# Summary report on the

# Regional VISION 2020 planning workshop for the prevention of avoidable blindness

Cairo, Egypt 23–26 November 2008





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# 1. Introduction

The World Health Organization (WHO) Regional Office for the Eastern Mediterranean (EMRO) held a regional VISION 2020 planning workshop for the prevention of avoidable blindness in Cairo, Egypt, on 23–26 November 2008. The main aim of the workshop was to intensify the efforts made by Member States, secretariat and international partners working in the prevention of blindness and visual impairment through the development of national and district comprehensive eye care programme. The specific objectives were to:

- Review the current status of prevention of blindness activities under VISION 2020 global initiative for the past five years (2004–2008) in the Eastern Mediterranean Region;
- Review the implementation process in relation to the recommendations of the Regional VISION 2020 Planning Workshop, which is held in WHO/EMRO, Cairo, 14–17 December 2003;
- Review the progress and identify the gaps and limitations in implementing national VISION 2020 plans;
- Develop guidelines for partnership development between Member States and other stakeholders for scaling up VISION 2020;
- Identify the priorities for prevention of blindness programme for the Region for the next five years (2009–2013);
- Identify areas for operational research for eye care and possible networking of centres interested in this field; and
- Develop an action plan for establishing school screening programme for early detection of refractive errors in the Region.

The workshop was attended by national coordinators of eye care and VISION 2020, representatives from ministries of health of 19 Member States in the Region, representatives of WHO collaborating centres for prevention of blindness, representatives of nongovernmental organizations, international organizations and societies along with WHO staff from headquarters, the Regional Office and the country office in

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Afghanistan. Five Temporary Advisers were also appointed to facilitate the workshop and provide technical input.

The workshop opened with a message from Dr Hussein A Gezairy, WHO Regional Director for the Eastern Mediterranean, who stated that although progress had been made since the last meeting in 2003, there was an unfinished agenda of eliminating avoidable blindness such as from cataract, uncorrected refractive errors in nearly all countries and trachoma in some countries. As well, there were emerging problems such as diabetes, glaucoma and macular degeneration which were also threats to sight. These required expensive and complex solutions, which needed to be addressed in a public health context. Dr Gezairy paid tribute to the valuable contribution made by HRH Prince Abdulaziz bin Ahmed bin Abdulaziz Al-Saud. Chairman. IMPACT-EMR and spearheading the global advocacy campaign, which had led to the adoption of two Health Assembly resolutions in 2003 and 2006, respectively. The Regional Director conveyed his sincerest thanks and appreciation to all partners for their support and contribution to the workshop namely: IMPACT-EMR, IAPB-EMR, London School of Hygiene and Tropical Medicine (LSHTM), Christoffel Blindenmission (CBM), Sightsavers International and ORBIS International.

Dr Manal Bouhaimed (Kuwait) and Dr Babar Qureshi (Pakistan) were elected as Chair and Co Chair, respectively. Dr Rajiv Khandekar (Oman), Dr Mohammad Muhit (United Kingdom) and Dr Shariq Masood (Saudi Arabia) served as Rapporteurs.

# 2. Summary of discussions

It is now nine years since the launch of the global joint WHO/IAPB initiative, Vision 2020: The Right to Sight, to eliminate avoidable blindness by the year 2020. During the past 9years, global significant progress has been made to reduce avoidable blindness in Member States

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through advocacy, disease control, human resource development and infrastructure and technology development for eye care.

However, elimination of avoidable blindness remains a challenge due to the high prevalence of eye diseases such as cataract, trachoma, childhood blindness, glaucoma and diabetic retinopathy. Despite the availability of WHO information on the magnitude and causes of blindness and strategies for their prevention, policy-makers and health providers in many countries are evidently not fully aware of available eye-care interventions, their cost-effectiveness and their potential to prevent or treat 80% of avoidable blindness.

Country Cooperation Strategies reflect the agreed joint agenda between ministries of health and WHO. So far, the inclusion of eye health and prevention of blindness is minimal, despite two resolutions adopted by Member States at the Health Assembly (WHA56.26 and WHA59.25) on the elimination of avoidable blindness. Lack of adequate resources for eye care and prevention of blindness at country level is a major impediment.

Several workshops were held to achieve service delivery, human resource development, monitoring mechanisms and to ensure availability of the required supplies and equipment, among them, the Regional VISION 2020 Planning Workshop was organized by WHO/EMRO, 14–17 December 2003 to plan the implementation of prevention of blindness under VISION 2020 initiative in the Region.

Participants presented country reports in plenary session followed by group work and discussion, addressing also priority issues already highlighted at a preliminary planning meeting during the IAPB 8th General Assembly, Buenos Aires, Argentina, 25–28 August 20008.

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Participants focused on priority issues such as coordination, collaboration, integration and strengthening eye care within the primary health care system (public education), access to eye care facilities, gender, human resources development at all levels of eye care (leadership, management), audit services, quality of services, patient satisfaction, generating resources and sustainability, research and development. These issues were also discussed and incorporated in the draft prevention of blindness action plan of the 124th session of the Executive Board Meeting of WHO, Geneva, 19–27 January 2009.

Participants actively discussed issues and contributed in proposing future pathways to follow and attain objectives.

