

**Guaranteeing the right to eye health through  
equitable access to public health systems in the  
province of Inhambane with a human rights-  
based and gender approach**

**Project information**



Project execution



With the support of



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## 1. Project summary details

**Name:** Guaranteeing the right to eye health through equitable access to public health systems in the province of Inhambane with a human rights-based and gender approach.

**Location:** Mozambique—Province of Inhambane

**Area of intervention:** Health—Ophthalmology and optics

**Local partner:** Ministry of Health and the Provincial Directorate of Health—Inhambane

**Duration:** January 2023 - December 2025

**Implementation period:** January – March 2023

**Budget:** 300.000€ (100.000€ per year)

**Beneficiary population:** 80,017 persons (52% women)

## 2. Context: Mozambique, Inhambane province

The country of Mozambique has the 7<sup>th</sup> lowest human development index according to the United Nations ranking. Only countries such as South Sudan, Chad, Niger, etc. are behind. And, the life expectancy of the population is below 60 years. The maternal mortality rate is high and adult HIV prevalence is 11.5%. Malnutrition is increasing, and access to water and sanitation is among the worst in the world.

Inhambane is the 2nd poorest province in the country. 83% of the population lives below the poverty line (less than USD 3.2/day). GDP per capita in 2019 was \$503.6, one of the lowest in the world. Only 4% of the population has access to electricity. 70% of the population lives in rural areas.

According to the IAPB in Mozambique, visual impairment affects 2.7 million people. Of these, 110,000 people are blind (57% women), a higher figure than in any other country in the region, but even more serious in the case of women. The main causes of avoidable blindness are cataracts and refractive errors.

According to the RAAB (rapid assessment of avoidable blindness) conducted in 2016 with the support of Eyes of the World in Inhambane, the prevalence of blindness in the province of

Inhambane is 0.79% and in people over 50 years of age it is over 6.4%. Cataract blindness is not sufficiently addressed in the province, the number of cumulative cases is very high and surgical coverage is very low in relation to WHO standards.

Furthermore, there are only two ophthalmologists working in the province to serve a population of 1.5 million. And, only one hospital is equipped to perform cataract surgery. Of the 14 districts, only five have ophthalmology units staffed by ophthalmology technicians and optometrists.

This is the reason why the support of ESCRS is so significant, as the project implemented focuses on serving the most vulnerable population, offering surgery campaigns in rural hospitals to serve the rural population with less access to eye care and emphasising the gender gaps that especially affect women and girls.

In addition, it is a country very affected by the effects of climate change, at the very beginning of the project, during the month of February, the country was hit by tropical storm Freddy, which resulted in the destruction of social infrastructure and housing, affecting an estimated 23,339 families and 22 health units were damaged or destroyed. The Massinga and Vilankulos districts, were the most affected in the province of Inhambane.

The country is still recovering from the economic and health crisis generated by COVID-19.

### 3. Expected objectives and results and intended impact

**Specific objective:** Sustainable improvement of eye care services, integrating a gender perspective in the province of Inhambane.

Results	Objectively Verifiable Indicators
R.1. Improved access to eye care, with an emphasis on vulnerable groups such as women and children.	1.1. By the end of the project, 3,300 cataract surgeries have been delivered (60% women)
	1.2. By the end of the project, the same % of women and men diagnosed with cataract have undergone cataract surgery
	1.3. By the end of the project 80,000 people will benefit from eye consultations.
R.2. Strengthened SPS-I capacities to ensure sustainability and equity of eye health services, following human rights principles.	2.1. At the end of the project, 2 ophthalmologists and 15 technicians have been trained in refraction for adults and children and in the selection of cases of cataract surgery with complete exploration and correct visual acuity measurement to improve the correct prescription.
	2.2. Staff trained in the tool (Boost) consider their knowledge to be enhanced
	2.3. A surgical quality monitoring tool (Boost) is in place and ophthalmologists improve their performance
	2.4 Three provincial meetings conducted
	2.5 One MECC (Mozambique Eye Care Coalition) meeting conducted

Thus, the main impact that will be achieved with ESCRS support is that the population will have access to specialised eye health care and that, because of this increased access, blindness and visual impairment will be reduced in the province of Inhambane. Restoring visual capacity has an immediate impact and return for people and their environment, both in terms of quality of

life and their economy, as it facilitates many activities of daily life, allows better school results and increases productivity at work.

The project also aims to reduce gender gaps, and special emphasis is placed on ensuring that the same number of male and female patients are treated so as not to create greater inequalities.

ESCRS support for surgery campaigns in rural hospitals is crucial to reduce avoidable blindness in the province and especially among the most vulnerable population.

The project is of utmost importance and relevance as the cataract backlog is still very high, especially in the rural areas of the province and the capacities of the local health staff need to be strengthened so that they can increase their autonomy to ensure the sustainability of the actions.

