

IAPB East/ Southern Africa Sub-Regional Workshop Report

Introduction

On 12-13 July 2022, IAPB held sub-regional workshop focussing on the East and Southern Africa region in Nairobi, Kenya. The meeting brought together representation from World Health Organisation AFRO, IAPB member agencies, IAPB Partners and National Ministries of Health from within sub-region. The Fred Hollows Foundation, Kenya, acted as the local partner for the meeting providing on the ground administrative and logistical support. Novartis, also a partner of the IAPB regional workshop, considers this a program which reinforces both organization's joint commitment to strengthen eye health in Sub-Saharan Africa. It supported the bringing together partners and key stakeholders in healthcare to move forward discussions on elevating eye health services in the region.

The purpose of the workshop was to equip stakeholders in the sub-region with the knowledge and technical resources to deliver the [2030 IN SIGHT](#) strategy and develop national level implementation plans. The meeting objectives were to:

- Highlight how the 2030 IN SIGHT strategy can be implemented at the regional and national level
- Showcase tools for delivering the strategy
- To collectively agree on the ambition for implementing the 2030 In Sight strategy
- Agree on concrete steps and timelines

Session: 2030 In Sight: Ending Avoidable Sight Loss, presented by Dr Aaron Magava, IAPB Regional Chair for Africa

Dr Magava, unpacked 2030 IN SIGHT, the sector's strategic plan for the next decade. He expressed it as a call to action to embed vision as a fundamental, economic, social and development issue, incorporate eye health in wider health care systems and drive patient, consumer and market change. All of which are fundamental to achieving the United Nations Sustainable Development Goals.

He said 2030 IN SIGHT built on so much great work already done and that it recognises that the challenge has changed and we have to work differently to make sure eyesight receives the political, health and development priority it needs and deserves.

He went on to explain the three overarching pillars of the strategy:

- ELEVATE vision as a fundamental economic, social and development issue.
- INTEGRATE eye health in wider health care systems.
- ACTIVATE patient, consumer and market change.

[Access the 2030 IN SIGHT presentation here](#)

Elevate:

The first component of the workshop focussed on the elevating the eye health agenda at the regional, sub-regional and national level.

Session: WHO AFRO: Supporting member states to achieve Universal Health Coverage for Eye Care in the African region, presented by Dr Prebo Barango, WHO AFRO

Dr Barango stated that Non-Communicable Diseases (NCD's) and their risk factors are increasing exponentially in the AFRO region with countries in the region among those with the highest probability of dying from NCDs globally. In terms of a regional level commitment to eye health he referenced the [Brazzaville declaration on noncommunicable diseases prevention and control in the WHO African Region in 2011](#), where Member States in the WHO African Region acknowledged the significant evidence regarding the burden of diseases attributable to multiple NCD's including eye diseases and reaffirmed their commitment to strengthening national health systems as the basis of a comprehensive approach to equitable health outcomes.

Dr Barango presented on the WHO AFRO plan on Eye Health for the 2023-24 biennium which focus on strengthening the following area: governance, strategic information and surveillance, capacity building and service delivery. He pointed out however that a severe limitation to the implementation of the WHO AFRO workplan on eye health was lack of resources. In particular, he pointed to the absence of an eye health focal point within the organisation stating that the position of eye health focal point exists within the WHO AFRO, NCD, organigram however this is not filled due to lack of funding. Dr Barango reminded participants of the period of productivity when an eye health focal point was in place and called on support for the recruitment in this regard. Dr Barango stated that WHO Country Offices were available to support IPEC implementation activities however the capacity of the respective offices may vary. He made the offer to participants that they could contact him to help mobilise WHO AFRO Country Offices in this regard and shared his email address: barangop@who.int

[Access the WHO AFRO presentation here](#)

Session: Sub-regional Advocacy: The ECSA HC Eye Health Expert Committee, presented by Mr Simon Day, IAPB

This session covered the potential of elevating eye health at the sub-regional level. It covered the achievement of a resolution on eye health by the member states of the East, Central and Southern Africa Health Community (ECSA-HC) which urges Member States to:

1. Implement integrated approaches for prevention, control and management of eye health conditions at all levels, with emphasis on primary health care;
2. Increase access to eye health services at all levels, by investing in and ensuring equitable distribution of Human Resources for Eye Health (HREH) and promote inclusion of eye health agenda at national, regional and international level; and
3. Promote generation and use of evidence in policy and practice to improve eye health.

