



IAPB VISION 2020 Workshop Programme: 2015



Advocacy for Human Resources for Eye Health – strategy workshop, Cameroon



GAP - National Planning, Maldives

Coordinated by the International Centre for Eye Health with **funding from** CBM, ORBIS, Sightsavers, Eye Samaritans International and Ophthalmic Aid to Eastern Europe.



IAPB VISION 2020 Workshops – Support to GAP globally and locally

Executive Summary

2015 was a successful year for the IAPB V2020 workshops programme, whose purpose is to support the delivery of the WHO Global Action Plan (GAP) : Universal Eye Health.

The programme takes a coordinated approach with workshops at national level to support the translation of the GAP into national plans and programmes; whilst concurrently supporting strategic global and regional priorities.

In Russia and Eastern Europe we run a ROP programme delivering strategic regional and national workshops and working with teams of paediatric ophthalmologists, neonatologists and neonatal nurses.

This report features:

14 workshops held in Africa, South East Asia, Latin America and Europe.

Training and skill development

ROP Eastern Europe Programme – 1 workshop + developmental activities

A full list of activities is found in **Appendix A**

A few highlights from previous workshops

- Significant progress has been made in the Eastern Mediterranean region since the 2014 regional workshop on advocacy and planning for GAP. 14 of the 21 countries now have developed eye health plans in line with the GAP which are either approved or are awaiting approval. In 3 countries there are security situations making it impossible to plan, these are Yemen, Syria and Palestine. The regional staff is working with the teams in Tunisia, Somalia, Djibouti and Lebanon to develop their plans.
- In Africa four of the five countries with advocacy advisors trained in 2014 have made excellent progress in developing advocacy for Human Resources for Eye Health (HReH) strategies and in getting the eye health workforce needs included in the national Human Resources for Health (HRH) plans. Senegal has a HReH plan and is the process of integrating it into the national HRH plan. Ghana has an integrated plan which will go to the Ministry technical committee first before being approved by parliament. Camerons integrated plan was validated by the Ministry of Health on World Sight Day and this plan will be integrated into the new national HRH plan from 2017. In Kenya the HReH plan was integrated into the national HRH plan in August of 2015.
- Following the 2014 national planning workshop in Indonesia IAPB can now report that a National Eye Health Committee has been established and endorsed by the Ministry of Health. <http://www.iapb.org/news/formation-national-eye-committee-indonesia>
- Following the 2013 Workshop in Nepal to develop a Cataract surgical protocol the protocol developed in the workshop has now been endorsed by the Ministry of Health and has been printed and circulated to all eye hospitals of the country for implementation.
- Six of the 11 people trained in RAAB in 2014 have now been certified. Two in Indonesia are already conducting RAABs for the Ministry of Health. One from Nepal is now working with IAPB and will be conducting RAABs in The Maldives and East Timor.

2016 activities

1. Regional workshops to promote the roll out of the GAP (2)

Europe was the final region to have a regional GAP advocacy and planning workshop. This was for all European countries to look at how to implement the Global Action Plan 'Universal Eye Health for All' in Europe and was held in Vienna, Austria, 9th June . It was a one day workshop with Presidents for the National Societies of Ophthalmology from 21 countries across Europe attending.

Outcomes:

A commitment was made by all participants to approach their Ministers of Health on their return to make them aware of the GAP and their responsibility to deliver it and then to report back at the next meeting of the European Ophthalmic Society in two years time.

Moldova has already held a meeting with the Ministry of Health and is currently identifying the key stakeholders to be involved in national eye health planning meeting to be held in January 2016.

The IAPB Europe Chair was also asked to present on the GAP at a national ophthalmic conferences in Lithuania, Moldova and Montenegro.

In **South East Asia** a regional workshop was held in Nepal, 15th – 16th December, this was in partnership with WHO. This was a follow up to the first regional planning workshop and was to assess progress, identify commonalities where countries could support each other as well as common challenges to be addressed. This workshop was also to introduce the new WHO ECSA (Eye Care System Assessment) tool to all countries.

Nine of the eleven countries in the region participated, including the National Eye Health Coordinators (NECs) from each of the countries, INGOs and other key persons.

Outcomes:

Data and updates on each countries implementation of the GAP were given. This allowed progress to be assessed, challenge areas identified and resolutions found. It was agreed by the plenary that these workshops are essential to help, maintain momentum and monitoring of the implementation of the GAP and secondly for NECs to share successes and find solutions to challenges as a group who could provide support to each other.

In the **Eastern Mediterranean** region the regional workshop was postponed so that it could be aligned with the MEACO meeting in early 2016 as it would enable the NECs to attend the MEACO meeting as well as the regional IAPB workshop.

