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Côte d'Ivoire

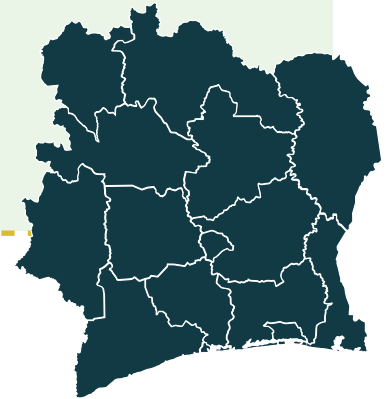
5-Year Action Plan of the Alliance to Fight
Avoidable Blindness 2nd Generation

Elaborated
with the technical
support of



Why is the Need so Urgent?

The Alliance to Fight Avoidable Blindness (AFAB) is a partnership program launched by the Islamic Development Bank (IsDB) in 2008, with the aim of using South-South partnerships to prevent and cure vision problems, giving people not just the gift of sight, but a path out of poverty. The first generation had a tremendous success with thousands of people having their vision restored through successful cataract surgery. This second generation (AFAB II) ramps up the scale, targeting more eye conditions, building capacity in more countries. AFAB II is led by the IsDB and the Islamic Solidarity Fund for Development (ISFD).



Some Alarming Eye Health Facts from Côte d'Ivoire



The **PREVALENCE OF GLAUCOMA** is **13.78%**, and access to glaucoma services are very limited.



The **CATARACT SURGICAL RATE IS 136 PER MILLION INHABITANTS**, among the lowest in Africa.

The **NEED FOR CATARACT SURGERY** is estimated to be **42,500 CASES** per year.



The **PREVALENCE OF REFRACTIVE ERROR** in school age children is estimated to be **11%**, yet more research is still needed.



As rates of **DIABETES RISE** more people are at risk of vision loss due to **DIABETIC RETINOPATHY**.

There is **LIMITED CAPACITY TO SCREEN** and treat diabetic retinopathy.

The Opportunity

The Ivorian Government established a National Eye Health Program (PNSO) within the Ministry of Health and Public Hygiene that is taking tangible steps to expand access to eye care services as an integral part of health care by implementing universal health coverage across the country.

However, the country faces major challenges in improving access to care. There are insufficient numbers of ophthalmologists and ophthalmic

nurses to address Côte d'Ivoire's eye health needs. There are enormous disparities in the distribution of human resources between rural and urban communities, with close to 70% of them practicing in the capital, Abidjan. In addition, less than 30% of practicing ophthalmologists are able to provide surgical care. The AFAB II program has the opportunity to play a vital role in addressing these critical human resources gaps and improving eye health access in medically underserved communities.

Our vision is crystal clear: no Ivorian will become blind as a result of a preventable or curable cause.

Did you know that around 425,000 people in Côte d'Ivoire suffer from cataract blindness and only 30% of ophthalmologists have the necessary training and skills to perform cataract surgery?

Did you know that approximately one million children have uncorrected refractive errors and

that a comprehensive school eye health program could improve their academic achievement, social integration, and long-term prospects, and the economic productivity of an entire nation?

We feel the need to act now!

Taking a System-Strengthening Approach

To stimulate lasting change for individuals and future generations, we believe that we must look beyond visible symptoms and broaden our scope to address the root causes of the unequal distribution of eye care services in Côte d'Ivoire.

Therefore, we believe that all people living in Ivorian territory should have equitable access to eye care and the means to achieve and recover the best possible visual health, regardless of age, sex and social condition. We believe that realizing this vision requires critical investments in the following areas:



With your Contribution you Can:



Join an international Alliance to Fight Avoidable Blindness (AFAB)



Help Ministries of Health in the poorest countries in Africa build robust eye health systems



Enable millions of people to lead an independent life



Give people access to locally produced glasses



Help in the diagnosis of eyesight problems and stop preventable blindness before it's too late



Enable hospitals and clinics gain access to the right equipment, trained nurses and eye health personnel to give the best possible treatment



Give over a million people access to their own ophthalmologists who speak their own language