In addition, the capacities of the public health system will be strengthened with the provision of a new plan and the setting up of coordination meetings between the different actors to ensure the sustainability of the impact foreseen by the project.

Eyes of the World has been working in the region for more than 20 years. The in-depth knowledge of the area, as well as the years of working together and in synergy not only with the local public authorities but also with civil society organisations, ensure the successful implementation and success of the project.

## 4. Who we are – Eyes of the World

Eyes of the World aims to reduce avoidable blindness in the areas where it develops its programs, improving people's access to integrated eye care services, through the implementation of its own model based on the following pillars: access to quality eye care through enhanced local public health services, training of local health staff to improve the quality of service and availability, advocacy and support for public eye health policies with a gender approach in order to reduce inequalities in access to services. Eyes of the World works to achieve sustainable results by improving eye health networks at primary and secondary care levels and in partnership with local health authorities and contributes to the achievement of the Sustainable Development Goals.



Eyes of the World has been working in four territories for 22 years fighting against avoidable blindness. To date, it has trained more than 14,000 local professionals and assisted more than 1 million people.

In-depth knowledge of the contexts and permanent work (365 days a year) with local professionals in the field distinguish our work methodology and ensure the sustainability of the impact of the actions implemented.

## 5. Implemented activities & some photos

The following activities are being implemented during 2023 (first year of the project):

### 1.- Cataract surgery campaigns.

Intensive cataract surgery campaigns (one week duration) at the rural hospitals of Quissico and Vilankulos and regular cataract surgeries performed at the Inhambane Provincial Hospital

- Patients: 262 (42% women)

Expected results at the end of the project: 3,300 cataract surgeries.

In the campaigns, surgery was performed on patients who had been previously identified by the ophthalmology technicians of the districts through visual acuity and fundus examination.

Expected results at the end of the project: 80,000 people benefited from eye consultations.



*Dr. Nidelys Pérez in the Vilankulos campaign*





*Dr. Pae in the Zavala campaign*





*Patients waiting to be treated and operated on in the Vilankulos and Quissico surgical campaigns.*

## **2.- Purchase of equipment, materials, and consumables for the implementation of consultation and surgery activities**

### **3.- Training of ophthalmology professionals in the diagnosis of ocular pathologies.**

To ensure the sustainability of the program, in addition to the surgical campaigns, quality training tailored to the needs of each professional group is offered to strengthen the capacities and technical skills of the local staff.

Thus, the project foresees several trainings. The first was offered by the Spanish NGO OCULARIS at the Maputo Central Hospital from 17 to 26 April for 3 optometrists working in various health units in the province of Inhambane. It had both a theoretical and practical component, taking advantage of the opportunity to analyse several cases. A second phase of the training is planned for December to verify the application of the concepts learned, as well as to refresh their knowledge. In addition, the optometrists trained will be able to be trainers for future editions, thus multiplying the impact of this training action.

Expected results at the end of the project: 2 ophthalmologists and 15 technicians trained.

### **4.- Training and implementation on the surgical quality monitoring tool (BOOST)**

Our goal is not only to ensure that the maximum number of patients undergo cataract surgery, but also to guarantee that the surgeries are performed with the highest quality and that the patient is assured of good post-surgical visual acuity.

The professionals were trained by Dr. Mónica Lecumberri, Spanish ophthalmologist and member of the medical committee of the Foundation, in the use and monitoring of such tool, and they are responsible for transferring the knowledge to the rest of the eye health professionals in the Inhambane province.

The BOOST tool has been put in practice during the surgical campaigns held in Quissico and

Vilankulos Rural Hospitals, evaluating the surgical quality of cataract surgeries.

During the first stage of follow-up, preoperative data such as sex, age, operated eye and visual acuity are being collected. After the first day of the surgery, postoperative visual acuity data are being collected from the patients.

Six weeks after surgery, we return to the districts to collect visual acuity and explore the fundus of the operated persons.

Expected results at the end of the project: A surgical quality monitoring tool (Boost) is in place and ophthalmologists improve their performance.

#### **5.- Coordination meetings with other stakeholders**

A Provincial Ophthalmology Meeting was held on January and attended by the provincial director of health, health professionals, public health and education authorities of the province, and representatives of civil organisations.

The meeting aims to assess the level of progress of the National Eye Health Program activities in the Inhambane province in quantitative and qualitative terms, as well as to discuss strategies to improve the activities that stimulate the quality of eye health service delivery.

During the project, several coordination meetings with different actors are planned to identify synergies, increase the impact of the planned activities and ensure the sustainability of the expected results of the project.

Expected results at the end of the project: three provincial meetings and a meeting of the Mozambique Eye Care Coalition have been held.



*Images from the provincial ophthalmology meeting*