2. GAP Planning at National Level (8)

In the **South East Asia region** there were four national workshops held to promote the GAP and to support the process of identifying priorities and planning for its' implementation at national level. These workshops were usually one or two days and key to their success was having the buy in and support of the Ministries of Health. These workshops were held in The Maldives, East Timor, India and Myanmar.

Outcomes:

In the Maldives the National Eye Health Committee is being established. IAPB have secured funding for a RAAB which has added impetus to the formation of the Committee who are taking a lead in the organisation of the RAAB. The workshop brought in the WHO country office representatives who are now engaged with the Committee and have offered financial support to the RAAB. Discussions are underway to utilise this support for a post RAAB dissemination and planning event.

In East Timor the workshop raised awareness and understanding amongst the Ministry of Health and during the workshop it was evident that data was needed to enable effective planning. IAPB have now secured funding for a RAAB and this has helped promote the need to establish a National Committee to lead the RAAB planning.

In India the programme supported VISION 2020 India to run a national consultation workshop to bring together government and nongovernmental stakeholders to review and draft a national eye health action plan. Since the workshop this plan has been submitted to the Ministry of Health for endorsement. Once this is done it will be cascaded down to each State's National Control for Blindness Committee.

In Myanmar the workshop provided the opportunity to engage with the WHO country office and eye health partners, both national and international. Outcomes include international partners collaborating to support a national survey on blindness in Myanmar and to establish a Task Force. Since the workshop a National Strategic Plan has been developed for eye health which is expected to be launched soon.

To compliment the work supported by VISION 2020 Australia in the **Western Pacific region**, IAPB workshops focus on China.

A Provincial planning workshop was held for Yunnan Province, **China**, this was to promote the GAP – Universal Eye Health, and to mobilise the provincial and municipal level health workers and managers in the Province who manage and plan eye care activities. Yunnan Province is well advanced in its blindness prevention work and this workshop was an opportunity to look at experiences of implementing the blindness prevention plan and to begin to plan the next phase of the prevention of blindness plan.

Outcomes:

Approximately 200 people attended, well beyond expectations, and due to the timing of the workshop and its high profile it is expected that the recommendations made will be incorporated into the 13th national five year plan of Yunnan.

Also in **China**, the programme co sponsored the China Day at the IAPB Council of Members. This day was dedicated to sharing of information, research and programme outcomes with the IAPB members. The day was held in partnership with the China governments National Health and Family Planning Commission.

The unpublished findings of the Chinese national survey in 9 Provinces was presented as well as recent research findings on refractive error in children and approaches to address this.

Outcomes:

The Chinese government announced that it was considering a national response to reduce the prevalence of uncorrected refractive error.

Feedback from the day has been overwhelmingly positive. Particularly the opportunity to access new and unpublished data from China and to meet and discuss with the Chinese partners. New relationships were forged between Chinese partners and IAPB members – including requests from the Chinese government for training programmes and information on Peek <http://www.peakvision.org/>

In **Latin America** the programme focussed on engaging with the Brazilian National Society of Ophthalmologists to advocate for the GAP and to reinvigorate the National Prevention of Blindness Committee. Unfortunately the political situation in Brazil meant it was difficult to engage with the Ministry of Health until stability was restored. IAPB focussed on working with the National Society and the IAPB Regional Advisor attended their annual meeting to meet with the President of the National Society.

Outcomes:

During the meeting it was agreed that in 2016 a workshop would be held on the GAP and how to roll it out across Brazil. This would be held to coincide with the National Society annual meeting.

In **Europe** the IAPB Chair attended the Black Sea Ophthalmological Society annual meeting in Moldova to speak to the congress about the GAP and IAPB. An aside meeting had been arranged with key Ministry of Health officials to look at how best to roll out the GAP in Moldova and specifically to start the National planning process.

Outcomes:

In the side meeting IAPB was asked to provide technical advice to the national planning process and the IAPB Chair has already provided details and recommendations for this. IAPB has also been asked to help facilitate the planning once the review has been finalised and the data gathered for the planning. The Moldova team are very motivated and it is envisaged that the experience here can be used as a case study to support GAP planning in the region.

3. Building capacity to gather data for evidence (2)

Data and evidence are key to the implementation of the GAP, this has meant that RAAB has been promoted as an effective tool to gather data for national planning and to fulfilling the GAP. With the new focus on RAAB it was an opportune moment to review and update the tool in light of new developments, in particular the new mobile RAAB (mRAAB) and to look at future developments for RAAB/mRAAB, and the governance and funding for the tool.

To do this a two day meeting was convened bringing together RAAB technical experts, the RAAB and mRAAB developers, INGO stakeholders, ICEH and IAPB representatives. Prior to the meeting a survey was carried out with all participants which shaped the agenda and helped streamline discussions in the meeting.