From Darkness to Light

Hamed is 42 years old and suffers from a bilateral cataract, preventing him from going about his everyday life and keeping him in a state of impoverishment. This is what he had to say: "I have suffered from a cataract in both eyes for a very long time. I'm a father and yet couldn't even get out of the house, or provide for my family because of blindness; I even lost my job so all day I had to stay in the house, especially when the sun appeared. One day, a neighbor told me that the National Eye Health Program had organized a cataract surgery campaign. Some relatives of mine accompanied me to the place

where the campaign was being held. A few hours later I was given the diagnosis: I have a cataract in both eyes, I had surgery on the same day in one of my eyes. When the bandage was removed the day after the operation, I was able to see again, although at first my vision was a little blurred. After a few days, I started to see perfectly, thanks to the cataract surgery campaign organized by the National Eye Health Program." This Eye Health Program was set up with the technical and financial support of the Islamic Development Bank (IsDB) and Nadi Al Bassar.



With our new Action Plan, we can build up a comprehensive eye care system to reach even more people like Hamed. Eyesight is key for earning one's own livelihood and take care of your family.

The Change we Are Seeking

The change we are seeking is reflected in our ambitious five-year AFAB II Action Plan, which addresses these different entry points for change within the following 5 program components:



COMPONENT 1

Management of cataract

COMPONENT 2

Support for refractive errors treatment

COMPONENT 3

Management of glaucoma



The change we are seeking at **SERVICE PROVISION LEVEL**

All people with cataracts benefit from cataract surgery.

All students and teachers screened for refractive errors receive free glasses that are comfortable, pleasant and aesthetically acceptable.

Screening and management of glaucoma (antiglaucoma and surgery) is accessible to all.



The change we are seeking at **HUMAN RESOURCE DEVELOPMENT LEVEL**

All ophthalmologists are trained and equipped to carry out cataract surgery.

Increasing the number of and training of personnel dedicated to the detection and correction of refractive errors in schools.

Ophthalmologists gain additional training for glaucoma screening and management.



The change we are seeking at **INFRASTRUCTURE LEVEL**

The technical platform for cataract surgery is reinforced.

The technical platform for managing refractive errors in schools is reinforced.

The technical platform for the management of glaucoma is reinforced.



The change we are seeking for **LEADERSHIP, GOVERNANCE AND AWARENESS**

The cataract backlog is reduced.

The prevalence data on refractive errors is updated in relation to the national health information management system.

Glaucoma evidence is improved in relation to the national health information management system.

WHAT WE HOPE TO ACHIEVE.

17,000 CATARACT SURGERIES ARE PERFORMED.

26,600 PAIRS OF GLASSES ARE DISTRIBUTED TO STUDENTS IN SCHOOLS.

A REFERENCE CENTER FOR GLAUCOMA TREATMENT IS CREATED.



COMPONENT 4

Management of Diabetic Retinopathy (DR)

Screening and treatment of diabetic retinopathy is improved for all people living with diabetes.

Ophthalmologists gain additional training for screening and management of DR.

Ophthalmologists gain additional training for screening and management of DR.

Evidence on DR is updated in relation to national health information management systems.

COMPONENT 5

Strengthening the health system, cross-cutting aspects

Everyone has access to eyecare.

Ophthalmologists are equitably distributed in urban and rural areas.

All general hospitals benefit from a functional ophthalmology center.

- Advocacy, social mobilization and awareness are strengthened.
- Operational research as well as monitoring and evaluation are carried out.

A REFERENCE TREATMENT CENTER FOR LASER TREATMENT OF DIABETIC RETINOPATHY IS CREATED.

THE INSTITUTIONAL FRAMEWORK FOR EYE HEALTH INTERVENTIONS IS STRENGTHENED.



We Invest our Experience, Expertise and Resources to

- 1. Improve the quality of provided services,**
- 2. Build up human resources,**
- 3. Provide the necessary supporting infrastructure, and**
- 4. Foster leadership and governance structures.**

How we will Deliver the AFAB II Objectives

To achieve the changes we have planned and increase the impact over time, we have a clear strategy and a clear plan to translate our vision into lived reality.



