

"We have to do more to raise awareness": BRAC community health workers on marketing eye care services and increasing uptake of reading glasses

Ambika Samarthya-Howard

May 15, 2024

Translator: Tell me your names, the name of your village, and how many years you have been working here.

CHW 1: My name is [unintelligible]. I have been working for BRAC for 10 years now. My village name is [unintelligible].

CHW 2: My name is [unintelligible]. My village name is [unintelligible]. I have been working here for 12 years.

CHW 3: My name is [unintelligible]. I have been working at Brac for about 13 to 14 years now.

Ambika Samarthya-Howard: How long have they been working with reading glasses, and how long have they been doing all the health work?

CHW 1: I have been working with eyeglasses for around eight years.

CHW 2: Same here.

CHW 3: I've been doing it for around eight years too.

Ambika Samarthya-Howard: What was your first reaction to distributing eyeglasses? Did it make sense, was it hard, was it an extra burden?

CHW 1: No, it wasn't a burden for me.

CHW 2: We like working with glasses. It is an extra help for the people who cannot thread a needle and things like that. It wasn't a burden for me.

Ambika Samarthya-Howard: How long did it take to feel comfortable doing the screening?



CHW 3: So at first we had a meeting, at the meeting they gave us training on how to do the exams, how to sell the glasses, things like that.

Translator: How long did it take you to get comfortable?

CHW 3: We have been doing it for a long time. It took maybe 6 months to get comfortable.

CHW 2: As soon as I finished training, I felt comfortable.

Ambika Samarthya-Howard: What was the community's reaction? Did a lot of people need glasses? Did people feel this service was needed?

CHW 3: Those who need it, come.



CHW 1: We ask first if they have any issues with their vision. Some people say they see things blurry, some say they have irritation causing watery eyes, some say they have issues seeing far, some say they have issues seeing up close. We tell them that people come for eye exams and we set up a camp. When we set up camps, we go house to house to inform people and we use megaphones to let people know in the area. Those who have problems, come to see us. After they come we give them exams, and those who are farsighted, we give them those glasses. Those who are farsighted, same thing. Those who have bigger problems that won't be fixed by glasses, we provide referrals.

Translator: Do people come by themselves? Without being told?

CHW 3: Yes, some people come even when we don't have camps. People talk amongst themselves and they come for help. When people need help beyond glasses, like operations for cataracts, we refer them out.

Ambika Samarthya-Howard: How often do they sell reading glasses, and how much do they sell them for?



CHW 2: We offer them everyday, some months [I sell] five, other months ten.

CHW 3: Those who really need it urgently, we sell maybe one or two some months, other months we sell more.

Translator: Do you sell them every day? Or how often do you sell them?

CHW 1: We don't sell glasses everyday. We don't have patients needing them everyday. Maybe every five days or a week and a half. [Something] like that.

Ambika Samarthya-Howard: Do they mostly sell door-to-door?

Translator: So you go door-to-door. Do you do the exams at the house, or do you bring them to the camp?



CHW 2: We do the exams at camp. When we go door-to-door, if someone wants to come with me, I bring them to the BRAC office. If they are willing to wait for the camp, I tell them to come to the camp. We give them exams, if they need more medical care, we tell them when the camp will be set up, we give them a date and paperwork and they come to get an exam that day. We also tell them to bring anyone in their household who needs help. We use the megaphone at the mosque to inform people of the date and location of the camp so they can come.

Ambika Samarthya-Howard: But do they go door to door to sell glasses?

CHW 3: Yes, we go to sell medicine, but we bring glasses with us.



CHW 1: We go to do check ups, and we bring eye charts and give them exams. If someone needs glasses we let them know they can come and get glasses at the BRAC office.

Ambika Samarthya-Howard: How much do they sell them for?



CHW 1: 150 taka.

Ambika Samarthya-Howard: People who buy, what is the main reason they buy? How would you describe them?

CHW 2: Usually they are housewives. They have issues with threading needles, reading the Quran, they have issues with cleaning rice and getting rid of dirt.

Ambika Samarthya-Howard: People who get screening but don't buy glasses, why not?

CHW 1: There is not much interest. A lot of people who come from villages are uninterested or don't see the use.



CHW 2: Sometimes people say they have issues with money. They say they will come back later. Some people just don't want it and don't give a reason.

CHW 1: Some people feel like they might be embarrassed, or discriminated against. People from villages are afraid that people will gossip around their glasses. Some people from the villages also don't trust the eye exams. Most people have issues without not having enough money.

Ambika Samarthya-Howard: You also sell medicine and convince people to buy them. How do they do that? Can they talk about a time they convinced someone to buy glasses?

