Impact made by the project

From 2015 to 2017, Helen Keller International (HKI) in collaboration with the Prevention of Blindness Program of the Ministry of Health and Sports, Myanmar successfully established a model for primary eye care consisting of trained basic health staff (BHS) conducting outreach activities, Secondary Eye Centers (SECs) providing quality cataract surgical services and a demand creation strategy for cataract surgical services in place which has been integrated into the township health system in 12 townships in the dry zone of Myanmar. The project directly supported over 22,000 cataract operations and over 171,000 screenings.

Sustainability

A critical milestone was reached in launching of Myanmar’s first National Eye Care Plan, which incorporates many aspects of CARROT’s approach to roll out primary eye care (PEC) through the wider health system.

The process of working with government to develop the capacity of basic health staff (BHS) to provide PEC is a key aspect of sustainability. In CARROT townships, PEC training was given to all BHS, increasing eye health awareness and capacity. This is essential to establishing sustainable eye health services embedded within the health care system. Trained BHS and volunteers are now supporting eye health as part of their routine responsibilities, including early referral and post-operative care for eye patients. These activities will continue long after the CARROT project has ended.

Main objectives for the project

- Improve access to primary eye care among the poor in 12 target townships
- Improve the quality of cataract surgery in 12 target townships in the dry zone
- Increase the capacity of Secondary Eye Centers (SECs), Rural Health Centers (RHCs) and village health workers (VHWs) to deliver community-based primary eye care services in the target townships.
- Develop, test and refine a demand creation strategy for replication.
Local Standard Chartered engagement
SCB staff were involved in CARROT’s launching event in Naypyitaw in 2015 which was attended and inaugurated by the Deputy Minister for Health and Sports. SCB staff also conducted a field visit to Pakokku SEC and Nyaung Oo township in during the first quarter of 2016.

Strengthening & integrating quality eye care services in the township health system

<table>
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<tr>
<th>SiB contributed towards...</th>
<th>Leading to...</th>
<th>Therefore impacting...</th>
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<tbody>
<tr>
<td>1,183 primary health care workers (BHS) and 3,571 volunteers were trained in PEC in CARROT townships.</td>
<td>Primary health care workers (BHS) in collaboration with volunteers provided outreach PEC services to 171,557 people.</td>
<td>Patients with eye problems have access to PEC and screening for cataract. Referrals for cataract surgery have increased.</td>
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<tr>
<td>12,500 IOLs, 9,260 Gel packets, 547 boxes of sutures and 8,900 vials of tobradex eye drops were provided to 10 SECs.</td>
<td>10 Secondary Eye Centers are adequately equipped to provide cataract surgical services.</td>
<td>Secondary Eye Centers offer sustainable cataract surgical services making them more accessible to poor rural communities.</td>
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<tr>
<td>10 ophthalmologists from 10 CARROT project SECs were began a manual system for monitoring cataract surgical outcomes.</td>
<td>Surgeons and government programs are aware of the quality of services provided and can make changes where needed.</td>
<td>Outcomes for patients improve and the government is interested in further scale up of this system for accountability.</td>
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### Increasing community access to eye care / cataract surgical services

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<td>Development of IEC materials including a cartoon telecast nationwide on free-to-air government TV channel.</td>
<td>Information about cataract was shared nationwide.</td>
<td>Increased awareness about cataract and the services available from government clinics, contributing to increased cataract surgical uptake.</td>
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<tr>
<td>22,426 cataract surgeries were supported at 10 SECs.</td>
<td>People from the villages in 12 CARROT townships have access and actively seeking cataract surgical services.</td>
<td>Avoidable blindness prevented so patients can lead productive lives and the burden to communities is reduced.</td>
</tr>
<tr>
<td>34,394 people were screened for cataract and eye diseases at the village level during ophthalmologists’ outreach visits.</td>
<td>People with cataract and other eye diseases were referred for treatment and cataract surgery in a timely manner.</td>
<td>Treatment was accessed, preventing avoidable blindness.</td>
</tr>
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Key achievement
A model on community-based outreach PEC that incorporates quality cataract services at the Secondary Eye Centers has been established and incorporated into the township health system that can be replicated and scaled up.

SiB Project
Implementing partner: Helen Keller International (HKI)
Total Budget: USD 766,688
SiB contribution: USD 594,163
Project Duration: 2015 – 2018 March
Location: 12 townships in Mandalay, Magway and Sagaing Regions

Situation analysis
Myanmar has one of the highest blindness prevalence rates in the world with 8.1% blindness among adults over 50 years of age in some rural areas.

The major contributing causes of blindness are: cataracts (64%), glaucoma (17%), trachoma (4%) and other causes (15%). Myanmar has 40.4% low vision in rural areas of which 70% is due to cataracts.

Gender perspectives
During the project cycle, HKI has consistently found that more women than men are seeking cataract surgery. This may be because health information is provided through BHS, who themselves are primarily women i.e. midwives and the midwives typically visit villages during the day when men are working in the fields and thus unavailable for information sessions. In future projects, there will be a need to look at other avenues of awareness raising which will be more accessible and credible to men, like including monks, who are trusted sources of information in most rural communities. However, with the cartoon video animation which has been distributed to SECs and through the SECs to local village video houses which men tend to frequent more often, it is expected that male awareness will continue to increase.