COMPONENT 1

Management of cataract

- 1,000 cataract cases will be removed every 6 months and our campaigns will enable people in the 28 health regions to benefit from cataract surgery. These interventions will build on existing health structures.
- Capacity building of 4 ophthalmologists for cataract surgery, 4 operating room nurses, 4 specialized ophthalmology nurses in anesthesia will all help to bring the surgeries to successful conclusions.
- Equipment will be purchased (operating microscopes, cataract surgery kits and operating drapes for mobile teams). The logistics for the interventions will be acquired (double cab 4x4 vehicles for the activities of advanced cataract surgery strategies and a mini-car).

BUDGET: USD 3,623,000.-



COMPONENT 2

Support for refractive errors

- Each year, a national refractive errors screening campaign will be organized for students and primary school teachers. Comfortable and attractive frames and corrective lenses will be offered to primary school students with refractive errors.

- To carry out these interventions, primary school teachers will be trained in the screening of visual disorders in students; physicians, nurses and midwives from school and university health services will be supported and trained further in how to screen students for visual disorders. 10 optometrists, 4 technicians in low vision and blindness and 4 orthoptists will be trained in order to improve the standard of care.
- 4 optical units will be acquired for the manufacture of glasses and small equipment (optotypes, three-meter rope) for screenings will be purchased for school and university health services as well as primary schools.

BUDGET: USD 3,259,000.-



COMPONENT 3

Management of glaucoma

- A screening campaign will be organized annually for people at high risk of glaucoma during World Glaucoma Day. Anti-glaucoma eye drops will be distributed quarterly to those who are screened, and operable cases will be managed in the glaucoma referral center.
- 4 ophthalmic physicians will be trained in laser glaucoma surgery.
- The equipment needed for the diagnosis and management of glaucoma in the referral center will be procured and a glaucoma week will be established in each ophthalmic department.

BUDGET: USD 400,000.-



COMPONENT 4

Management of diabetic retinopathy

- A screening campaign for diabetic retinopathy for high-risk individuals will be organized each year during World Diabetes Day. Some cases will be treated using laser technology in the referral center of diabetic retinopathy.
- To support awareness and advocacy, the Diabetic Association will be supported each year.
- Diabetes physicians will be trained in diabetic retinopathy screening and 4 ophthalmic physicians will be trained in the treatment of diabetic retinopathy.
- Trained doctors will be equipped with ophthalmoscopes to examine the fundus for signs of retinopathy. The reference center will be equipped with laser technology for treating diabetic retinopathy and avastin kits will be acquired for treating diabetic macular edema.

BUDGET: USD 292,000.–



COMPONENT 5

Strengthening the sanitary system, cross-cutting aspects

- To strengthen the regulatory framework, bylaws will be signed for the creation of the National Eye Health Committee, the PNSO Support Scientific Panel, the price control for corrective lenses, the regulation of optical activities and ophthalmic practice, regulating the activities of NGOs involved in the field of eye health and harmonizing the cost of cataract surgery over the entire territory.
- A National Eye Health Strategic Plan, guidelines and ocular health protocols will be developed. A collaborative framework will be set up with opticians, optometrists and ophthalmologists in all health regions and the new public health pharmacy to supply the centers with surgical and medical kits for priority eye diseases.

Institutional support will be provided to the PNSO to enable it to effectively play its role in coordinating eye health interventions.

- A communication plan will be developed and validated on eye conditions, awareness tools on eye diseases and T-shirts will be made, 2 institutional films on eye health will be produced for different activities each year. In collaboration with the Ivorian Radio-Television (RTI), talk shows will be made on the causes of avoidable visual impairment in the context of the World Sight Day.
- To integrate the management of eye care in the existing health system, 101 general hospitals and 2,000 first contact health centers will be equipped with small eye exams tools, eye screening and management. Training modules on eye care will be developed and reproduced for the capacity building of Regional Directors, Departmental Directors, Health Officers, general hospital physicians and nurses and midwives. 2 biomedical technicians will be upgraded for the maintenance of ophthalmic equipment. Actors from local community-based organizations and traditional healers will also be trained on risks and hygiene measures to strengthen the prevention of eye diseases.
- The monitoring and evaluation officers from the 28 regional health directorates and 101 health departments will be trained in the collection of eye health data. The data collection tools will be developed. The supervision of the actors carrying out ocular activities will be carried out every semester in the health regions with the support of the control and audit section of the Inspectorate General of Health. A mid-term evaluation of the strategic plan will be carried out.