Translator: A lot of people don't want to buy medicine either. How do you convince them to buy the medicine?

CHW 1: We give medicine for around ten illnesses [listed ten illnesses].

CHW 2: I tell them that they should buy medicine from me, trust me, and come back in a few days if it doesn't work.

Translator: Do you ever do the same thing with glasses?



CHW 1: We tell them that they should try it, and then they can see if they will work.

Translator: Which is easier to sell, medicine or glasses?

CHW 2: It is easier to sell the glasses, I feel like almost everyone has issues with their vision.

Translator: Can you tell me about a time when people didn't want glasses, but you were able to convince them?



CHW 1: I don't remember his name—I told him everything about glasses. He tried wearing the glasses, and he said he liked them. He was resistant to even trying it, but once he tried it he

realized it was good. If he goes home and tells people about his experience, then maybe five more people will come and buy glasses.

Ambika Samarthya-Howard: Have you been screened?

CHW 1: Yes, I have been screened but don't need them.

CHW 3: Yes, sometimes I wear glasses when I have problems with reading. I wore them when I read the Quran for Ramadan.

Translator: Do you wear glasses when walking on the street?

CHW 3: Yes, sometimes I wear them.

Translator: Are you ever embarrassed wearing glasses?

CHW 3: No, not really. I don't care what other people say.

Ambika Samarthya-Howard: It's very laborious to go door-to-door to sell glasses. What is their advice for people trying to sell glasses as their profession?



CHW 3: I would tell them to go door-to-door. Because, when you go to a house there might be a lot of people who need glasses in one place.

Ambika Samarthya-Howard: How can we get to selling ten glasses a day?



CHW 3: You'll have to set up a camp. You'll have to advertise to people in the area. I let people know by word of mouth and via megaphone. We have to do more to raise awareness and increase interest in the people.

Translator: Right now, you sell around five a month. If I want to sell more, 20-25 a month, how would someone do that?



CHW 2: I will need more to increase capacity. More people to help me. I will have to convince people calmly. If someone wears glasses and likes it, it will increase interest. Then by word of mouth when they are hanging out with their friends, they will share their experiences and increase interest.



CHW 1: We need more training. We also need to decrease the price of the glasses a little bit. That way, we would be able to sell more glasses.

Ambika Samarthya-Howard: What if they got money for selling the glasses?

CHW 1: We get 25 taka for each sale of 120 taka.

Ambika Samarthya-Howard: Do the incentives help?



CHW 2: If they increased it a little it would be great. It takes a lot of time to convince one person to get glasses. If we got a bit more, it would be better.



CHW 3: Sometimes when I go door-to-door, I end up spending a lot of time there. People will bring others in the house, people will bring neighbors, and I have to talk to all of them, but a lot of times no one ends up buying glasses.

CHW 1: If I don't go to a house for a while, people get upset and ask why I don't come more often.

Translator: Is this price working for people?



CHW 3: A lot of people get annoyed with the price. Others are totally fine with the price and do not have any issues.

Translator: People who get annoyed, is it because they are cheap? Or they actually do not have the money?


CHW 3: No, they are not cheap, they actually do not have the money.

Ambika Samarthya-Howard: When they are treating someone, for maternal health, or malaria, how important is eyecare?

CHW 3: People talk about needing medicine, they are happy that they can come and get medicine easily during different times of the day.

CHW 1: Because we are one of the only people offering eyecare, people find it important.

Ambika Samarthya-Howard: How do you get people to care about this issue? To raise awareness?

 **CHW 2:** I chat with people. I tell them that without glasses, you won't be able to see. As more time passes, it will get worse and you won't be able to see.

CHW 3: If we tell people a few times, they slowly become convinced. We tell people that if they are having issues with eye irritation and watery eyes, glasses might help.

CHW 1: We also tell them that if they are unable to see well, it will impact their income. You will not be able to make as much money if your vision is bad, and over time it will get worse.

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Screening

Ambika Samarthya-Howard (she/her) is Solutions Journalism Network's Chief Innovation Officer. She strategizes on communications, metrics, impact, product and technology, leveraging platforms for the network and creating cool content. She also leads the Solutions Insights Lab, an initiative of SJN that uses targeted research and analysis to identify and interrogate what's working and what's not in a particular sector or field. She has an MFA from Columbia's film program and has been creating, teaching and writing at the intersection of storytelling and social good for two decades. She has produced content for Current TV, UNICEF, Havas, United Nations Population Fund (UNFPA) and Prism.

** This interview has been edited and condensed.*