

Board of Trustees Meeting
28 March, 2014

CONSENT AGENDA ITEM 3.1a: Africa Report

IAPB AFRICA UPDATE REPORT

Part 1: Executive Summary

1.1 IAPB Africa Office - Significant Achievements

- WHO-Afro/IAPB Africa Work Plan Alignment Workshop, Brazzaville, December 2013
- IAPB Africa Advocacy Strategic Planning Workshop, Johannesburg, Feb 2014
- IAPB Africa Database Training Workshop (9 countries), Johannesburg, Feb 2014
- Task Teams and HReH Working Groups: Clear activities being achieved against work plans
- IAPB Africa Newsletter published – Q3 and Q4 2013 and Q1 2014.

1.2 IAPB Africa Office - Key Opportunities

- IAPB Africa and ORBIS sign MoU aligning HReH programme (FEH) with IAPB HReH Strategy
- Upcoming training for 4 new researchers in RAAB methodology in 2014
- Annual IAPB Africa Planning and Review Week, scheduled for September 9-11
- New partnership with African Platform for HRH under active discussion
- IAPB Africa launches situation analysis of CHWs and eye health
- New IAPB Africa Regional and Sub-Regional Advocacy strategies
- HRH follow-up meeting with WHO-Afro planned for May 2014

1.3 IAPB Partners - Significant Achievements for the Africa Region

- KCCO: Strengthening the evidence base for human resource for eye health planning and policy

- ORBIS Launch the advocacy report 'Child Eye Health in Africa – The Status and Way Forward
- Sightsavers The DJT Trachoma Programme and Global Trachoma Mapping underway
- BHVI: 20 faculty from 8 optometry schools participate in faculty development training
- LftW: establishes partnership with COECSA with Sightsavers, CBM and Fred Hollows Foundation.
- VAO assists in the establishment of the Ethiopian Optometry Association

1.4 IAPB Partners - Key Opportunities for Africa Region

- New national eye care plans scheduled for Swaziland, Burundi, Cameroon and Mozambique
- HCP: Draft Baseline Report on "The Costs of Blindness and the impacts of Cataract Surgery'
- Sightsavers: Completes study on HReH in SSA with AVRI, ICEH and IAPB
- PBU: Announces 'Ahmad bin Abdulaziz Al-Saud initiative' to treat 10,000 people
- KCCO - Preferred practices for trachoma elimination planning
- CBM: CBM Global Program Strategy II completed
- BHVI: Leadership and management training for heads of departments at universities in Africa

Part 2: IAPB Africa Office

2.1 Significant Achievements of the IAPB Africa Office

November 2013: IAPB Africa attended the 3rd Global Symposium of the Global Health Workforce Alliance in Brazil, along with WCO, ICO and Sightsavers. The Symposium focussed on the role of governments in addressing the global health work force crisis and sought commitments from Governments to match existing international support. In this respect, it was encouraging to note the active presence of Ministers of Health from 40 countries. 17 Countries in Africa responded during the Forum, making specific, time

bound targets and commitments. **Kenya**, for example, committed to: 1. Devolve HRH planning to counties by 2017 + link to national plans; 2. Recruit 12,000 new health workers by 2017; 3. Recruit 40,000 CHWs by 2017; 4. Increase spend on workforce on non-salary benefits; 5. Promote PPP for health financing

December 2013: The long-awaited WHO-Afro/IAPB Africa Work Plan Alignment Workshop was convened in Brazzaville (in attendance - IAPB Africa, 15 countries and 13 member agencies). The specific objectives of this meeting were: (a) To agree on key priority areas for the implementation of VISION 2020 in sub-Saharan Africa; (b) To formulate a joint work-plan and a coordination framework, highlighting ways to operationalize agreed eye health priorities at regional, sub-regional and country level. (c) To agree on ways and means to strengthen sub-regional and country offices with skilled workforce in Eye Health in the monitoring & evaluating of Eye Health Programme implementation. Three areas of common emphasis were established – Human Resources for Eye Health (**HReH**), Health Management Information Systems (**HMIS**) and Primary Eye Care (**PEC**). These will now be taken forward and embedded in a joint programme of work for both agencies.

February 2014: Advocacy Strategic Planning Workshop and IAPB Africa Database Training Workshop (9 countries) convened in Johannesburg. The advocacy workshop brought together members of the Advocacy, HReH, & Research Task Team, with experts in HReH from the African Platform on HRH (AP-HRH), IAPB Africa (staff and co-chairs) and WHO AFRO. The aim of the workshop was to produce an Advocacy strategy to achieve **HReH Change Objective 1: “Every country with an HRH strategy has an HReH strategy integrated within it”**. It will be the role of IAPB Africa and the relevant Task Teams to take forward the next steps and ensure regular communication with the members of IAPB and country representatives throughout this process. IAPB Africa is excited about the commitment shown by all members in attendance at this workshop.