It was highlighted that this resolution is a commitment made by member states in the ECSA region members operating in the ECSA Member states were urged to highlight this commitment made by the Ministry of Health in their respective countries when advocating for the strengthening of eye health.

Some benefits of a sub-regional approach were listed as: being a “catch all”, harnessing all members of a particular group or region; the possibility of specifying priorities relevant to that region and that countries are often motivated by comparisons with their neighbours thus sub-regional targets tend to prompt national action.

[Access the Sub-regional Advocacy presentation here](#)

Session: Leveraging global, regional and national commitments to strengthen Eye Care at the national level, presented by Ms Patricia Martin, Advocacy Aid

This session looked at identifying commitments made by governments relating to eye health and holding accountable to a multi-sectoral approach to systems strengthening.

Ms Martin stated that African states are signatories to several global right to sight instruments including WHA and UN resolutions as well as development instruments such as SDGs and Africa’s Agenda 2063 that depend on people’s vision. This means that there is duty on governments to prioritise and action prevention of blindness as a national development priority. Through their endorsement, countries have committed to recognise and address visual impairment as a public health issue through an integrated, people-centred health system’s strengthening approach. Ms Martin then presented on the Multi Sectoral Systems Review tool which is intended to serve as a reference document for assessment of the state of compliance / progress by governments with their responsibilities to ensure everyone enjoys the highest possible standard of eye health care and optimal vision.

[Access the National Level Advocacy presentation here](#)

Activity: Country Groups Plan Elevate

Participants broke into country groups representing Kenya, Ethiopia, Tanzania and Zambia lead by their respective National Eye Care Coordinators. The groups were tasked with drafting country plans to implement the 2030 IN SIGHT pillar, Elevate asking what will be done at country level to:

- Unlock Political will in eye health
- Set new targets for eye health
- Embrace eye health into SDG Frame works
- Embed eye heath in School and Employers (Occupational health)

See country plans to Elevate: [Ethiopia/](#) [Kenya/](#) [Tanzania/](#) [Zambia & Zimbabwe](#)

Integrate:

The second component of the workshop focussed on the integrating eye health in wider health care systems.

Session: Strengthening Eye Care through systems change, presented by Brian Blankinship, SIMFO

This session explored systemic change which is generally understood to require adjustments or transformations in the policies, practices, power dynamics, social norms or mindsets that

underlie the societal issue at stake. It often involves the collaboration of a diverse set of players and can take place on a local, national or global level.

[Access the Systems Change presentation here](#)

Session: Eye Care in Health Systems: A guide for action, Presented by Dr Andreas Mueller, WHO

Dr Mueller presented the [Eye care in health systems: guide for action](#). The Guide aims to be a practical resource for countries to analyse, plan, implement and review IPEC. It outlines recommended activities towards the development of: 1. an eye care strategic plan that outlines priorities; 2. a monitoring framework linked to the eye care strategic plan; and 3. one or multiple operational plans outlining actions in support of the implementation of the eye care strategic plan. He went on to discuss the four resources, or tools, developed by WHO to support countries in their development of the IPEC implementation plans and frameworks. These are:

1. [Eye care situation analysis tool \(ECSAT\)](#) – a questionnaire-based survey tool to comprehensively assess eye care in a country.
2. [Eye care indicator menu \(ECIM\)](#) – a list of recommended eye care indicators to be collected regularly.
3. [Package of eye care interventions \(PECI\)](#) – a planning and budgeting for eye care at each level of the health system.
4. [Eye care competency framework \(ECCF\)](#) – a planning tool for eye care human resources based on competencies.

The primary audiences for the guide are governments of low- and middle-income countries and the agencies working with them to provide eye care to the people in need. It is designed for use at national level but can also be used at subnational level.

Dr Mueller further explained that the discussed the ECSAT intends to support countries in the planning, monitoring of trends and the evaluation of progress towards implementing IPEC. The tool now aligns with the WHO strategic recommendations made in the Word report on vision. In addition to the questionnaire component, ECSAT now includes a maturity scoring system and a set of possible actions.

ECSAT should be implemented under leadership of the Ministry of Health. For more information and to access the ECSAT template, please contact the WHO Vision and Eye Care Programme (muellera@who.int)

Dr Muller also re-emphasised Dr Barango's earlier point that WHO Country Offices were available to support IPEC implementation activities however the capacity of the respective offices may vary.

