

## Gender and Blindness in Developing Countries

A study of 20 years worth of population based surveys, lead by the co-Directors of the KCCO, alerted the prevention of blindness community for the first time in 2001 to the fact that women bear about two-thirds of the burden of world blindness. Since then, KCCO has taken a special interest in this problem.

The main reason for the inequity in the developing countries is primarily due to the fact that women do not receive cataract surgery at the same rate as men. While many hospitals show that equal numbers of men and women receive cataract surgery, the fact is that cataract occurs slightly more often in women. The *cataract surgical rate* (percentage of all cataract blind who receive surgery) is significantly lower in women than men in developing countries where it has been measured. For example, in Malawi 28 % of women blind (<6/60) from cataract had surgery compared to 44% for men. Similarly, in Tibet, while 60% of men with blinding cataract had surgery, only 35% of women with blinding cataract had surgery. A review of cataract surveys worldwide showed that cataract blindness could be reduced 12% if there was gender equity in utilization of services.

*What barriers prevent women from receive cataract surgery at the same rate as men?*

Difficulties in accessing services exist for both men and women in all poor countries, but some affect women more compared to men. Consider these:

- Women often have less access to financial resources to pay for surgery
- Women, especially older women, often have fewer options for travel to the hospital
- Female literacy is often lower in poor countries and women have less information about services

*What can we do about the gender inequity?*

Educating communities and prevention of blindness organizations about the gender inequity and promoting cataract surgery for women is one important step. The Direct Referral Site Program and others like it, which provide transport and help for patients to get from the community to the hospital, are especially welcome by women. While we still have not achieved gender equity in Kilimanjaro region, the number of women receiving cataract surgery has increased significantly. KCCO is involved in research into other practical methods to close the gender gap.