The HMIS training event brought together national eye care coordinators, IAPB co-chairs and administrators of national HMIS from 9 countries (**Senegal, Ghana,**

Cameroon, Mozambique, Kenya, Zimbabwe, Uganda, Ethiopia and Togo) to review the IAPB Africa data base and assess how best the data base can be integrated with national HMIS. Particularly interesting was the capacity of the HMIS systems in several countries (DHIS2) to capture the number of patients presenting with 'eye infections'.

Country	Population	Patients presenting with 'Eye Infections'
Ghana	25,000,000	556,442
Kenya	42,000,000	778,009
Zimbabwe	13,000,000	361,028

2.2 Significant Achievements of the IAPB Member Agencies

This report, covering the 6 months from October 2013 to March 2104 is doubly welcome given the massive increases in both member agencies (18) and countries (19) reporting on their key achievements and opportunities. This represents a fantastic response and amply illustrates the wide range of member's activities in SSA – from the massive up scaling of trachoma control activities across the continent to innovative responses to service delivery in a range of countries supported by Seeing is Believing and our increasing traction on the HReH crisis.

However, we should note the imbalance in reporting by members between Eastern and Southern Africa, on the one hand, and West and Central Africa on the other hand. Similarly, we should also note the very comprehensive reporting from members in certain countries (Kenya, Ethiopia, Ghana) and the fact that less is reported from other countries in all the sub-regions. Appendix 1, the IAPB Africa' Footprint', provides our latest update on countries where members are active.

Particularly impressive is the number of agencies now actively addressing the crisis in HReH with new eye health professionals graduating in Eritrea, Mali and Malawi and new professional bodies emerging in Botswana, Zimbabwe and Ethiopia. Equally impressive is the commitment to national planning in Mozambique, Swaziland, Burundi and Cameroon, to add to the new national eye health plan in Zimbabwe. Hopefully, these new plans will reflect the aims and objectives of the new Global Action Plan. The

research agenda is also well served by work underway at Sightsavers, KCCO, AVRI and HCP, in addition to IAPB's own plans to train 4 more researchers in the latest RAAB methodology.

3.1 AFRICA REGION: Significant Achievements – IAPB Partners

- **ORBIS:** Launched the advocacy report 'Child Eye Health in Africa – The Status and Way Forward' at a two day stakeholder meeting in Johannesburg. The meeting was hosted by ORBIS and African Child Policy Forum, and was attended by representatives from government and donors as well as the Eye Health, Child Rights and Early Childhood Development sectors.
- **Sightsavers** The QEDJT Trachoma Programme: Sightsavers is leading a consortium of NGDO's to implement the multi-million pound programme to eliminate Trachoma in 2 countries and make significant advances towards elimination in three other commonwealth countries in Africa.
- **Sightsavers:** Global Trachoma mapping Project: Sightsavers has successfully reached the half way milestone of the landmark Global Trachoma Mapping Project which is using modern mobile technology to create the largest and most comprehensive distribution map of a disease ever produced.
- **The Brien Holden Vision Institute:** Faculty Development Programme has been initiated with an initial grant from Irish Aid in partnership with Dublin Institute of Technology. Twenty faculty from eight optometry institutions/schools (namely South Africa, Malawi, Uganda, Tanzania, Kenya, Ethiopia, Mali, Cameroon, Gambia) participated in a faculty development training held in Durban S.A.
- **KCCO:** Strengthening capacity for trachoma elimination: KCCO was selected as the Technical Lead by Sightsavers for the DfiD and Queen Elizabeth Diamond Jubilee Trust grants for trachoma elimination in 11 countries in Africa. Accordingly, KCCO has been working with Ministries of Health and NGO partners to plan for elimination and strengthen local capacity to achieve elimination.
- **KCCO:** Human resources for eye health publications and policy dialogues: With support from the International Development Research Centre (Canada), **KCCO** prepared and has in press or published five articles related to task shifting for eye

care in eastern Africa. In addition, policy dialogue meetings were held with various stakeholders to help them understand the implications of the findings for policy.

- **LftW:** Upscale of the work on Trachoma with support from DFID, RTI/USAID and the QEDJT - Light for the World involvement in Ethiopia, South Sudan, Mozambique.
- **LftW:** Partnership with COECSA for “health systems strengthening in eye care for a healthier, wealthier society in Eastern, Central and Western African countries”. Light for the World, Sightsavers, CBM, Fred Hollows Foundation.
- **AVRI:** Established the African Vision Optometry and Ophthalmology (AVOO) Journal. MOU’s signed with the South African optometric Association and the African Ophthalmology Federation. A publication house, AOSIS, has been contracted to run the Journal.
- **AVRI:** Have recruited 36 postgraduate Masters and PhD students to conduct research in IAPB research priorities areas. Have appointed 16 Honorary Research Fellows from all over Africa to supervise students.
- **AVRI:** Research Publications have increased to + 14 in the last 6 months.