[Access the Eye Care in Health Systems presentation here](#)

Session: Advocating for Integrated People Centred Eye Care, presented by Ms Junu Shrestha

IAPB's Junu Shrestha presented on the [Integrated People-centred Eye Care Advocacy to Action toolkit](#). The toolkit is a central reference point for key information, tools, templates, and resources to advocate for and initiate policy dialogue process for implementation of Integrated People-centred Eye Care (IPEC) in countries.

The toolkit will be beneficial for advocates working in the eye health and other health sectors, broader social and development sectors, and government ministries.

The main aims and objectives of the toolkit will help advocates to:

1. Plan, coordinate and engage in national level IPEC advocacy
2. Lead and/or participate in policy dialogues with national governments
3. Obtain commitments from national governments in developing national
1. strategic plans on the integration of eye health into health systems
4. Keep advocacy activities on track with targets and outcomes
5. Access required resources and tools

[Access the Advocating for Integrated People Centred Eye Care presentation here](#)

Session: The Avoidable Blindness Alliance, represented by Novartis, Sightlife, The Fred Hollows Foundation, IAPB and Vula Mobile

The Avoidable Blindness Alliance is a public and private sector partnership which aims to strengthen and elevate eye health at global and local level in a cross-divisional, collaborative manner to:

- Improve diagnosis through awareness & screening activities
- Strengthen healthcare ecosystems through advocacy & building referral networks and capabilities
- Provide access to quality and affordable medicines

It is the shared vision of this partnership to leverage the unique areas of expertise of its members to develop, test and scale creative approaches to delivering comprehensive and integrated eye health in underserved communities. At a global level, the vision is for the partnership is to find new and cost-effective solutions to enable access to specialised eye health services, even for the most marginalised people in low-income countries.

Mr Christopher Junge of Novartis explained how Novartis is committed to enabling local health systems and HCPs to improve outcomes in patients suffering from vision loss and impairment. Eye health is a key pillar of Novartis' Corporate Affairs & Global Health Division with dedicated teams on the ground across SSA. Building on Novartis' vision to cure and extend peoples' lives regardless of circumstances and income, forming such strategic partnerships, as with the Alliance, is fully aligned with Novartis values and its ambition to address health disparities.

Ms Josie Noah of Sightlife shared details of their goal of building the foundation for integration of eye health into primary care in rural Ethiopia.

In Ethiopia, nearly 80% of the population live in rural areas which often have limited access to health care, including eye care. SightLife will address these eye care gaps in Ethiopia while

advancing progress towards United Nations General Assembly (UNGA)'s resolution to ensure universal access to eye care services through integrated people-centered eyecare. In 2022, our partnership will focus on:

- Training of primary health care providers,
- Strengthening of the eye care referral pathway, and
- Advocating for health system integration.

Independently run, each of these program areas can only achieve moderate impact. Pursued as a cohesive continuum of care with integration of existing components of the health system, these independent programs will act synergistically to optimize impact.

Mr Carmichael Nduri of the Fred Hollows Foundation, Kenya, presented that the Foundation will seek to increase equitable access to eye health services to reduce avoidable blindness and vision impairment in Kenya. With the goal of reducing the prevalence of blindness caused by cataract, glaucoma and diabetic retinopathy in Kenya they would strengthen the capacity of the health system to provide high quality cataract, glaucoma and retinal eye health services across the patient pathway, to improve patient eye health outcomes for poor and vulnerable communities.

Mr Simon Day of IAPB stated that they are committed to delivering the 2030 IN SIGHT strategy across sub-Saharan Africa. Through targeted advocacy interventions they will seek to support and enable an effective policy dialogue, planning and implementation environment for health services. The aim of this work is to create an effective and sustainable, lasting approach to policy change and investment at country level. To maximise impact, and that of the respective stakeholders and county actors, IAPB will focus on two impact activity streams:

- Regional and country level advocacy and
- Strengthening systems, knowledge and networks.

Dr William Mapham of Vula Mobile explained that is a cost-effective digital solution to make specialized healthcare accessible to remote, underserved communities. The system connects frontline healthcare workers in public and rural healthcare facilities directly with medical specialists, and helps to facilitate efficient communication and expedite treatment.

Vula also provides data analytics regarding communication and referral patterns to meet the needs of professionals and health system administrators. It provides monthly data and reporting which will allow doctors to understand the demographics and utilisation of their practice, the experience, the risk of their patients and the action outputs. This data has been used to successfully advocate for more equitable distribution of health workers between urban and rural areas.

