

Eyes without Borders: Strategies for Universal Eye Care Access in Migrant Populations

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Vision, a Universal Right, Non-Universal Access

Eye conditions causing low vision and blindness are remarkably common. Almost everyone will experience impaired vision or an eye condition requiring eye care services.

Migration, due to climate, conflict, and economic reasons entails unique challenges in access to healthcare; emergency shelters and refugee camps often lead to delayed diagnoses and increased risk of communicable diseases, malnutrition, and ultraviolet light exposure, in addition to ambiguous legal status, language barriers, discrimination, and exclusion from national health systems.

Objective

1. To highlight the discrepancy in eyecare access and utilization between migrants and the general population.
2. To identify the barrier to efficient eyecare in migrant populations.
3. To propose strategies for better eye care access in migrant populations.

Methodology

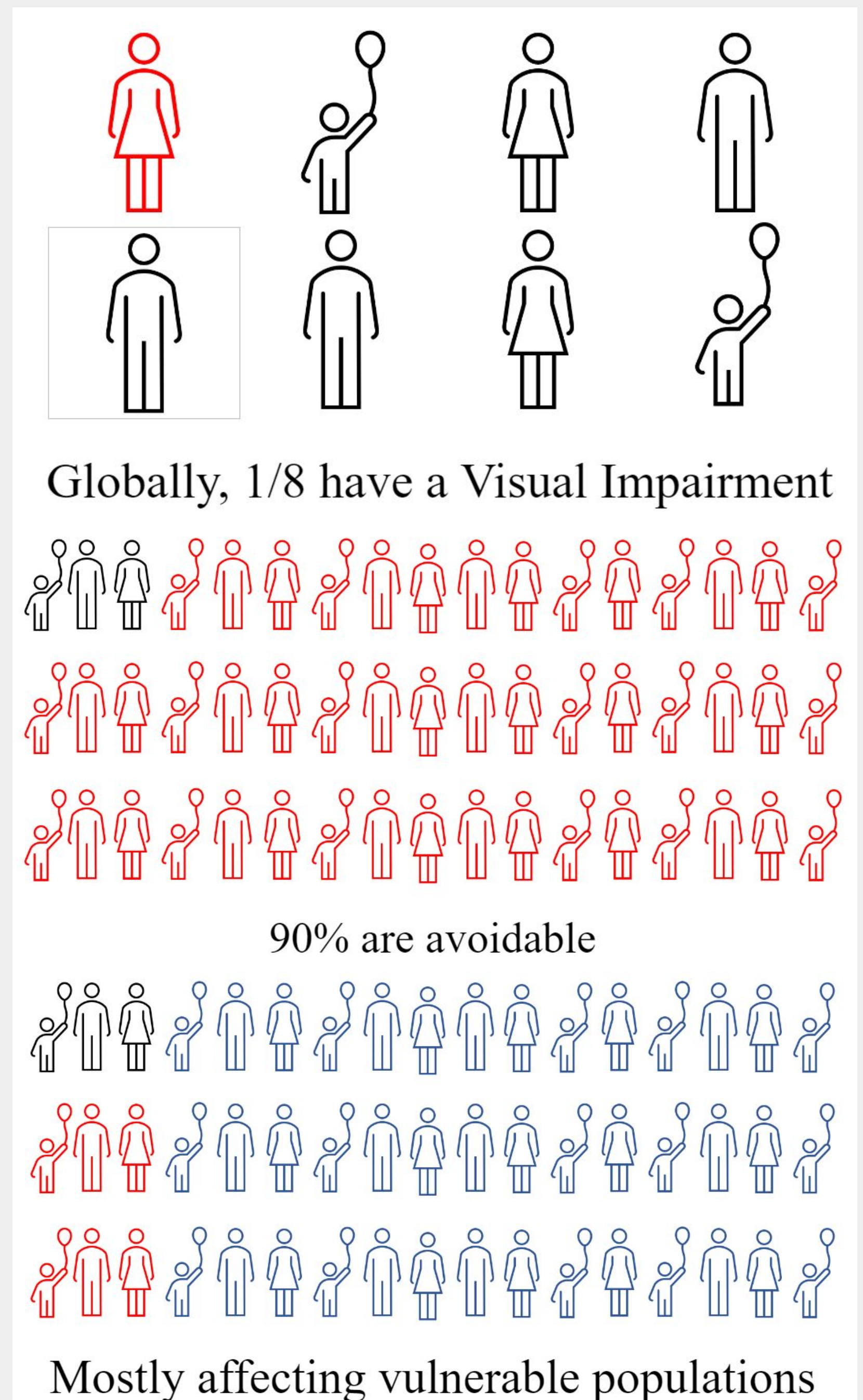
- A narrative review of primary and secondary sources was conducted.
- Databases searched in PubMed, ScienceDirect, and Scopus.
- Inclusion criteria: articles available (March 2010- March 2024).
- Exclusion criteria: Papers not in English, inappropriate or not pertinent to the study.

Findings and Challenges

- **77%** of migrants had no general health insurance, **93%** lacked eye insurance. And, one-fifth (**20%**) were unable to afford glasses.
- **30%** of migrants never had an eye check, with 35% citing cost and lack of knowledge of health resources as the main barriers.
- There was a **significant difference** in general health and vision between migrants settled for more or less than eight weeks, highlighting the impact of constant movement on eye health.
- Migrants had a **lower frequency** of eye care encounters & a significantly **shorter duration** of continued care, with **increased likelihood of loss to follow-up**.
- Mandatory health screenings upon resettlement only provide **information without adequate mechanisms** for follow up or navigating the complex healthcare system.
- **Limited access to private insurance** options and financial constraints adds to the reliance of migrants on government-funded insurance programs.

Strategies and Recommendations

- Further research on the prevalence, management, and access of ocular conditions within migrant populations is needed.
- Specific factors influencing low rates of access in migrant populations should be identified and addressed.
- Policies providing quality and affordable eye care, must be implemented for all displaced persons, regardless of legal status.
- Public health interventions should target eye care at every stage of displacement.



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