3.2 AFRICA REGION: Key Opportunities – IAPB Partners

- **Perkins:** Braille competitions will be organized in Malawi, Ghana and Kenya to unleash the learning potential of blind children through reading.
- **Sightsavers:** The completion of the study on human resources for eye health in Sub-Saharan Africa. Sightsavers supported a project by the LSTMH which has collated data on the Human resources for Health in Sub-Saharan Africa. This data provides the most up to date database of the available human resources for eye health and makes projections into the future which informs us that on the current trajectory, no country in Sub-Saharan Africa is going to meet V2020 targets.
- **Sightsavers:** Continues to influence the post-2015 developmental framework
- **Sightsavers:** Continues to prioritise HReH through a strategic programme initiative

- **PBU:** Announces ‘Ahmad bin Abdulaziz Al-Saud initiative’ to treat 10,000 people
The Chairman of PBU, Prince Abdulaziz Ahmad Abdulaziz Al-Saud had announced a new initiative for eye health interventions for 10,000 people in Africa over one year. The Chairman announced the initiative at the launching of the GCC forum for Avoidable blindness in Dubai in October 2013. Details of the initiative to be undertaken by PBU partners will be announced later.
- **KCCO: Strengthening the evidence base for human resource for eye health planning and policy:** Additional research to be carried out by **KCCO** should be instrumental in creating a better understanding of the evidence supporting (or not supporting) the expansion of task shifting for eye care in Africa. This work should provide a much stronger evidence base for human resource planning and policy.
- **KCCO - Preferred practices for trachoma elimination planning:** Over the coming year, the adoption of evidence based preferred practices for all aspects of the SAFE strategy should help with trachoma elimination as well as strengthening the capacity of Ministries of Health and partners to adapt, adopt, and apply these practices within the local context.
- **CBM:** CBM Global Program Strategy II. The CBM Global Program Strategy II developed recently will be an opportunity for the organization to move forward in a better way. It will positively impact CBM's work on eye care.
- **BHVI:** Leadership and management training for heads of departments at universities in Africa will be taking place in later in the year.
- **AVRI:** Capacity Building Workshops in Ghana on Research Methodologies and Basic Statistics
- **AVRI:** Africa Postgraduate Reviews with attendance by postgraduate research students from Africa to present their research and receive guidance and support on research methodologies, research writing, fieldwork, etc.

4.1 EAST AFRICA - Significant Achievements

- **Perkins:** Perkins International has partnered with the Brien Holden Vision Institute (BHVI) on a Seeing is Believing East Africa Child Eye Health Project in Kenya, Uganda, and Tanzania. This four-year project aims to reduce the

percentage of avoidable blindness and visual impairment by developing and implementing a comprehensive child eye health program. The project will impact an estimated 4 million children between the ages of 0-15. Perkins International's role is to improve the quality of education and training in early intervention for children who are blind or visually impaired; 40 teachers have been trained in early intervention to date.

- **CBM:** Regional Workshop on Eye Health: The regional office organized a two days workshop on Eye Health in Nairobi for CBM country program directors, senior program managers and some key partners. The workshop was aimed at updating program people on eye health issues and discuss the challenges CBM and its partners face in providing high quality service and deliberate on the better way forward.

4.2 EAST AFRICA - Key Opportunities

- **Perkins:** For the SIB East Africa Project, Perkins International intends to organize training for 60 teachers in Kenya, Uganda and Tanzania on assistive devices and functional low-vision assessment.
- **ORBIS:** Is collaborating with the COECSA to develop an ORBIS Flying Eye Hospital (FEH) Initiative for Sub-Saharan Africa. The second consultation on the initiative was held in Johannesburg in February to agree on areas of mutual commitment and strategic alignment between ORBIS and COECSA
- **CBM:** Implementation of the Seeing is Believing (SiB) Program. The Standard Chartered Bank sponsored child eye health program is being actively implemented in the three countries (Kenya, Tanzania & Uganda). CBM is the lead organization for the consortium which includes other development partners working on eye health.
- **CBM:** Trachoma Control Program: CBM has been developing proposals and strongly working on SAFE strategy implementation with existing and new partners in all the five countries in the region (Kenya, Uganda, Tanzania, Ethiopia & S. Sudan).