The Alliance is open to other members coming on board and any expressions of interest could be sent to [Mr Simon Day](#).

Session: IPEC implementation in Practice

In this session, participants heard from representatives of the Ministries of Health from Ethiopia and Kenya. They shared their real-world experiences in relation to the IPEC implementation process including the undertaking of an ECSAT and the development of an

IPEC compliant National Strategic Eye Health plan. Both highlighted practical steps and challenges tackled during their respective processes thus far.

[Access the IPEC implementation in Practice in Ethiopia presentation here](#)

[Access the IPEC implementation in Practice in Kenya presentation A and presentation B here](#)

Activity: Country Groups Plan Integrate

Participants again broke into country groups representing Kenya, Ethiopia, Tanzania and Zambia lead by their respective National Eye Care Coordinators . The groups were tasked with drafting country plans to implement the 2030 IN SIGHT pillar, Integrate, asking what will be done at country level to:

- Pursue the inclusion of eye health into Universal Health Coverage
- Deliver Integrated People Centre Eye Care
- Build Resilient Work Force
- Embrace Technological Solutions

See country plans to Integrate: [Ethiopia/ Kenya/ Tanzania/ Zambia & Zimbabwe](#)

Activate:

The third component of the workshop focussed on the campaigning to drive patient, consumer and market change.

Session: Focussing the word's attention on the importance of eye care: World Sight Day and Love Your Eyes, presented by Simon Darvill, IAPB

IAPB's Simon Darvill presented on some campaigning ideas with a view on activating the 2030 IN SIGHT Strategy. He spoke of a global campaign that would have:

- One overarching approach
- One voice
- One campaign,

[World Sight Day](#) 2021 was extremely successful and the "Love your eyes" theme ensured the day gained more traction than ever before. Consequently, this was retained to be the umbrella for the wider campaign, and to encourage the public to help us towards our 2030 in sight strategic vision.

Love Your Eyes - Three words that are simple, yet powerful. Positive, yet instructional.

Further to this, there is a to focus on 3 'Actions' to bring the campaign to life and be strong, rallying calls to action - understandable to the widest audience possible. The 3 calls to action are:

- Accessible eye care
- Available sight tests
- Affordable glasses

Three actions to educate, inform and encourage. Simon called on members to take up the challenge of campaigning in the lead up to, and on World Sight Day using the "Love your eyes

theme bolstered by the 3 'Actions'. He also encouraged members to undertake other related activities such as pledge to carry out eye testing and promoting the World Sight Day photo competition. Tools designed to help members undertake World Sight Day activities can be found on the [IAPB website](#).

[Access the Focussing the word's attention on the importance of eye care here](#)

Activity: Country Groups Plan Activate

Participants again broke into country groups representing Kenya, Ethiopia, Tanzania and Zambia lead by their respective National Eye Care Coordinators . The groups were tasked with drafting country plans to implement the 2030 IN SIGHT pillar, Activate, asking what will be done at country level to:

- Campaign at new level
- Tackle Stigma
- Build Public Private Partnership
- Create the right regulatory environment

See country plans to Activate: [Ethiopia/ Kenya/ Tanzania/ Zambia & Zimbabwe](#)

Activity: Country Groups: Pulling the country plans together – Elevate/ Integrate/ Activate

Remaining in their respective groups, participants collated their implementation plans of the three pillars to form country 2030 IN SIGHT implementation plans. These plans were to be held by the Ministry of Health representatives and supported by the members.

Stakeholders were then requested to commit to undertake one activity from their respective country plan to be carried out within the next six months.

See consolidated country plans: [Ethiopia/ Kenya/ Tanzania/ Zambia & Zimbabwe](#)

