



Empowering Children. Supporting Families. Building Brighter Futures.

Resource 037 | Vision conditions

Strabismus

What it means

Strabismus, also called a squint, means the eyes are not consistently aligned in the same direction. An eye may turn inward, outward, upward, or downward. It can be constant or intermittent. It is different from amblyopia, although the conditions can occur together. [1]

Causes and risk factors

Causes include differences in eye movement control, focusing errors, and some neurological or eye conditions. Sometimes no single cause is found. Reduced vision can affect alignment, while misalignment can interfere with visual development. A new or unusual pattern should not automatically be assumed harmless. [1,2]

General family education. A concern deserves assessment, but this guide does not diagnose a child or prescribe treatment.



Signs and everyday impact

Families may notice an eye drifting, head turning or tilting, closing one eye in bright light, or difficulty using both eyes together. Some apparent misalignment is caused by facial anatomy rather than true strabismus, but an examination is needed to tell the difference. [1,2]

Assessment and diagnosis

An eye clinician assesses alignment in different directions and distances, vision in each eye, focusing errors, and eye health. Dilating drops may be used for accurate refraction. The team looks for amblyopia and investigates neurological or structural causes when indicated. [1,2]

Treatment and therapy

Options depend on the pattern and cause and may include glasses, amblyopia treatment, prisms in selected situations, or eye muscle surgery. Surgery addresses alignment but does not automatically correct reduced vision or a focusing error. Exercises are appropriate only for particular diagnosed problems, not all childhood squints. [1,2,3]

Support at home

Use prescribed glasses and follow-up care consistently. Report when the deviation appears and whether there are headaches, double vision, or new symptoms. Avoid unprescribed eye exercises or patches. Support play and learning while the treatment plan is developed.

When to seek help

Sudden strabismus, double vision with neurological symptoms, severe headache, eye pain, or a white pupil requires urgent assessment.

Questions for your care team

- Is this true strabismus and what pattern is present?
- Is either eye developing amblyopia?
- What does the proposed treatment address and what follow-up remains necessary?



Podcast preparation

Use this outline to develop a later podcast script.

Suggested opening

Welcome to Mariel Early Intervention. Today we discuss strabismus. Strabismus, also called a squint, means the eyes are not consistently aligned in the same direction. This is general education; each child needs individualized care.

Opening: Define the topic and its developmental context.

Understanding: Explain causes and signs without inviting self-diagnosis.

Assessment: Describe evaluation and distinguish screening from diagnosis.

Support: Discuss treatment, therapy, and practical family supports.

Closing: Explain urgent signs and one clear next step.

Misconception to address: An eye alignment problem is not always cosmetic and should not simply be left for a child to outgrow.

Before recording: update clinical references and local service details, arrange clinical review, and use fully consented or fictional examples.

Terms in plain language

- Strabismus: eye misalignment.
- Binocular: involving the use of both eyes.
- Prism: an optical adjustment sometimes used to redirect visual images.

Sources and further reading

Sources accessed 3 October 2026. Numbered references support the clinical overview. Treatment availability and referral routes vary by country.

[1] Squint - NHS

<https://www.nhs.uk/conditions/squint/>

[2] Amblyopia (Lazy Eye)

<https://www.nei.nih.gov/eye-health-information/eye-conditions-and-diseases/amblyopia-lazy-eye>

[3] Refractive Errors

<https://www.nei.nih.gov/eye-health-information/eye-conditions-and-diseases/refractive-errors>