

Venue: Banaadir Hospital



IsDB 
البنك الإسلامي للتنمية
Islamic Development Bank

معاً لمكافحة الفقر
REDUCING POVERTY
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صندوق التضامن الإسلامي للتنمية
Islamic Solidarity Fund for Development



Somalia

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

Why the need is 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 Somalia



Somalia has only **12 OPHTHALMOLOGISTS** are currently serving a population of 15 million people.



150,000 people are **BLIND** in Somalia.



23,20% of adults over 50, live with **LOW VISION**.



Despite **GLAUCOMA** is the third leading cause of blindness, there is only **1 SUBSPECIALIST** in Somalia for treating it.



Most of the **DIABETIC** cases are **UNDIAGNOSED**.



The Opportunity

The Somali Government has set up a National Program for Control of Blindness within the Ministry of Health and is taking tangible steps to expand access to eye care services across the country. However, Somalia's eye health system is still not yet operating to their full potential. The country is facing major challenges, which are mainly:

- Weak political recognition of eye health as a priority;
- There is no National Eye Health Strategic Plan;
- The ability to diagnose and treat glaucoma and diabetic retinopathy is limited due to the lack of trained

specialists, equipment, treatment and referral protocols.

With our new Action Plan and the support of AFAB, we will make a significant contribution to the development of sustainable eye health services as part of universal health coverage hence improving eye health for Somali's population.

Our main priorities are:

- To train local eye health agents;
- To have a better knowledge of eye diseases;
- Increase the reach of cataract surgical services;
- Pilot school eye health programs;
- And develop national specialized centers to deal with glaucoma and diabetic retinopathy.

Our vision is crystal clear:

We can build up a comprehensive and sustainable eye care system in Somalia

Did you know that in Somalia there is only 1 ophthalmic surgeon for 1,250,000 people and 1 ophthalmic nurse for 288,654 people? This is far below the International Alliance for the prevention of Blindness (IAPB) recommended rate (1/250,000 for ophthalmologist and 1/100,000 for ophthalmic technician). Did you know that about 150,000 people in the country are

visually impaired? mainly due to cataract, corneal opacity, refractive errors and glaucoma. We have high hopes, as we know that nearly 80% of the world's blindness can be prevented or easily cured. We could, with good planning and adequate resources, reach out to those in need.

Taking a System-Strengthening Approach

To stimulate a lasting change for individuals and for generations to come, we look beyond the visible symptoms and tackle the root causes of the country's fragile eye health system. Our aim to develop a comprehensive eye care, bring services to the people, train human resources for eye health and

strengthen the overall system by investing in equipment and promoting the integration of eye health within the general health system. We believe that realizing this vision requires 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 enjoy an independent life



Give people access to locally produced glasses



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



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



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

A Mother's Love: Rukia's Journey to Restore Her Son's Sight

My name is Rukia, and my eight-year-old son Younis has been suffering from a skin problem since he was eight months old, which unfortunately led him to lose his eyesight. I could not afford to pay of the surgery to restore his vision. As a result, he has been unable to attend school or live a normal life.

One day, I heard about a cataract surgery campaign that was conducted by the Islamic Development Bank at Banadir Hospital in Mogadishu, Somalia.

I traveled from Walaweyne, 70km from Mogadishu, to see if my son could benefit from the cataract surgery. We were grateful for the life-changing surgery. Not only that, we received medication to aid in his recovery, and also his health condition was

monitored for ten days. Following the surgery, Younis' vision significantly improved, and he could play like any other child.

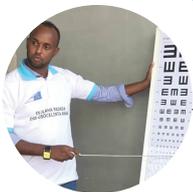
As a mother, I will do anything to help my child. It is heartwarming to see my child restoring his sight and being able to play like any other child. I am thankful to Allah for the opportunity to improve my son's quality of life.

We returned to Walaweyne after three weeks of performing the operation. I hope to benefit from the same support inshallah in six months. May Allah bless those who contributed to my child regaining his sight, and I pray that Younis continues to thrive and enjoy a happy and healthy life.