4.3 KENYA

- **Perkins International** partnership with the Nairobi Family Support Services in Kibera, Nairobi to carry out an eye-screening campaign. This project aims to identify children with visual impairment and deaf/blindness. The screenings took place at schools and in the community; 11 boys and 9 girls were identified and referred to the hospital for treatment.
- **OEU:** Were awarded a SIB Phase 5 grant for The Rift Valley Province Prevention of Blindness program. The overall goal of this project is to contribute towards elimination of avoidable blindness in Kenya through strengthening of community outreach program in the Rift Valley Province through.
 1. Quality and sustainable eye care services made available in the project area.
 2. Eye units sufficiently refurbished and equipped.
 3. Human resource capacity strengthened to ensure quality eye care services
 4. Primary Eye Care (PEC) is integrated into the general public health care system. This will commence on 1/3/14.
- **FHF:** FHF has rolled out team based management training in collaboration with the Division of Ophthalmic Services at the Ministry of Health. Was able to influence the participation of the Kenya Health Systems Management Institute as co-facilitators and certifying body for course graduates. In collaboration with WITS University CHSE, finalized the development of the Teaching and Learning Resource Package which includes the following: Instructors Manual; Students Study Guide; Resource Manual (Module 1-5); Innovation management in teaching and learning; What to teach-curriculum; Teaching and Facilitating Learning; Assessment of Student Learning; Quality Assurance and Improvement. The Project has an opportunity to engage the regulatory bodies of the specific cadres involved in the training to have the course accredited as CPD course. The next steps are to pilot the tools in two institutions Kenya Medical Training College and Menelik II Eye Hospital in Addis Ababa
- **FHF:** Partnered with the National Neglected Tropical Diseases Unit and the University Of Liverpool School Of Tropical Medicine to successfully organize and hold a Trachoma cross-border meeting.
- **FHF:** Reported the successful roll out of advocacy and awareness initiatives targeting the community and decision makers at national governments, through

print and electronic media, including face-to-face lobbying. Short and long term outcomes included increased uptake of eye health services at FHF supported sites; undertaking by two county governments to contribute resources to support outreach activities. At the national level, FHF jointly with Sightsavers supported the NPBWG to develop a National Advocacy Strategy which will drive the national advocacy agenda.

- **FHF:** Developed partnerships with two national eye health training institutions (the University of Nairobi, Department of Ophthalmology and the Kenya Medical Training College Nairobi) to strength capacity to scale up the production and deployment of a well-trained, managed, and motivated eye health workforce.
- **Focus on Vision Foundation:** Has lined up with local NGO's to distribute 10,000 adjustable spectacles (the Focusspec®) among 11-16 year old and their caretakers/parents during the 3rd quarter of this year. The program includes training local people in basic eye care.

4.4 ETHIOPIA:

- **Himalaya Cataract Project:** January 2014, High-volume cataract surgical campaign provides 2,500 sight-restoring surgeries in less than three weeks. On-going mentorship between local and international partners brought together local surgical teams from Woldiya, Mekelle and Harrar, with volunteer ophthalmologists from US and an outreach team from Nepal's Tilganga Institute of Ophthalmology.
Subspecialty training-fellowships for Ethiopian Ophthalmologists October 13.
HCP supports several sub-specialty fellowships each year for eye care personnel from our partner institutions throughout the Himalayas and Sub-Saharan Africa.
In Ethiopia, improving cornea capacity by training surgeons, providing instruments and equipment and increasing the capacity of the country's eye bank.
- **ORBIS** completed its component of the Ethiopia trachoma mapping funded by the DfID. ORBIS was responsible for covering the Southern Nations, Nationalities, and Peoples' Region in the south-west of the country. This mapping

will provide a better understanding of the prevalence and distribution of trachoma.

- **FHF:** Trachoma Action Plan for Oromia, the largest Region in Ethiopia (population of 32 million). Based on the TAP developed projects on Full Safe for two large geographic Zones in Oromia and entered in to operational and project agreements with the relevant government authorities. Rolled out the SAFE project in North Shewa, one of the Oromia zone with highest trachoma burden. 10 TT surgeons trained and deployed to conduct both facility based and outreach surgeries. MDA also conducted in the same zone, targeting about one million people.
- **Focus on Vision:** Started negotiations with local NGO's in Ethiopia who have shown interest to distribute it's adjustable spectacles (the Focusspec®) thereby emphasizing the need for training local people in basic eye care. Focus on Vision Foundation operates in areas where the traditional/professional eye care cannot be found.
- **VAO:** Awarded 3 year GPAF grant by DfID. VAO has begun a three year programme in Ethiopia funded by DfID's Global Poverty Action Fund. The programme will target over 89,000 individuals, many of which live below the poverty line and have never had access to eye care before.
- **VAO** assisted in the establishment of the Ethiopian Optometry Association and provided sponsorship for their inaugural conference. The creation of the EOA will help to legitimise the profession in Ethiopia and provide a support base for all optometrists
- **Light for the World:** Planning of a pilot project on School Eye Health in Ethiopia, aligned to the new National School health and Nutrition Strategy

4.5 RWANDA

- **CBM:** Kabgayi Eye Unit which undertakes over 75% of all eye surgeries in Rwanda received recognition by the Ministry of Health (MoH) as a sub-specialisation unit for paediatrics and vitreo-retinal surgery. The Unit is supported by CBM. MMed training for Rwandese doctor in Ophthalmology at KCMC, completion 2017 and on completion to return to Kabgayi.

- **FHF:** Successfully lobbied the MoH to introduce eye care indicators in the national HMIS system used in all 400+ Primary Health Centers and all 42 secondary District Hospitals. This was achieved in December 2013 and will now allow for a reliable national database of eye care services uptake figures, updated monthly. Referral-level facilities will be targeted for inclusion next.

