

International Conference and Expo on

Optometry and Vision Science

October 20-22, 2016 Rome, Italy

Is there a difference in the knowledge, attitude and practice in refractive error among students with corrected and uncorrected refractive error in Nairobi, Kenya?

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Purpose: To assess the whether there is a difference in knowledge, practice and attitude regarding refractive error (R.E) among students with corrected R.E and uncorrected R.E.

Methods: Study design and study population: Part of a larger cross sectional school based study with a qualitative component in 1390 students attending high school in Nairobi Kenya.

Data collection Procedure: The schools were selected by multistage random sampling and the students included in each school category were based on proportion of students in stratification. Form 3 students in the selected schools participated in the study. First, a semi structured KAP questionnaire was administered to all the students. Then an eye visual acuity (V.A) screening using a Log MAR chart was done. The cut off for defining significant refractive error was presenting V.A less than 6/12 in the better eye. Students with spectacles the power of spectacles was determined using the lensometer. For those whose vision was less than 6/12 in the better eye a dry objective refraction and subjective refraction was done. If V.A improved by two lines then diagnosis of R.E was made. If VA did not improve by at least two lines in all students anterior and posterior examination was performed to determine the cause. The students then participated in Focus Group Discussion of 8-12 students and in-depth interviews with key informants (class or head teacher). The information gathered was recorded in a questionnaire or a tape recorder.

Data analysis: Chi-square test was used to compare means and proportions among students with corrected and uncorrected refractive error.

Results & Conclusion: The students' knowledge as regards R.E was generally low; however, students with corrected R.E had superior knowledge in R.E. Interestingly, students' attitudes towards R.E and spectacle use were more flawed in the corrected R.E group compared to their uncorrected counterparts. Students with corrected R.E had distinctly better access to eye health compared to those with uncorrected R.E. All these differences were statistically significant ($p \leq 0.05$). Students with uncorrected R.E could not afford refractive services. Most students with spectacles preferred another way of correcting their poor vision and majority preferred contact lenses.

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