye care programs. The message consists of what is actually communicated including the actual appeals, words, pictures and sounds that we use to get the ideas across.

A message will may be effective, if the advice presented is simple, clear, relevant appropriate, acceptable and put across in an understandable way.

Characteristics of a Successful Message

Health education plays an important role in creating awareness about eye health problems and also about the availability of service. For effective health education, health messages are extremely important. Key Message should have the following characteristics:

- Simple
- Clear
- Need-Based and Relevant
- Objective and Unbiased
- Provide Options
- Consistent
- Accurate
- Positive
- Linked to Service Delivery and
- Lead to Action

General Approach for development of health education messages:

Health Education messages are developed based on KAP study findings in the Community. Messages will need to be tailored for cultural acceptability, literacy levels, available infrastructure, and for their specific target audience. Messages will be delivered by a variety of channels and packaged in many different forms. Keeping this in mind, the following specific guidelines may be followed when developing a message.

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Messages should be Need-Based and Relevant

Messages should be tailored to the needs in the community, revealed by a KAP or other appropriate study. For example, if it were found that the primary cause of diabetic retinopathy is unknown in the community, an appropriate message would be

1. Diabetic retinopathy is often symptomless until deterioration of vision occurs.
2. All diabetes should have periodic eye examination by an eye doctor.
3. Early detection and laser treatment significantly reduces risk of vision.
4. Duration of diabetes is more important than control of blood sugar.
5. Diabetes affects heart, eye, kidney, brain and limbs.
6. Laser treatment for diabetic retinopathy is preventative, not restorative. Have your eyes examined regularly.

Messages should be Consistent and Accurate

To effectively prevent blindness, all sectors of society need to get involved. This includes Ministries of Health, Education, social welfare, NGOs, and the Private Sector. To be effective, all of these players should agree on the same basic message, which is consistent and accurate.

Example: 1) 80% of the world’s blindness is preventable. 2) Cataracts are preventable. 3) Girls need cataract surgery just as much as boys. 4) After childhood surgery, it is essential to have follow-ups for many years.

Messages should be Positive

The aim of blindness prevention communications is to help people to live with the fact that blindness exists here in India, and to understand that they have the power to protect themselves. Positive messages are more effective at achieving this goal than the fear messages. Fear messages do not work in the long run. Although they may provide short-term improvement, satisfactory behavior change rarely results. Causing fear may cause people to deny that they are at risk, rationalize by pointing to others who have practiced similar health threatening behaviors and survived, or to adopt a fatalistic attitude, sometimes avoiding seeking medical care altogether.

Example: 1) Cataract operations are safe and highly effective! 2) Glaucoma can be cured! Appropriate treatment can reduce the risk. 3) Thanks for not smoking!

Messages should be Objective

Moral messages that condemn a particular behavior will only succeed in turning away the people you are trying to reach by causing a defensive mental reaction. Messages such as “Smoking and alcohol are bad for your health” are not objective, as they condemn these behaviors without justification. Messages should provide unbiased information and allow readers to form their own opinions.

Example: Smoking and alcohol consumption increase the chance of developing diabetic retinopathy. Follow-up after surgery is essential to get the best outcome.

Messages Should Provide Options

When dealing with difficult to change behavior patterns it is helpful, and more effective, to provide the individual with options for action. When eye-care services are being provided, messages about these services should contain information on all available surgeries and procedures.

Example: The Aravind Eye Hospital has facilities for both IOL and PHACO operations to cure Cataract.

Messages should be Linked to Service Delivery

If you are creating awareness about eye health care services, centres must be available to provide treatment for various eye diseases and information on how to prevent them. Messages about these services should contain information not only about the appropriate treatment for a disease, but also the availability of that treatment.

Example: Laser treatment for diabetic retinopathy is available in the Aravind Eye Care System and Government hospital also.

Messages should Lead to Action

Messages should educate people about what blindness
control is, and what actions can be avoided or undertaken to prevent blindness. Messages should lead the individual to some form of action.

Example: 1) Timely treatment prevents blindness. 2) Glaucoma can usually be prevented with eye drops and medication. 3) Rubella vaccinations can prevent rubella cataract, a leading cause of childhood blindness. 4) Keeping children’s faces clean will help reduce eye diseases. [Trachoma]

Conclusion

The success of the Vision 2020 Project depends in large part on its ability to create awareness of the various eye-diseases that it aims to treat. The awareness creation, in turn, depends on the content and format of the messages that will be spread in the population. Through the following of the above-detailed guidelines, successful Key Messages can be written, thereby increasing the likelihood of a successful implementation of the prevention of blindness programme.

References