4.6 ERITREA:

- **FHF:** Berhan Eyni, National Referral Hospital for Eye Health, construction works funded by FHF were finalised and the facilities reopened to patients in January 2014. Also funded cataract surgery training course students currently being training by the College of Asmara of Health sciences started a 4-month clinical internship last quarter of 2013 for 1st group, followed by the 2nd group from February 2014, which will allow them to rotate within four eye units to get sufficient surgical and practical exposure before graduation.
- **FHF:** Trachoma project supported MDA training for community health workers, sensitisation of the community, and the distribution of the 3rd round of MDA in 7 trachoma endemic districts. Dr Courtright from KCCO visited Asmara in October 2013, on behalf of ITI, for trachoma planning and monitoring.

4.7 BURUNDI

- The Minister of Health nominated by Decree the latest National Committee for Blindness Prevention tasked with the development of a National BP Plan. The Committee is chaired by the MoH and includes all actors active in eye health and blindness prevention in the country, including representatives from WHO, CBM, FHF, Emmanuel Church, The Lion's Club, as well as the commercial Eye Health providers and the Professional Association.

4.8 UGANDA:

- **Light for the World and BHVI** Upscale of the work on uncorrected refractive errors: 'National Intervention on Uncorrected Refractive Errors Programme in Uganda' (Impact Evaluation, Phase II including start of training of Optometrists in September 2014)

5. KEY OPPORTUNITIES

5.1 ETHIOPIA:

- **ORBIS** has been appointed National Coordinator for Ethiopia during the DFID Trachoma tender process. It is expected that a contract will be signed over the next few months and the ORBIS Ethiopia team will then lead a three month planning phase involving four other NGOs. This initiative will strengthen comprehensive rural eye health services in the country.

5.2 RWANDA

- **CBM** Central Africa noted as a key opportunity the understanding of disability inclusive development and in particular inclusive eye care practice training to community health workers.
- **FHF:** A new Bill to restructure the health system will develop and decentralize further clinical and surgical specialist services in a bid to increase their accessibility while keeping costs within National Health Insurance paying capacity at the point of delivery. Seven District hospitals will be upgraded into 4 Provincial Hospitals and 3 Referral Hospitals. The new hospitals will deploy permanent ophthalmic clinical and surgical specialist services (currently not available anywhere except in Kigali city and in the Referral-level Kabgayi Eye Unit). The Referral facilities are meant to eventually develop sub-specialty capability.
- **FHF** In January 2014 The Foundation offered to the Minister of Health the investment in HReH to train the ophthalmologists and mid-level ophthalmic personnel, and the accompanying investment to enable the MoH to realize its plan to multiply its points of delivery of clinical and surgical Eye Care services.

5.3 ERITREA:

- **FHF:** 13 cataract surgeons will graduate in July 2014 and will be upgraded in SICS technique before being posted within the eye care system
- **FHF** In 2014 the Foundation will fund an assessment of 7 districts, to assess the impact of the FHF supported trachoma activities.

5.4 BURUNDI:

- FHF is developing a program partnership with the Clinique du l'Oeil, a private eye care service provider active in Bujumbura and in six rural provinces. The purpose is to expand access to, and availability of eye care services, including RE and surgical, to four more provinces in 2014. These remote eastern provinces, alongside the border with Tanzania, have never been properly served and are said to possess an abundance of bilaterals. The Clinique du l'Oeil is the largest provider of eye care services in Burundi.

5.5 KENYA:

- **BHVI:** In May 2014, the Institute will be launching a Low Vision and Paediatric optometric short course and Masinde Muliro University of Science and Technology Kenya.
- **OEU:** Awarded the SIBIF in Kenya. Name of Project: Piloting the portable eye examination kit (PEEK) – Can smartphone vision screening increase the pick-up rate of children with visual impairment in schools ?
- **FHF** sees the new devolved government structures as key to the uptake and sustainability of eye health services in the country. The Project boldly recognizes the constitutional change in the government structure and their respective and evolving roles. Health services having been fully devolved to the 47 autonomous counties with attendant budgets, they are mandated to ensure efficient delivery of social services in their respective counties. To this end, FHF has purposefully started to engage and advocate to the various arms of government, including the private sector towards increased support and resource allocation for eye health services, key to projects' sustainability.
- **FHF:** The Ministry of Health recognizes that the human resources for health are a critical ingredient in the delivery of services to improve health outcomes. MoH have mandated their Human Resource Development (HRD) units with the strategic responsibility of training and developing the health service providers for the benefit of the sector. The key functions of the units are to develop a HRH plan for MOH and to coordinate training and stakeholders involved in training within the health sector.