BUDGET: USD 5,419,000.–

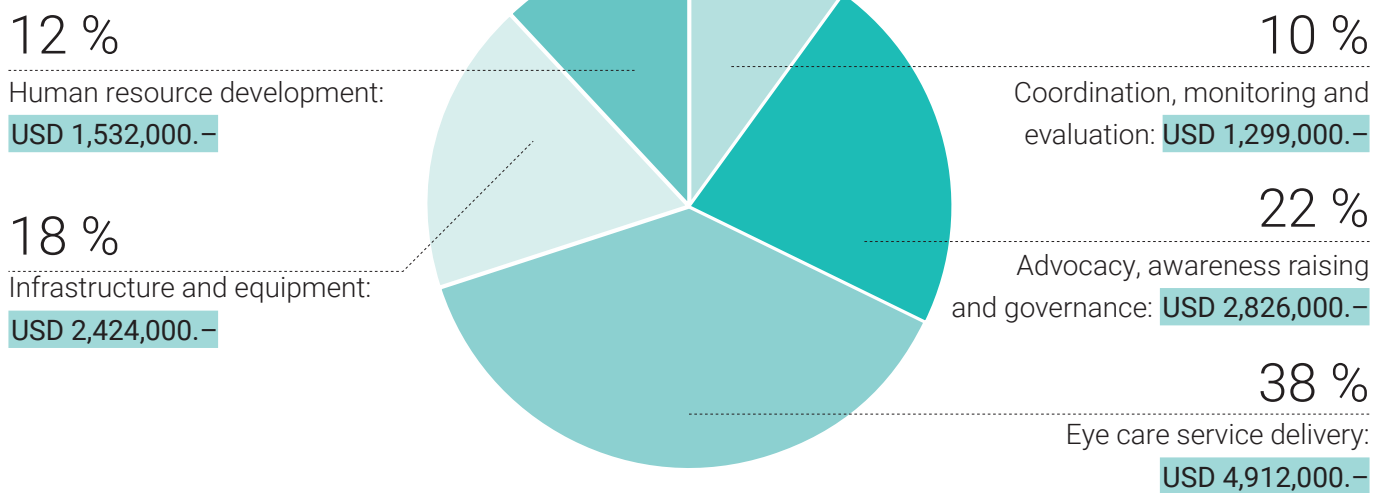
Joining Forces

WE CAN NOT GET THERE ALONE, AND WE BELIEVE IN TEAM WORK.

The Ivorian Government has set up a National Eye Health Program through the Ministry of Health and Public Hygiene to lead the process of eliminating avoidable blindness. Our partners include

national ministries, national and international non-governmental organizations, technical and financial partners and laboratories, all working to achieve the changes we are seeking.

Total Budget Breakdown



Budget required for Côte d'Ivoire: **USD 12,993,000.-**

The Ivorian Government Commits USD 2,918,000.- to Fund:

- Eye health staff salaries: USD 1,412,000.-
- Vehicle acquisition: USD 90,000.-
- Rehabilitation of ophthalmic services: USD 431,000.-
- Training material and behavior change communication equipment: USD 985,000.-

It is an ambitious plan. However, the results will not just be eye-opening, they will be life-changing.

Our Wider Impact

Your support for this action plan will directly contribute to the goal that no Ivorian will lose their sight as a result of a cause of blindness that is preventable or treatable. By stimulating south-south

cooperations, it will also be useful for the 13 other AFAB II member countries to lay the foundation for strong and sustainable eye health services across the African continent.

OUR VISION + YOUR INVESTMENT = **A BRIGHTER FUTURE**





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8111 King Khalid St. - Al Nuzlah Al Yamania Dist. · Unit No. 1 Jeddah 22332-2444
Tel: +966-12-6361400 · Fax: +966-12-6366871 · E-mail : afab@isdb.org · Website: www.isdb.org
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