- The ultimate goal of prevention of blindness under the Vision 2020 initiative is to establish a sustainable and equitable comprehensive eye care system as an integral part of the national health system based on the principles of primary health care.
- Although some countries have made significant progress in implementing prevention of blindness activities under Vision 2020, some other countries seem to be lagging behind.
- Advocacy for Vision 2020 has increased awareness among policymakers, professionals, civil society and the public, which needs to be sustained.
- Gender inequity is still a concern in eye care utilization and Member States should generate evidence-based information and the necessary interventions to address this challenge.
- WHO information on health systems, primary health care, social determinants of health has been of great relevance to National Coordinators' task of scaling up and enhancing implementation of prevention of blindness and improving eye health.
- Human resource development, especially mid-level eye care personnel and resources for managerial aspects of eye health, are needed urgently in most countries.

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- The research initiatives within the framework of eye care and Vision 2020 programmes are lacking in most countries.
- There is a smooth running in the prevention of blindness programme in countries, where there is an implementation unit for eye health / prevention of blindness.
- Sustainability of eye health and prevention of blindness is a challenge. There are some successful public–private partnership models in Member States, providing an opportunity for replication in sustainable development of eye care under VISION 2020.
- Linkage and integration of eye care with other health and development initiatives including the Millennium Development Goals, neglected tropical diseases, noncommunicable diseases, poverty alleviation, gender and blindness, and Integrated Management of Child Health, would help in addressing underlying causes of avoidable blindness.
- Better collaboration and coordination among countries of the Region would enable them to share experiences, expertise and resources to strengthen eye care under the Vision 2020 initiative in the Region.
- Monitoring of the eye care and prevention of blindness plan at national and subnational levels is crucial and is urgently needed. The Health Assembly resolutions urged all Member States to prepare progress reports based on selected indicators.
- "Prevention of Blindness" has been traditionally used to describe efforts to control, reduce and eliminate, where feasible, ocular morbidity and ensuing vision loss. It was felt however, that the term may convey a negative meaning. Hence wherever possible the term 'eye health' should be used instead of 'prevention of blindness' or together with it to emphasize the positive aspects of good eye health.

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# 3. Recommendations

1. Strengthen advocacy to increase political, financial and technical commitment in Member States to address avoidable blindness and visual impairment.

# Member States

- 1.1 Promote and integrate eye health in the national health agenda. Include eye health in all levels of health plans of ministries of health and in Country Cooperation Strategies (CCS), with a focus on the development of comprehensive eye care at the district level.
- 1.2 Allocate the resources necessary for eye health and prevention of blindness.
- 1.3 Promote eye health and prevention of blindness under VISION 2020. Ensure World Sight Day (celebrated annually on the second Thursday of October) is observed both at national and subnational levels annually.

# **WHO**

- 1.4 Raise the awareness of policy-makers on the relationship between eye diseases, gender, poverty and development using evidence-based information.
- 2. Develop and strengthen national policies, plans and programmes for eye health/ prevention of blindness and visual impairment.

## Member States

2.1 Revitalize national eye health/prevention of blindness under Vision 2020 programme implementation in countries, which are lagging behind. To this end, a review of existing national plans, if any, and a refining of these plans need to be

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- undertaken, by the National Eye Health Committee, as soon as possible.
- 2.2 Align policies and plans for eye health with other recent and relevant WHO initiatives addressing the issues of gender and poverty reduction as well as recent documents on health systems, primary health care and social determinants of health etc.
- 2.3 Engage in technical cooperation with other Member States in the Region, especially with developing countries. Member States that would greatly benefit from such collaboration include, among others, Afghanistan, Djibouti, Iraq, Palestine, Somalia, Sudan and Yemen.
- 2.4 Give special emphasis to the cadre of developing mid-level eye care personnel and their place in teamwork. This should be also be incorporated in the plans for scaling up human resources for eye health.
- 2.5 Establish a functioning unit for eye health/prevention of blindness at the national and subnational levels under the supervision of a national coordinator.
- 2.6 Rename the National Prevention of Blindness Committee as the National Eye Health committee.
- 2.7 In countries with established school health system, integrate vision screening with the school health programme.
- 2.8 Include rehabilitation for the visually impaired and blind as an integral part of eye health, prevention of blindness and comprehensive eye care.

# WHO

- 2.9 Strengthen the capacity of the regional and country offices to provide technical support for eye health / prevention of blindness programme.
- 3. Monitor the progress of the elimination of avoidable blindness at the national and regional level.

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## Member States

- 3.1 Strengthen eye health data collection and surveillance system as an integral part of the health management information system.
- 3.2 Monitor progress using a minimum number of vital indicators and provide regular reports.
- 3.3 Generate data on childhood blindness separately.

## WHO

- 3.4 Review data input and monitor the progress in collaboration with stakeholders and all partners.
- 3.5 Update indicators for the prevention of blindness and visual impairment.
- 4. Increase and expand research for the prevention of blindness and visual impairment.

## Member States

- 4.1 Include operational research as part of programme management, with an emphasis on the role of gender, economic impact, poverty and other eye care emerging issues.
- 4.2 Develop evidence-based information on causes of blindness and their impact on the implementation of blindness programme by conducting Rapid Assessment of Avoidable Blindness (RAAB) methodology on priority blinding eye diseases.

## WHO

- 4.3 Encourage operational research and support Member States and collaborating centres in assessing the impact of public health policies and strategies of eye health and sharing the results.
- 5. Improve coordination among partners and stakeholders at national, regional and international level for the prevention of blindness and visual impairment.

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# Member States

- 5.1 Develop and strengthen public–private partnerships at national and subnational level.
- 5.2 Ensure sustainability of eye care and prevention of blindness programmes in Member States and collaborate closely with all partners working in eye care.

## WHO

strengthen partnership role WHO 5.3 Support and the of collaborating centres and link their work plan with implementation of the plan.

## Partners

5.4 Collaborate closely with Member States and the WHO secretariat in implementing national plans for comprehensive eye care and prevention of blindness.