6. SOUTHERN AFRICA - Significant Achievements

- **CBM:** Institutional capacity building of CBM partners in Southern Africa through cost recovery through the introduction of cost-recovery systems in service provision as well as through the adoption of ‘income cross-subsidization’ (wealthy patients’ fees subsidizing services to poor patients) is moving forward. Through peer-to-peer support targeted visits as well as *ad hoc* capacity building interventions, the revenues generated by all CBM-supported eye units in Southern Africa are growing constantly thus decreasing their degree of financial dependency on external donors’ support.
- **CBM:** Involvement in CEHI ‘Management Essentials for Success in V2020’: A one-week management course for Managers, Coordinators as well as students enrolled in the Post-Graduate Diploma in Community Eye Health was held in October 2013 at the UCT Community Eye Health Institute. This new training module – the first of its kind offered by the UCT/CEHI was designed jointly by CBM and CEHI in order to strengthen capacity on critical management disciplines that have proven to contribute meaningfully to institutional capacity building. The course was attended by participants from Francophone countries and NGO Managers and Hospital Directors from Anglophone Southern Africa .

6.1 COUNTRIES

6.2 BOTSWANA:

- **BOTSWANA OPTOMETRIC ASSOCIATION:** with assistance and advise from African Council of Optometry (AFCO) is working on with the refresher course for Degree Optoms. to expand their scope to therapeutics and Diploma Optometrists to upgrade themselves for acquiring a Degree.

6.3 ZIMBABWE:

- **CBM** Southern Africa reported on the successful mobilization of funds toward V2020 in Zimbabwe: In the second half of 2013, CBM was successful in mobilizing a considerable amount of funding from the German Ministry of Development Cooperation toward the strengthening of V2020 services in the Zimbabwean Province of Mashonaland East (construction of a dedicated OPD,

strengthening of eye services at primary and secondary level as well as setting up a provincial patients' referral system).

- **CBM:** A second grant was secured by CBM from the Foundation of a German Private Television Network for the establishment of the second Paediatric Tertiary Unit at United Bulawayo Hospitals (construction, equipment, training, referral and school screenings) in the South of the country in line with the newly developed Zimbabwe National Eye Health Strategy.

7. SOUTHERN AFRICA - Key Opportunities

7.1 SWAZILAND:

- Re-vitalization of V2020 in Swaziland. Through **CBM** partner in Swaziland, the MoH has requested CBM to provide guidance and leadership on the re-vitalization of the National V2020 Committee. CBM gladly accepted to facilitate the stakeholders' meeting that will take place in 2014 with the aim to support the development of a new National Eye Health Plan for Swaziland that will hopefully guide all the future developments in the field of eye care in the country.

7.2 ZIMBABWE:

- Standard Chartered Bank 'Seeing is Believing' grant for Zimbabwe: **CBM** has been notified that the Expression of Interest on the Standard Chartered Bank 'SiB' grant for Zimbabwe has been finally approved and we were requested to move to the next stage of planning. If successful, this grant will complement the considerable financial investments that CBM is allocating to the Zimbabwean Eye Health system and the finalities of the grant will be to support the strengthening of V2020 Provincial Programmes in two more provinces (Manicaland and Mashonaland West). At the same time, part of the grant will also be used to support the strengthening of Paediatric Services at Sekuru Kaguvi Hospital in Harare so to ensure national coverage as far as Paediatric Ophthalmology is concerned.

7.3 ZAMBIA:

- **Ensuring sustainable eye care in Zambia.** VAO is extending their programme in Zambia for a further three years. Establishing a 'Centre of Excellence' Vision Centre and providing continued education for OCOs, ONs and OTs, VAO are ensuring sustainability of eye care services in Zambia.

8. WEST AFRICA - Significant Achievements

- Nadi al Bassar: 2138 cataract operations with IOLs small incision were performed and 2500 patients were seen within the West Africa subregion. Countries included: Burkina Faso, Libya, and Cameroon. The number of interventions per country can be found below listed under each country.
- Nadi al Bassar also noted participation in the Congress of the West African Society of Ophthalmology that took place 4th to 7th November, The 8th Congress of the Ivorian Society of Ophthalmology "Diabetic Retinopathy" in Abidjan, Ivory Coast . The speakers of Nadi Al Bassar encouraged the Ivorian and the West African Society of Ophthalmology to include the Diabetic Retinopathy to their scientific program.
- CBM West Africa reported that 11 candidates were admitted for DO-training at DESSO, highest number ever. Candidates are from Cote d'Ivoire, Benin, Niger, Mali and Guinea. Eye Clinic and resource centre did not need external funding in 2013.

8.1 GHANA

- **Perkins:** USAID All Children Reading Project. funded by USAID, is a two-year initiative that aims to promote reading education for children who are blind or have low vision in the Brong Ahafo, Volta and Central Regions of Ghana. A total of 1248 children were screened and 110 students were identified to have low vision or blindness. Five children received surgery, others were provided eye medication, and 97 teachers were trained in learning media and vision assessment.
- **Himalaya Cataract Project:** February 2014, inauguration of 27,000 sq.ft. Eye Surgery Training Centre, Komfo Anokye Teaching Hospital. Ceremony preceded

by a 4-day cataract & cornea surgical workshop (160 cataract surgeries, 6 cornea transplants) & conference of surgeons.