Outcomes:

The meeting reviewed the tool and agreed on a list of changes/updates to the tool. It was agreed that RAAB 6 would be used which measured VA to 6/12. These recommendations and actions will be taken forward by the technical team at ICEH with support from Hans Limburg. A Steering Group will be established to provide governance and also to help secure future funding for the tool and the further development of mRAAB.

Regional Meeting for 9 African Countries – ECSAT and the GAP

Another tool has been developed by WHO to support the gathering of data for GAP planning. This is the Eye Care Assessment Tool (ECSAT). This has been piloted and is now ready for roll out. To facilitate WHO in its roll out the programme helped fund a regional workshop in Africa for 9 countries who had either piloted the ECSAT or whose plan was due for review and would benefit from an ECSA to gather the data for the planning. The workshop was held in Ghana, December 8th – 9th and was attended by NECs from 9 countries, INGO partners and WHO.

Outcomes:

This was primarily a sensitisation workshop but it allowed those countries who had already carried out an ECSA and used it in planning to present to the other countries and answer queries about its implementation and use. During the workshop an assessment was made of which countries were due to update their national eye health plan and from this to identify where and when an ECSA would be useful.

4. Development of a sustainable workforce – Human Resources for Eye Health (HReH) Programme (2)

IAPB in partnership with WHO AfRO and its members has identified HReH as a priority for the Africa region. The first step was to develop a HReH strategy for Africa and then to enable this strategy to be realised to **train up advocacy advisors** for each country. The goal of the strategy is to have HReH embedded in the Human Resources for Health (HRH) strategies in every country. This is a phased strategy with target countries, In 2014 advisors were trained up in 5 countries – Ghana, Kenya, Senegal, Cameroon and Mozambique. To support these advisors a ‘How to’ Advocacy guide has been developed and they have the incountry support of a lead IAPB member to help facilitate the process of developing a national advocacy strategy for HReH. In 2015 the second Advocacy Advisor training was held which was to train up advisors from the next 3 countries and to sensitise 3 more countries – Uganda, Tanzania and Zambia. The workshop was also used to assess progress of the initial 5 countries and to consolidate and learn from the first phase of the advisor programme. As well as the advocacy advisors the National Eye health Coordinators (NECSs) attended.

Outcomes:

Four of the five countries with advocacy advisors trained in 2014 have made excellent progress in developing advocacy for HReH strategies and in getting the eye health workforce needs included in the national HRH plans, specifics are shown in the highlights section. Key to the success of this programme is to have lead member agencies supporting the advocacy advisors in each country. The advocacy advisors from the first training will support the second phase of training and may well be required to support the development of strategies in neighbouring countries.



Advocacy for HReH strategic planning, Cameroon

In **Central Africa** where there are very few IAPB members to help support the process a different strategy was used. NECs and Directors of HRH were brought together in a sub regional workshop for 7 countries and facilitated to develop a sub regional advocacy strategy for HReH. Cameroon provided an excellent case study showing how they had gone through the process of developing their HReH plan including their situational analysis, developing strategic choices, an action plan and finally validation by the Ministry of their HReH plan. The Cameroon representatives emphasised key factors that led to the success of their approach.

Outcomes:

During the workshops strategic areas for the development of HReH in the sub region were identified. These were then analysed and drawn up into priority strategic choices for each country. These priorities were drafted into a sub regional plan for HReH. There was a commitment from the WHO representative to facilitate meetings between WHO and the Director of Human Resources in each country.

5. Training and Skill Development

This programme has been strengthening its learning and development between the regions. Part of this has been the linking up between countries which may lie in different regions but which have many commonalities, this is particularly true for the Mekong countries which fall between the Western Pacific region and the South East Asian region. The programme supported representatives from 5 South East Asian countries to attend training in Vietnam on Health Systems Strengthening and 3 representatives to attend training on Eye Health for Women and Girls in Cambodia. Participants produced action plans which will be followed up on within a year of their training.

This programme also helped our partners at Aravind Eye Hospital, LAICO to deliver a programme which included two courses: Leveraging Vision Centre for Universal Eye Health and Strengthening Tertiary Care: Managing Network of Eye Care Facilities. Over 100 participants attended from 6 countries.

6. ROP Programme –Eastern Europe

IAPB receives support from Eye Samaritans International (previously Shreveport Sees Russia) and Ophthalmic Aid to Eastern Europe to support a ROP programme in Eastern Europe.

This year saw the first **Romanian national workshop** which brought together multidisciplinary teams from the Neonatal Intensive Care Units (NICUs) across the country. This workshop was a follow up from the regional ROP workshop held in 2014 where the team from Romania requested a national workshop to bring together the ophthalmologists, neonatal nurses and neonatal nurses to assess the weaknesses in the national ROP programme and identify actions for strengthening it. 67 Nurses, 90 Neonatologists / Paediatricians and 27 Ophthalmologists attended.