The Change we Are Seeking

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



COMPONENT 1

Provision of eye care services with a focus on cataract

COMPONENT 2

Uncorrected Refractive Errors (URE) treatment

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

Vulnerable population in the country can access quality eye care through increased service coverage and improved quality of treatment.

Primary school children are screened and treated for uncorrected refractive errors.

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

The eye health workforce in the country is strengthened significantly.

The eye health workforce in the country is strengthened through training of opticians

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

Selected health facilities are equipped to provide efficient and quality eye health services.

Teachers have basic equipment such as visual acuity charts to screen children.

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

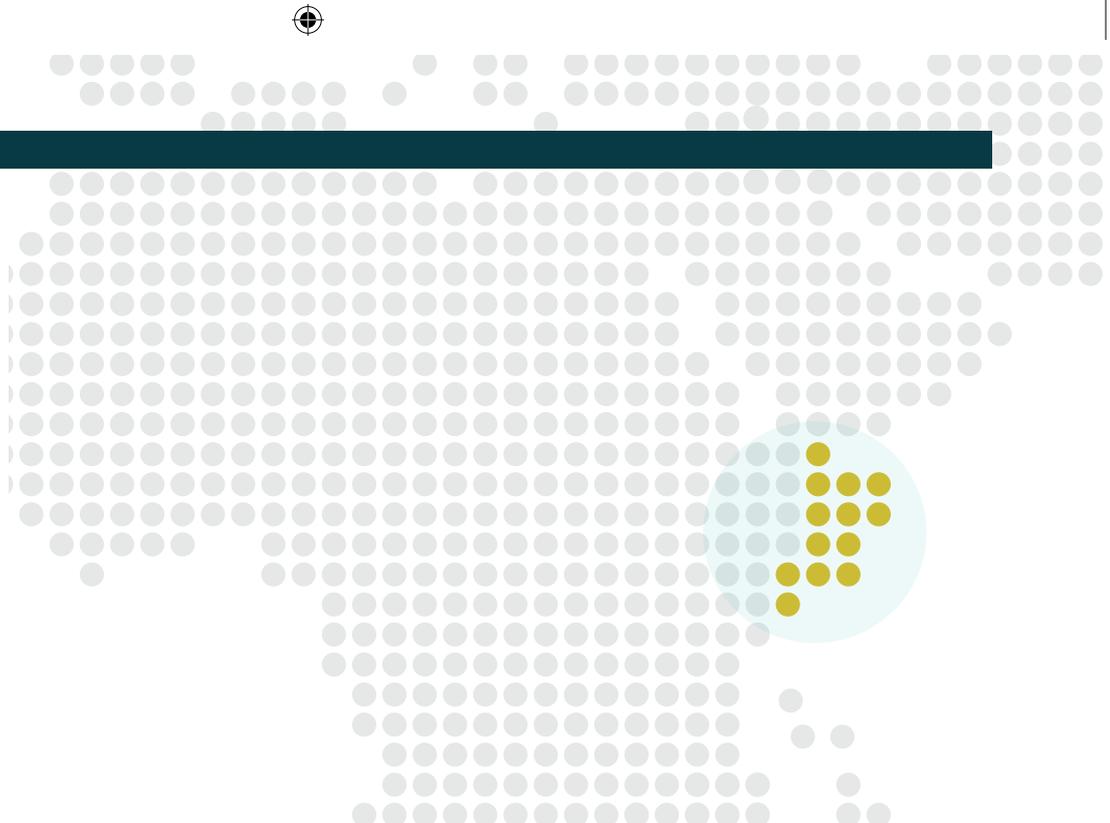
The population has knowledge and awareness of cataract blindness.

Awareness of uncorrected refractive errors is increasing among parents and Community members

WHAT WE HOPE TO ACHIEVE.

8,000 OF CATARACT SURGERIES ARE PERFORMED.

SCHOOL EYE HEALTH PILOT PROGRAM TESTED IN 100 SCHOOLS.