- **ORBIS:** ORBIS began implementation of a new programme in Ghana in January 2014. The initial project focuses on strengthening child eye health services at Komfo Anokye Teaching Hospital, Kumasi. The first phase of this project will include human resources development, equipment procurement, research and advocacy.
- **Focus on Vision** Foundation has distributed so far some 3000 adjustable spectacles in Ghana (the Focusspec®) among cocoa farmers (daily income averages 1-3 Euros) and funds have been raised to continue the program for another 2000. The program includes training local people in basic eye care.
- **CBM** West Africa reported the extension of Korle Bo in Ghana may be completed during first half of 2014. The potential of trainings in sub-specialities for candidates from francophone countries is to be explored.

8.2 MALI

- **BHVI:** At IOTA seven students graduated as optometrists in October 2013

8.3 LIBERIA

- A successful celebration of World Sight and White Cane Safety Days in collaboration with partners.
- Development of Eye health program monitoring and evaluation system and provision of community outreaches-primary and secondary services

8.4 BURKINA FASO

- **VAO** Vision Centre installed at Ougadougou: Vision Aid Overseas has further increased access to eye care in Burkina Faso by establishing a second Vision Centre in the country. Following the installation in Koudougou, a further VC was established earlier this year in the country's capital Ougadougou.

Nadi al Basaar reported the following interventions:

Date	Place	Number of Interventions
5-14 January	Gourcy	291
4-10 May	Ouagadougou	375
10-19 June	Kongoussi	234
24-30 November	Ouagadougou	454

8.5 COTE D'IVOIRE

- **CBM West Africa** has received approval for the Seeing is Believing grant phase V.

8.6 TOGO

- **CBM West Africa** reported that a National multi-year Child Eye Care Programme has started.
- **The Swiss Red Cross (SRC)** reported that technical, material and financial support has been provided to the MoH for avoidable blindness, in Central Region since 2003. Major achievements for the current reporting period include: Cataract surgery: 153 persons operated , Refractive errors among schoolchildren: 136 cases were detected and 124 were corrected (prescription of glasses) in 38 primary schools, 2014 action planning based on sustainability.
- **CBM West Africa** reported that a new National eye care plan will be developed in 2014.
- **The Swiss Red Cross (SRC)** reported that the two key opportunities on the immediate horizon include: Renewal of equipment provided with funding from the Swiss Red Cross; Contribute to the achievement of RAAB study in Togo.

9. WEST AFRICA – Key Opportunities

9.1 GHANA

- **OEU:** OEU Launched the SIB Phase V in ACCRA in September 2014. The Name of the project is Quality Eye Health for All. This program is initiated by Operation Eyesight Universal in order to improve the overall eye health of

women, men, girls and boys in Ghana. We aim to do this through the integration of primary eye care into primary health care in all 10 regions of Ghana

- **OEU:** Will conduct RAABs in the 3 ecological zones of Ghana in partnership with the Swiss Red Cross

9.2 LIBERIA

Inclusion of eye health program in the 10 year National Health plan and policy.

Willingness of partners to support Ministry of Health & Social Welfare establish eye health training program

10. CENTRAL AFRICA – Key Achievements

10.1 DEMOCRATIC REPUBLIC OF CONGO:

- Inclusive eye care practice and disability inclusive development workshop was given to all **CBM** supported ophthalmologists in central Africa. This has generated a great deal of interest into not just physical barriers but also how to overcome attitudinal barriers towards persons with disabilities and, how to ensure that eye units are providing accessible services.
- CBM Central Africa noted the review of the training institute (management, faculty and curriculum) for mid-level eye care workers: CFOAC.

10.2 CENTRAL AFRICAN REPUBLIC (CAR):

- **CBM Central Africa** reported that despite the unrest in CAR, the distribution through MoH workers of Ivermectin is continuing.

10.3 CAMEROON

Nadi al Basaar reported the following interventions:		
Date	Place	Number of Interventions
29 June – 7 July	Yaoundé	303
14-22 December	Douala	281



- **CBM Central Africa** noted the support by Dr Ngounou from Bafoussam Eye Hospital to the development of the next National Plan for Eye Care
- **CBM Central Africa** round table discussion with eye care service providers on the development of the Magrahbi Eye Institute just outside Yaounde.
- **IEF:** Oncho control