**Stakeholder Commitments to Country 2030 IN SIGHT Implementation Plans,
to be undertaken by end 2022**

Country	2030 In Sight Pillar	Commitment	Member
Ethiopia	Integrate	Support development of 5-year strategic eye health plan (IPEC compliant)	Himalaya Cataract Project
			Orbis
			Sightlife
		Develop workplans for focus countries prioritising the embedding of IPEC	Light for the World
		Support the rollout of the PEC training manual and training	Sightsavers
		Develop School Health Guidelines	Vision Aid Overseas
		Leverage technology to deepen and expand integration	CBM
Kenya	Elevate	Build Public Private Partnership through strengthening multidisciplinary and multi-sectoral engagement to achieve Universal Eye Health Coverage in Kenya	CBM
		Map out eye health initiatives/activities across different sectors (go beyond health sector)	CBM
	Integrate	Hold Annual Eye Health Stakeholders Forum – to review progress, share lessons and identify core areas for synergies and alignment	CBM
		Review and expand the NEHTWG membership	CBM
		Strengthen multi-sectoral coordination mechanisms (Alignment, avoid duplication ...)	CBM
		Support the elevation of eye care through provision of technology that support RAAB 7 to provide data and information helpful in planning and monitoring for programs.	Peek Vision
		Develop Annual National IPEC Work Plan	CBM
		Develop workplans for focus countries prioritising the embedding of IPEC	Light for the World
	Support the rollout of the PEC training manual and training	Sightsavers	

		Leverage technology to deepen and expand integration	CBM
		Support strengthening of eye health systems through provision of technology to support school and screening and link them to health system. We will provide data that would enable evidence based programme decisions and continuous improvement.	Peek Vision
	Activate	One Campaign to mark WSD in 2022!	CBM
		Strengthen the partnership agenda around advocacy regarding medication and commodities to unlock the supply chain	Fred Hollows Foundation
Tanzania	Integrate	Disseminate workshop information (IPEC) with MoH	CBM
		Support the rollout of the PEC training manual and training	Sightsavers
		Leverage technology to deepen and expand integration	CBM
		Pilot Vula	KCCO
	Activate	Mark World Sight Day in all KCCO countries	KCCO
Zambia	Integrate	Support the rollout of the PEC training manual and training	Sightsavers
		Develop School Health Guidelines	Vision Aid Overseas
		Leverage technology to deepen and expand integration	CBM
	Activate	On World Sight Day have a 5km walk to parliament and make a presentation on eye health to the parliamentarians and screen them for various eye conditions.	MoH
		Scale up awareness on eye health (Love your eyes), campaign on Tv, Radio, Social media.	MoH
Zimbabwe	Integrate	Support the rollout of the PEC training manual and training	Sightsavers
		Training of Eye Health Personnel on PEC. We have adopted a ToT approach.	CBM
		Leverage technology to deepen and expand integration	CBM

Stakeholder Commitments to 2030 IN SIGHT Implementation in non- focus countries, to be undertaken by end 2022

Country	2030 In Sight Pillar	Commitment	Member
Burkina Faso	Integrate	Develop workplans for focus countries prioritising the embedding of IPEC	Light for the World
Burundi	Activate	Mark World Sight Day in all KCCO countries	KCCO
Ghana	Integrate	Develop School Health Guidelines	Vision Aid Overseas
Madagascar	Activate	Mark World Sight Day in all KCCO countries	KCCO
Malawi	Integrate	Support the rollout of the PEC training manual and training	Sightsavers
	Activate	Mark World Sight Day in all KCCO countries	KCCO
Mozambique	Integrate	Develop workplans for focus countries prioritising the embedding of IPEC	Light for the World
		Support the rollout of the PEC training manual and training	Sightsavers
Sierra Leone	Integrate	Develop School Health Guidelines	Vision Aid Overseas
South Africa	Activate	Mark World Sight Day in all KCCO countries	KCCO
South Sudan	Integrate	Develop workplans for focus countries prioritising the embedding of IPEC	Light for the World
		Support the rollout of the PEC training manual and training	Sightsavers
Uganda	Integrate	Develop workplans for focus countries prioritising the embedding of IPEC	Light for the World
		Support the rollout of the PEC training manual and training	Sightsavers
	Activate	Mark World Sight Day in all KCCO countries	KCCO