COMPONENT 3

Glaucoma services



COMPONENT 4

Diabetic Retinopathy (DR) treatment



COMPONENT 5

Capacity development as a cross-cutting aspect

<p>Patients are screened for glaucoma and those who need treatment receive it.</p>	<p>Ophthalmologists have the capacity to treat uncomplicated retinopathy diabetic cases as part of the project.</p>	<ul style="list-style-type: none"> - Human resources are strengthened through initial and continuous training, - Strengthened leadership and coordination of the eye health program at national, regional and district levels - Coordinating committees for eye health are in place at national and regional levels - Strengthened leadership and coordination of the eye health program
<p>Ophthalmologists have the capacity to treat uncomplicated glaucoma cases as part of the project.</p>	<p>Ophthalmologists have the capacity to treat uncomplicated diabetic retinopathy cases as part of the project.</p>	
<p>At least 1 tertiary hospital is equipped to provide quality treatment services for glaucoma</p>	<p>At least 1 tertiary hospital is equipped to provide quality treatment services for Diabetic Retinopathy</p>	
<p>Glaucoma awareness is growing in the general population</p>	<p>Awareness to everything regarding the implications revolving around eye health is developing within patients with diabetes.</p>	

1 UNIT FOR GLAUCOMA TREATMENT IS SET UP.

1 UNIT FOR DIABETIC RETINOPATHY TREATMENT IS SET UP.

THE NATIONAL EYE HEALTH PROGRAM EFFECTIVELY AND EFFICIENTLY COORDINATES THE PROVISION OF QUALITY EYE CARE.

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 a clear strategy and a clear plan to translate our vision into lived reality.



COMPONENT 1
Provision of comprehensive eye health services with a focus on cataracts

VULNERABLE POPULATION HAS ACCESS TO QUALITY EYE CARE.

- Perform 8,000 cataract surgeries.
- Train at least 3 medical doctors to specialize in ophthalmology.
- Train at least 8 medical technicians to specialize in ophthalmology..
- Provide the necessary equipment for cataract surgery.
- Conduct awareness sessions on cataract through local radios.

REQUIRED BUDGET: USD 1,268,000.-



COMPONENT 2
Uncorrected Refractive Errors (URE) treatment

PRIMARY SCHOOL CHILDREN ARE SCREENED AND WELL TREATED

- Screen 80,000 children attending primary schools in for refractive errors.
- Provide glasses to 5,000 children in need.
- Train 400 teachers in visual screening and referral techniques.
- Train 2 opticians.
- Equip 400 teachers with the necessary materials for refraction.
- Conduct awareness sessions on URE through local radios.

REQUIRED BUDGET: USD 519,200.-



COMPONENT 3

Glaucoma services

OPHTHALMOLOGISTS HAVE THE CAPACITY TO TREAT UNCOMPLICATED GLAUCOMA CASES.

- Train 2 glaucoma sub-specialists.
- Set up 1 glaucoma treatment unit.
- Conduct awareness campaigns on glaucoma.

REQUIRED BUDGET: USD 233,456.-



COMPONENT 5

Cross-cutting capacity

THE NATIONAL EYE HEALTH PROGRAM EFFECTIVELY AND EFFICIENTLY COORDINATES THE PROVISION OF QUALITY EYE CARE

- Set up technical eye health management Committee.
- Provide training courses on eye health management .
- Celebrate World Sight Day.

REQUIRED BUDGET: USD 270,000.-



COMPONENT 4

Diabetic Retinopathy (DR) treatment

SCREENING AND TREATMENT OF DIABETIC RETINOPATHY IS IMPROVED FOR PEOPLE LIVING WITH DIABETE

- Train 2 diabetic retinopathy sub-specialists.
- Set up 1 diabetic retinopathy treatment unit.
- Conduct awareness campaigns on diabetic retinopathy.

