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 Islamic Solidarity Fund for Development



# Guinea Bissau

4-Year Action Plan of the Alliance to Fight  
 Avoidable Blindness 2<sup>nd</sup> Generation

Elaborated  
 with the technical  
 support of

 **Sightsavers**

 **LIGHT**  
 FOR THE WORLD

# 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 Guinea Bissau



**CATARACT BLINDNESS** accounts for **68.9% OF TOTAL BLINDNESS**.



**UNCORRECTED REFRACTIVE ERRORS** is one of the principal causes of avoidable blindness.



**THE CATARACT SURGICAL RATE** is only **25% OF THE RECOMMENDED RATE** for Sub Saharan Africa.



**EYE HEALTH STAFF IS SHORT.** Guinea Bissau has half the number of ophthalmologists recommended by the WHO.

## The Opportunity

Guinea Bissau is in an unprecedented position to make a significant difference to eye health.

The Ministry of Health in Guinea Bissau, with support from the Islamic Development Bank (IsDB) and the Islamic Solidarity Fund for Development (IsFD) has developed a new Action Plan for eye health to address key challenges that the country faces: the absence of a policy and planning framework; the gap in national level coordination, the lack of district and facility level management and quality control; the limited access to and availability of cataract and refractive error services, the lack of trained eye care staff and the bad condition of eye

health infrastructure. With a strong focus on effective management and delivery of the basic eye health services at national and district level, the Action Plan will contribute to improve management and quality standards in eye health facilities. It will also tackle the emerging priority of glaucoma, building people's awareness of the condition and skills to provide treatment. Opening the path to an effective and scalable approach to school eye health, it will lead to improved vision and educational opportunities for hundreds of children. Working in partnership with others, we will scale up efforts to make the new Action Plan for eye health an unquestionable success and a catalyst for change.

Our vision is crystal clear:

## improve and sustain good quality eye care services in Guinea Bissau.

Did you know that in Guinea Bissau, the cataract surgical rate in 2019 was 504 per million? This is far below the International Alliance for the prevention of Blindness (IAPB) recommended rate of 2,000 per million for Sub Saharan Africa. In rural areas, high poverty levels and remote rural locations make it

difficult for people to access cataract services either locally or to travel to camps when international partners are providing free surgeries. AFAB II will be an unrivaled opportunity for the eye health program to reach out to those in need, who in many cases rely on traditional cures that may harm their eyes.

### Taking a System-Strengthening Approach

Sustainability is at the heart of Guinea Bissau's Action Plan and taking a system strengthening approach is key to ensure sustainable improvements in the eye health sector. We will build the capacity

of the national eye health system to provide quality services for years to come. We can best facilitate this approach by focusing on the following four interdependent and interconnected dimensions:

Health system strengthening and coordination of eye health actions



Cross-cutting capacity development including management of Glaucoma



**STOP  
AVOIDABLE  
BLINDNESS**

Cataract treatment services



Uncorrected Refractive Error (URE) treatment and school eye health



# With your Contribution you Can:



*Join an international Alliance to Fight Avoidable Blindness (AFAB)*



*Help Ministries of Health of 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*

## Light and Independence for Haja

27 year old Haja, from Sierra Leone that borders with Guinea Bissau, had to stop selling “frying cake” at the market because she had become almost completely blind in one eye: “When I can’t see, I can’t do anything. I can’t go out and do business to provide for my mother”. One of her main concerns for the future is that there is no one to help with the business. She constantly worries about her two young children aged from 9 to 13. She told us that she is not comfortable if she doesn’t see them around. Going blind from

cataract affected her own sense of safety too.

Through the radio, Haja heard that the local hospital was carrying out eye surgeries. Just a couple of days after receiving surgery her life completely changed. Recovering sight gave her renewed confidence. Haja described how she felt after the surgery: “Now that I’ve got my sight back, I will go back to school, further continue my education so that I can take care of my mum.”



*With our new Action Plan, we can support the development of a sustainable eye care system in Guinea Bissau. We will reach even more people like Haja and help them see again.*

# The Change we Are Seeking

The change we are seeking is reflected in our ambitious four-year AFAB II Action Plan, which addresses these different entry points for change within the following 4 program components:



## COMPONENT 1

## COMPONENT 2

## COMPONENT 3

Health system strengthening and coordination of eye health actions

Cataract treatment services

Uncorrected Refractive Error (URE) treatment and school eye health



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

Patients are treated in well-managed health services.

Cataract surgeries are made affordable, and qualitative.

Children screened and spectacles dispensed.



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

Eye health and health management staff have excellent management skills.

Ophthalmologists and other staff have improved surgical skills leading to cataract surgical outcome.