IAPB East/ Southern Africa Sub-Regional Workshop Programme

12-13 July 2022, Nairobi, Kenya

12 July 2022 – Day 1		
Schedule	Agenda item	Format/ Presenter
08h30	Registration	
09h00	Welcome & meeting objectives	Mr Simon Day
09h10	Introductions	Plenary
09h30	2030 In Sight: Ending Avoidable Sight Loss	Dr Aaron Magava
	Elevate	
09h50	WHO AFRO: Supporting member states to achieve Universal Health Coverage for Eye Care in the African region	Panel discussion: <ul style="list-style-type: none"> • Dr Prebo Barango, WHO AFRO • Mr Josiah Onyango, COECSA
10h05	Sub-regional Advocacy: The ECSA HC Eye Health Expert Committee	
10h20	Comfort Break	
10h45	Leveraging global, regional and national commitments to strengthen Eye Care at the national level	Presentation and panel discussion: <ul style="list-style-type: none"> • Ms Patricia Martin, Advocacy Aid • Ms Florah Mukabana, CBM
11h30	Workshop: Country Groups Plan Elevate	Group work and present back <ul style="list-style-type: none"> • Country Groups
12h30	Lunch	
	Integrate	
13h30	Strengthening Eye Care through systems change	Presentation and Q&A: <ul style="list-style-type: none"> • Mr Brian Blankinship, SIMFO
14h15	Eye Care in health systems: A Guide for action	Presentation and Q&A: <ul style="list-style-type: none"> • Dr Andreas Mueller, WHO HQ
15h00	Advocating for Integrated People-Centred Eye Care	Presentation and Q&A: <ul style="list-style-type: none"> • Ms Junu Shrestha, IAPB
15h20	Comfort Break	
15h35	The Avoidable Blindness Alliance	Panel discussion: <ul style="list-style-type: none"> • Novartis • The Fred Hollows Foundation • Sightlife • Vula Mobile • IAPB
16h05	The Clinton Health Access Initiative	Presentation and Q&A: <ul style="list-style-type: none"> • Mr Ferderic Seghers, CHAI
16h35	End day 1	

13 July 2022 – Day 2		
Schedule	Agenda item	Format/ Presenter
09h00	Recap of Day 1	The Fred Hollows Foundation
	Integrate continued...	
09h10	IPEC Implementation in practice	Panel discussion: <ul style="list-style-type: none"> Ethiopia Kenya
10h00	Member updates on national IPEC implementation	Discussion: <ul style="list-style-type: none"> IAPB Members
10h30	Comfort Break	
10h50	Workshop: Country Groups Plan Integrate	Group work and present back <ul style="list-style-type: none"> Country Groups
12h00	Lunch	
	Activate	
13h00	Focusing the world's attention on the importance of eye care: World Sight Day and Love Your Eyes	Presentation and Q&A: <ul style="list-style-type: none"> Mr Simon Darvill, IAPB
13h30	Workshop: Country Groups Plan Activate	Group work and present back <ul style="list-style-type: none"> Country Groups
	Conclusion	
14h00	Pulling the plans together: Elevate/ Integrate/ Activate	Group work and present back <ul style="list-style-type: none"> Country Groups
14h30	Member outlook on planned process	Discussion: <ul style="list-style-type: none"> Plenary
15h30	Wrap up	Dr Aaron Magava
15h45	End of date 2 – Closure of meeting	The Fred Hollows Foundation

List of Participants:

Surname	First Name	Organisation
ADERA	Tesfaye	Sightsavers
ANDRADE	Samara	Sightlife
BARANGO	Prebo	WHO AFRO
BELAY	Menbere	MOH Ethiopia
CHAGUNDA	Margarida	IAPB
CHEGE	Moses	Sightsavers
DARVILL	Simon	IAPB
DAY	Simon	IAPB
EBOSO	Hilda	Novartis
ELIAH	Edson	IAPB
GICHGANGI	Michael	MOH Kenya
HAILE	Aklilu	Sightlife
JUNGE	Christopher	Novartis
KIPRONO	Paul	CBM
KOMBO	Albert	CBM
LIKNAW	Adamu	Cure Blindness
MAGAVA	Aaron	IAPB
MAHENGE	Nesia	CBM
MAKATHIMO	Mwiti	Novartis

MAPHAM	William	Vula Mobile
MARTIN	Patricia	Advocacy Aid
MATENDHE	Ibrahim	COECSA
MBENGEI	Peace	Novartis
MOONGA	Phyllis	MOH Zambia
MUBISI	Martin	Fred Hollows
MUHORO	Martin	Novartis
MUNYENDO	David	CBM
MWELWA	Godfrey	Vision Aid Overseas
NDURI	Carmichel	Fred Hollows
NOAH	Josie	Sightlife
ODERO	Austine	Fred Hollows
ONYANGO	Josiah	COESCA
RARIEWA	Fred	John Hopkins University
SHILIOH	Bernadetha	MOH Tanzania
SIMIYU	Edwin	Operation Eye Sight
SISAY	Alemayehu	Orbis
TADESSE	Demissie	CBM
TIGERE	Deborah	CBM
TSEGAYE	Endale	Novartis
WALUEMBO	Geoffrey	Light for the World
WANJALA	Edwin	Operation Eye Sight
WHITE	Joseph / Kevin	Global Vision2020