

A SOCIO-MORBID STUDY OF BLIND SCHOOL CHILDREN*

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Blindness is a major public health problem in India (Joint Committee 1944). One-third of all blindness occurs within 21 years of age, mostly within the first five years of life (World Health Organisation 1962). Forty per cent of India's population consists of children, and blindness is an important problem of child health in India. Adequate attention should be given to its social, economic, rehabilitative and preventive aspects to help such visually handicapped children who, in the formative years of their life, can be taught and trained to become economically useful and self-supporting citizens.

In this respect, blind schools play an important role by providing a basic education through the Braille system and also by training the handicapped in various arts and crafts for rehabilitation. However, in places where such schools are present, not much interest has been shown by the medical profession to study the medico-social problems. Blindness in children is a problem in which several disciplines should be interested e.g. pediatrics, public health and ophthalmology. Although correct epidemiologic data on the prevalence of blindness in the popu-

lation are not available on a wide scale at present, partly because it is difficult to collect them due to various reasons, it is felt that analysis of institutional data may help to show the socio-medical pattern of blindness.

Material and Methods

Data was obtained from the records of the Government Blind School, Lucknow. This school, established in April 1957 by the Government of Uttar Pradesh in the Second Five Year Plan, imparts teaching from the first to the seventh class, through the medium of Hindi. Both boys and girls are admitted. Residential facilities in the attached hostel are available for students from outside Lucknow, and vocational training is provided for music, cane work and weaving. Observations are based on the information given in the student's admission form. Information on 180 students is analysed.

Results

The average age at admission to the school was 11.6 years. 92.8 per cent were boys. The sex ratio in the U.P. census of 1961 was 909 females per 1,000 males.

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98.3 per cent of the students were Hindus and only 1.7 per cent were Muslims. There was no Sikh or Christian student. The corresponding figures for religion in the census of 1961 are 84.7, 14.6, 0.1, 0.4 and 0.2 (others).

The students were mainly from the districts of Lucknow (37.4 per cent), Kanpur (7.2 per cent) and Varanasi (5.6 per cent). A few students had also come from outside of U.P. A larger percentage of students (50.6 per cent) was from urban areas, while according to census figures, the urban population is only 12.9 per cent in U.P.

The average age at the time of loss of vision was 2.7 years. 40 per cent lost the eyesight between 1 and 3 years of age, and as many as 73.4 per cent were blind before they were three years old. 18.3 per cent lost it between 3-6 years, 5.5 per cent between 6-8 years, 1.1 per cent between 8-10 years and 1.7 beyond 10 years. This clearly shows that occurrence of blindness is common in early childhood and measures directed at preservation of the eyesight and prevention of blindness should pay special attention to the pre-school age group.

A large percentage of students (37.2 per cent) had lost their sight due to smallpox, while 21.7 per cent were blind since birth. Malnutrition accounted for 1.1 per cent cases. In the rest, acquired infections like mucopurulent ophthalmia and trachoma were blamed. It is quite evident that most of the blindness encountered in this group of 180 students was of a preventable nature.

Discussion

Blindness is an important socio-medical problem and although data is scanty, the available information shows that in the population at large, it is common in both sexes and in all religious groups. However, in this study of 180 students there were only 13 girls. This probably implies that blind girls are receiving much less attention than boys, so far as their education is concerned, for which many social and cultural factors may be responsible. Similarly, Muslim students were few, being even less than the proportionate distribution in the general population.

The school had received children mainly from the Lucknow district (37.4 per cent) and to a lesser extent from other U.P. districts. Some had come from the states of Bihar and Madhya Pradesh. Rural and urban distribution was nearly 50 per cent each although the rural population comprises 87.1 per cent of the total population. The average age at onset of blindness was 2.7 years, and therefore it is important to pay attention towards eye health and hygiene in the early years of life especially in the preschool age group.

The causes of blindness could not be studied in detail due to lack of recorded information. It was found that smallpox and nutritional deficiency together were responsible for 38.3 per cent of the total blindness in 180 students. Both of these as well as others, like conjunctivitis, are preventable.

It is admitted that the information collected is of a very limited nature but it does throw some light on the pattern as seen in a blind school.

There is evidently need for more extensive studies of this type as well as of epidemiologic and field studies to determine the prevalence and magnitude of blindness in the general child population in order to get an idea of educational facilities to be provided for such handicapped children. Moreover, diagnosis of the cause of blindness can only be correctly ascertained in a prospective study.

Summary

Recorded data on 180 students in a blind school is analysed with regard to age, sex, residence, age of onset and cause. A plea is made for a pros-

pective study to provide more extensive and reliable information.

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