Teachers are skilled to effectively screen and refer children for refraction.



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

Eye health facilities are upgraded and essential equipment is available to provide quality services.

Surgical equipment kits and consumables for cataract are available to provide quality eye care.

Supply of spectacles improved both for school eye health and general population.



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

A National framework and National Eye Health Strategic Plan are in place.

Knowledge and understanding of eye health diseases and eye health care is increased among the population.

Awareness about Uncorrected Refractive Error is raised in parents, children and community members in the pilot areas.

**WHAT WE HOPE TO ACHIEVE.**

**THE EYE HEALTH PROGRAM EFFECTIVELY AND EFFICIENTLY MANAGES THE PROVISION OF QUALITY EYE CARE.**

**OVER 3,125 CATARACT SURGERIES ARE PERFORMED.**

**OVER 650 CHILDREN ARE TREATED FOR POOR VISION.**



#### COMPONENT 4

Cross-cutting capacity development including management of Glaucoma

High quality eye health services provided, including identification and treatment of patients with Glaucoma.

Teachers are skilled to effectively screen and refer children for refraction.

The National Eye Health Program plans ongoing improvements in infrastructure and maintenance of equipment.

Strengthened clinical guidelines and protocols & the population has knowledge & understanding of a wider range of eye health conditions.

**QUALITY OF SERVICES IMPROVES AND 300 PATIENTS WITH GLAUCOMA ARE TREATED.**



### 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

*Health system strengthening and coordination of eye health actions*

### OUR STRATEGY

We aim to strengthen the policy and institutional framework, the health management information system and the capacity of the coordinating staff of the National Eye Health Program to ensure they have the guidance, tools and skills to effectively deliver the Action Plan.

#### *Our Implementation Approach*

- Update the National eye care policy and strategy.
- Develop the National eye care plan.
- Training staff in project planning, management, monitoring and evaluation.
- Training of health facility eye health managers.
- Strengthen the management and information system for the systematic collection eye health data.
- Establish a functional Eye Health Committee.
- Regular monitoring visits to facilities to support effective management and achieve services delivery objectives.

**REQUIRED BUDGET: USD 278,000.–**



## COMPONENT 2

*Reduced prevalence of cataract blindness*

### OUR STRATEGY

The National Eye Health Program will expand coverage and quality of cataract surgical services, treating new cases as well as reducing the cataract backlog. Services will be delivered at low cost in facilities, as well as carrying out outreach in hard-to-reach areas.

#### *Our Implementation Approach*

- Enhanced skills training for ophthalmologists and cataract surgeons in cataract surgery.
- Renovate and equip eye health units at key facilities.
- Provision of equipment, supplies and consumables.
- Perform cataract surgery at health facilities.
- Train primary health care workers and Ophthalmic nurses in primary eye care.
- In the short to medium term support free cataract camps at key facilities to fill gaps in coverage and reduce the back log of cases.

**REQUIRED BUDGET: USD 1,453,000.–**





**COMPONENT 3**  
*Support for refractive errors*

**OUR STRATEGY**

The National Eye Health Program with the Ministry of Education will develop a joint action plan for refraction services informed by an assessment of optical services.

To make the best use of available resources, school eye health will be prioritised by supporting pilots in selected districts to demonstrate their effectiveness and potential to improve educational outcomes for children with uncorrected refractive errors.

***Our Implementation Approach***

- Train staff in the management of optical services.
- Training of technicians in ophthalmic equipment maintenance.
- Refresher training for optometrists and other optical staff.
- Develop a supply chain of optical supplies.
- Train teachers in visual screening and referral.
- Screen children for eye problems and provide them with free glasses.
- Design and disseminate an information, education and communication campaign on refractive error.

**REQUIRED BUDGET: USD 275,000.–**



**COMPONENT 4**  
*Cross-cutting capacity development including management of glaucoma*

**OUR STRATEGY**

We aim to strengthen the health system to provide effective quality services that meet the needs of patients, as well as starting to develop specialist services for the treatment of glaucoma for example.

***Our Implementation Approach***

- Develop standardized guidelines and protocols.
- Regular monitoring on issues such as the quality of cataract surgical outcomes.
- Test patient feedback mechanisms.
- Provide equipment to eye health facilities across all levels of the system.
- Train technicians in equipment maintenance.
- Design and roll out an information, education and communication campaign on glaucoma.
- Improve the skills of general ophthalmologists in glaucoma management.