REQUIRED BUDGET: USD 162,000.-



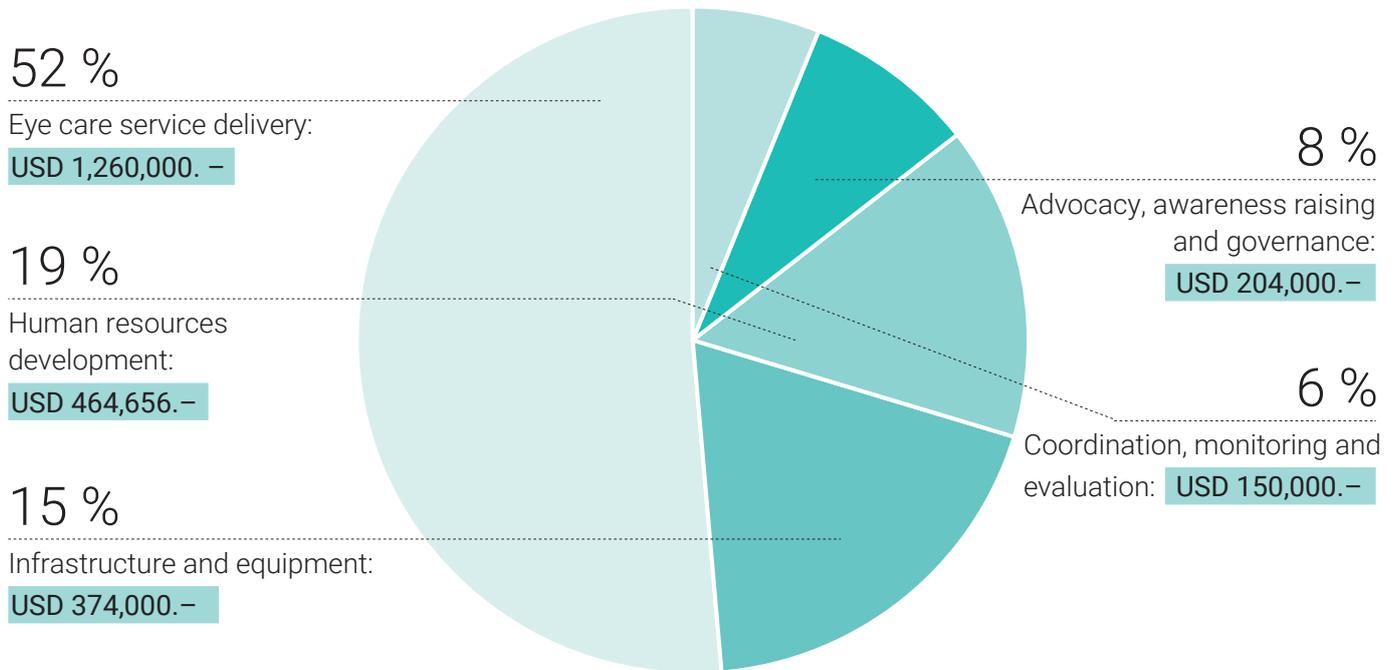
Joining Forces

WE BELIEVE IN PARTNERSHIPS. TOGETHER WE MAKE CHANGE

With the Somali Government in the driving seat, we are joining forces to expand coverage and quality of eye health services across the country. Our partners

include national ministries, the civil society and community structures, international non-governmental organizations, technical and financial partners, all working together to effectively deliver change.

Total Budget Breakdown



Budget required for Somalia: **USD 2,452,656.-**

The Government of Somalia Commits at least USD 501,000.- to Fund:

- Facilities of performing cataract surgery (Hospitals and other centers);
- Support of security;
- Creating an optical workshop (Banadir Hospital);
- Link with referral hospital for school children for further investigation;
- Creation of glaucoma center at Deamartini Hospital;
- Support of incentives for Glaucoma screening and treatment staff;
- Incentives of program management (incentives of focal point and others).

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

Our Wider Impact

Your support to this Action Plan will directly contribute to our vision that each Somali shall have access to comprehensive quality eye health services. We therefore invite you to provide the gift of sight to thousands of people. You can help them see a clear path out of poverty. In addition, as part of the second

generation of the Alliance to Fight Avoidable Blindness, the advantage is immense. Through stimulating South-South partnerships, the 13 AFAB II member countries will also benefit, laying the foundations for strong and sustainable eye health services across the African continent.

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





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