ROP Workshop – Bucharest, Romania

Outcomes:

Since this workshop contacts have been made to establish a national ROP committee. The lead neonatologist has made a commitment for ensuring the essential equipment for preterm infant oxygen management will be installed in every NICU. The lead ophthalmologist has put together a proposal for funding a training and advocacy programme for the national ROP programme. This has been done with the support of IAPB.

Other ROP activities:

IAPB Europe sent a representative to the **South East Europe Ophthalmic Society** annual meeting to meet with the ROP experts from the region. This is in preparation for a regional South East Europe ROP workshop to be held in 2016.

The ROP programme provided sponsorship for two Russian neonatologists to attend the first **joint European Neonatal Society congress (jENS)**. Since attending one of the neonatologists has been in touch and invited Professor Brian Darlow and a neonatal nurse to attend the annual Russian neonatal symposium to raise awareness on ROP and best practice to the neonatal nurses and neonatologist attending. This is a wonderful opportunity to strengthen the care of infants at risk and to emphasize the need to follow clear protocols to minimize the risk of ROP. It was clear from previous workshops in Russia that the prevention of ROP could be improved by better care of infants at risk by nurses and neonatologists following the protocols and also to ensure that those needing screening are seen in time.

IAPB received funding to support the printing of the **parent information leaflets** that the RCO and RCPCH developed as part of the UK national ROP guidelines. These leaflets had been translated into 4 languages as part of the 2014 programme and the Romanian leaflets were then printed for the Moldovan Ministry of Health to support their ROP awareness activities.

As part of the ICEH ROP programme in Brazil an **on line course on ROP** had been developed specifically for NICU nurses. IAPB secured approval and funding to translate these materials into English where they would then be reviewed and updated by the original authors. This is phase one, these materials would then be available in English for roll out across Europe. It is planned that Phase 2 would be to get them translated in to Russian.

Management:

During this period there was emphasis on improving the information and communication on workshops in a more informal way. To do this IAPB regional staff and the manager have produced several blogs on workshops – the links are below:

<http://www.iapb.org/news/formation-national-eye-committee-indonesia>
<http://www.iapb.org/news/national-consultation-developing-country-eye-health-action-plan>
<http://www.iapb.org/blog/2nd-regional-meeting-implementation-universal-eye-health-sear-member-states>
<http://www.iapb.org/blog/china-power-together-universal-eye-health>
<http://www.iapb.org/blog/cataract-surgery-protocol-nepal>
<http://www.iapb.org/blog/myanmar-hosts-key-workshop>
<http://www.iapb.org/blog/taking-systems-approach-eye-health>
<http://www.iapb.org/blog/iapb-regional-workshop-europe>
<http://www.iapb.org/blog/romania-first-rop-workshop>
<http://www.iapb.org/blog/iapb-advocacy-training-workshop-accra-ghana>

Another part of the coordination and learning between the IAPB regions was the instating the IAPB Regional Coordinators meeting as a regular component of the annual IAPB COM meetings. The

meeting in Beijing was the first where each region was represented and it was a very dynamic meeting allowing regions to work through challenges together, to identify commonalities and opportunities for working together in the future.

Surveys had been carried out with each regional staff and in this meeting the findings were discussed and a set of recommendations developed to help guide the future shape of the programme and how it complements the regional strategies to promote the delivery of the GAP.

Appendix A – List of Workshops/Activities in 2015

1. Global Workshop Programme:

Europe:

Austria, Vienna Regional; GAP Workshop
Chisinau, Moldova Meeting at BSOS with Moldovan MoH re: GAP

Africa

Accra, Ghana Regional meeting on ECSCA + GAP with WHO
Accra, Ghana Phase 2: Advocacy Advisor Training
Yaounde, Cameroon Regional workshop on HReH

South East Asia

Nepal, Kathmandu South East Asia Regional GAP Workshop
The Maldives, Male National Planning
East Timor, Dili National Planning
India, Hyderabad VISION 2020 India – National Planning
Myanmar, Nya Pyi Daw National Planning

Western Pacific

Yunnan Province, China Provincial Planning
Beijing, China China Day, IAPB COM

Latin America

Florianopolis, Brazil Meeting – Brazilian Council of Ophthalmology

Global

UK, London RAAB tool – Future Development

2. ROP Europe Programme

Romania, Bucharest National ROP Workshop
Sponsorship for 2 Russian neonatologists to attend first jENS congress
Translation of the ROP on line course materials
Printing of Information leaflets for parents on ROIP – Romanian and Russian
SEEOS –Attend ROP course discuss a SEE regional ROP workshop for 2016

3. Training

5 from SEA sponsored to attend the Vietnam HSS course
3 from SEA sponsored to attend the Cambodia Eye Health planning for Women and Girls
Sponsored the LAICO courses on Leveraging Vision Centre for Universal Eye Health and
Strengthening Tertiary Care: Managing Network of Eye Care Facilities