APPENDIX 1: THE IAPB AFRICA FOOTPRINT

15%Rank.	Country	UNDP	Population		Total
APHI		HDI	UN 2011	IAPB Members Active	
1	Rwanda	167	10 943 000	CBM, FHF, HKI, KCCO, LftW, RtS,	6
2	Botswana	119	2 031 000	AA, VAO	2
3	Niger	187	16 069 000	CBM, HKI, ITI, OPC, SSI	5
4	Malawi	170	15 381 000	BHVI, CBM, ITI, KCCO, LAN, RTS, SSI, Perkins	8
5	Zambia	163	13 475 000	CBM, ITI, KCCO, OEU, ORBIS,SS, VAO	7
6	Burkina Faso	183	16 968 000	CBM, HKI, ITI, LftW, NaB, OPC, SSI, VAO, Perkins	9
7	Gabon	106	1 534 000		
8	Chad	184	11 525 000	CBM, OPC, SSI	3
9	Tanzania	152	46 218 000	BHVI, CBM, FoV, HKI, ITI, KCCO, LftW, SSI, Perkins	9
10	Mozambique	185	23 930 000	BHVI, HKI, LftW, NAB/P, SSI, UdM, Perkins	7
11	Mali	182	15 840 000	BHVI, CBF, HKI, ITI, OPC, SSI, UdM,	7
12	Senegal	154	12 768 000	HKI, ITI, OPC, SSI	4
13	The Gambia	165	1 776 000	BHVI, CBF, HKI, SSI	4
14	Swaziland	141	1 203 000	CBM	1
15	Cape Verde	132	501 000		
16	C.A.R	180	4 487 000	CBM, OPC	2
17	Benin	166	9 100 000	CBM, SSI	2
18	Namibia	128	2 324 000	CBF	1
19	Sao Tome	144	169 000		
20	Ethiopia	173	84 734 000	BHVI, CB, CBM, FHF, HCF, ITI, KCCO, LftW, ORBIS, RtS, VAO	11
21	Liberia	174	4 129 000	HKI, SSI	2
22	Kenya	145	41 610 000	BHVI, CB, CBF, CBM, FHF, FoV, HCF, HKI, ITI, OEU, RtS, SSI, Perkins	13
23	Mauritius	80	1 307 000		
24	Madagascar	151	21 315 000	CBM, KCCO	2
25	South Africa	121	50 460 000	AVRI, BHVI, CBM, CBF, FHF, FoV, ORBIS, RtS, SANCB, Perkins	10
26	Uganda	161	34 509 000	AVRI, BHVI, CBM, ITI, KCCO, LAN, LftW, ORBIS, SSI, Perkins	10
27	Zimbabwe	172	12 754 000	BHVI, CBM, SSI,	3
28	Seychelles	46	87 000		
29	Comoros	169	754 000	OPC	1
30	Lesotho	158	2 194 000	CBM, NAB/P	2
31	Sierra Leone	177	5 997 000	CBM, SSI, VAO, Perkins	4
32	Eq. Guinea	136	720 000		
33	Cameroon	150	20 030 000	BHVI, CBM, HKI, IEF, ITI, ORBIS, RtS, SSI, NaB	9
34	D.R.C	186	67 758 000	CBM, HKI, LftW, RtS, SSI	5
35	Togo	159	6 155 000	CBM, LftW, SRC, SSI	4
36	Congo	142	4 140 000		
37	Angola	148	19 618 000	CBM, RtS, NAB/P	3
38	Guinea	178	10 222 000	CBM, HKI, OPC, SSI	4
39	Ghana	135	24 966 000	AVRI, BHVI, CB, CBM, FoV, HCF, IEF, OEU, ORBIS, RtS, SRC, SSI, VAO, Perkins	14
40	Cote d'Ivoire	168	20 153 000	CBM, HKI, SSI	3
41	Eritrea	181	5 415 000	BHVI, CBM FHF, ITI, KCCO	5
42	Guinea Bissau	176	1 547 000	HKI, ITI, SSI	3
43	Nigeria	153	162 471 000	AVRI, BHVI, CBM, IEF, HCF, HKI, ITI, LftW, SSI, TCF, Perkins	11
44	Burundi	178	8 575 000	CBM, FHF, KCCO, LftW, ITI	5
45	South Sudan		10 000 000	CB, CBM, HCF, ITI, LftW, RtS, SSI	7
	Total		827 862 000		

NB: IAPB Africa does not include Mauritania, Sudan, Somalia or Djibouti.

1	AA	Addenbrookes Abroad	15	NaB	Nadi Al Basaar
2	AVRI	African Vision Research Institute	16	NAB/P	Norwegian Association of the Blind
3	BHVI	Brien Holden Vision Institute	17	OEU	Operation Eyesight Universal
4	CBM	Christian Blind Mission	18	OPC	Organisation pour le Prevention de la Cecite
5	CBI	Combat Blindness International	19	ORBIS	
6	FHF	Fred Hollows Foundation	20	RtS	Right to Sight
7	FoV	Focus on Vision	21	SANCB	South African National Council for the Blind
8	HKI	Helen Keller International	22	SRC	Swiss Red Cross
9	HCF	Himalaya Cataract Foundation/ CB Cure Blindness	23	SSI	Sightsavers
10	IEF	International Eye Foundation	24	TCF	Tulsi Chanrai Foundation
11	ITI	International Trachoma Initiative	25	UdM	Eyes of the World Foundation
12	KCCO	Kilimanjaro Centre for Community Ophthalmology	26	VAO	Vision Aid Overseas
13	LAN	Lions Aid Norway	27	Perkins	Hilton Perkins Foundation
14	LftW	Light for the World			