**REQUIRED BUDGET: USD 331,000.–**

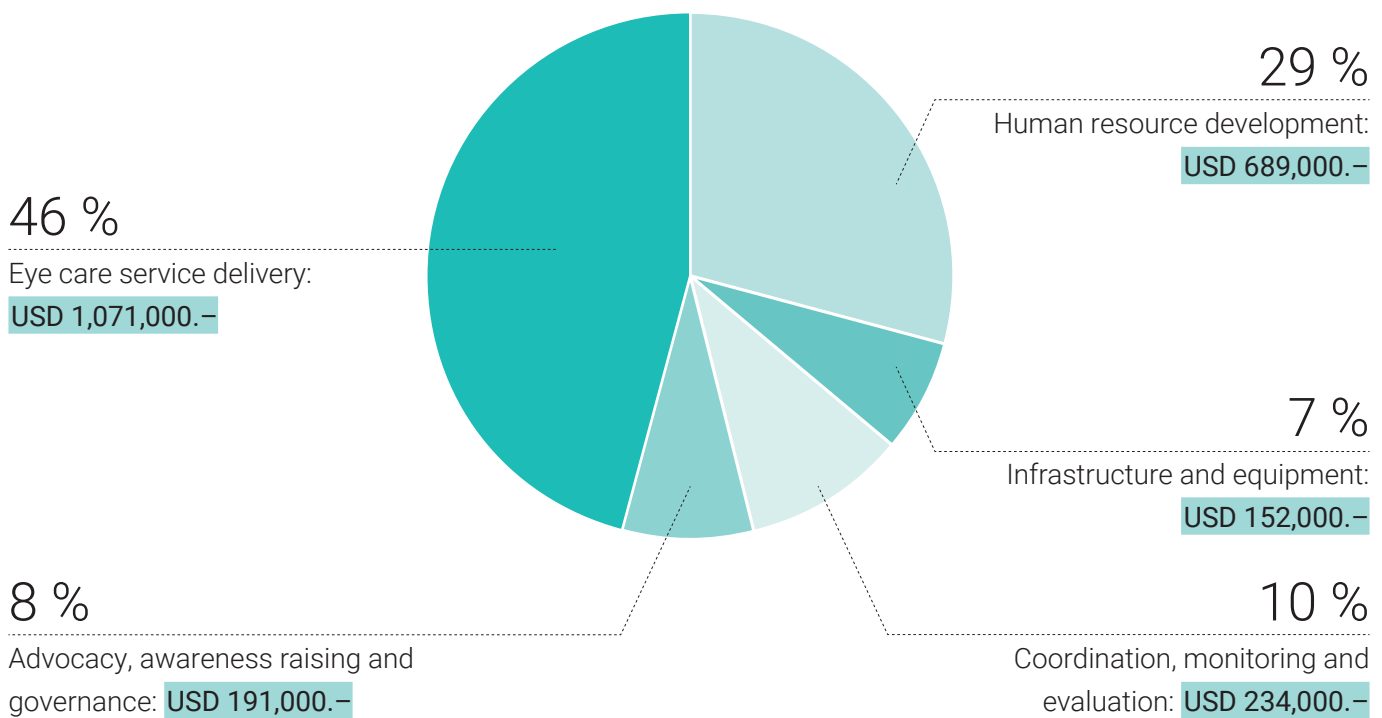
# Joining Forces

## WE CANNOT DO THIS ALONE AND WE STRONGLY BELIEVE IN PARTNERSHIPS.

With the Guinea Bissau government in the lead, we are joining forces to expand coverage and quality of eye health services throughout the country. Partners include national ministries, the National Eye

Health Program, non-governmental organizations and community structures – all working together to effectively deliver change. Leadership of the program will come from the multidisciplinary National Coordinating Committee made up of key stakeholders in sectors related to the prevention of blindness in Guinea Bissau.

## Total Budget Breakdown



Budget required for Guinea Bissau: **USD 2,337,000.-**

# Our Wider Impact

Your support to this Action Plan will directly contribute to the objective that no person in Guinea Bissau shall lose his or her sight due to an avoidable or treatable condition. Furthermore, within the Second Generation of the Alliance to

Fight Avoidable Blindness, the leverage is immense. Through stimulating South-South cooperation, the 13 beneficiary member-countries are laying the foundation for strong and sustainable eye health services across Africa.

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



*Jamie Bockaire is 55 years old and sought medical treatment at the local hospital in Sierra Leone. After the removal of her bandages she describes how cataract surgery changed her life: "I am happy and looking forward to going home. I think my vision is good. I can see, I can see black, white, blue, pink, white! I feel very excited to recognize people."*



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Due to Covid-19 we show stories and photos from Guinea Bissau and Sierra Leone that are representative of the kind of impact we'd hope to have in Guinea Bissau.

