



# 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 Djibouti



Djibouti has **1 OPHTHALMOLOGIST** per 250,000 people.



**4% OF ADULTS** aged 40 and plus suffer from **GLAUCOMA**.



**30% OF CATARACT PATIENTS** are from neighboring countries.



**10% OF DIABETES PATIENTS** will develop a retinopathy.

### The Opportunity

Despite real economic progress, especially over the last decade, Djibouti is still crippled by poverty and unemployment. But the country's future lies with its young people, with a gross school enrollment rate of 94.1% (2016).

Eye health suffers from the lack of financial resources, the scarcity of human resources and the need to care for populations coming from three neighboring countries.

Additionally, the steadily yearly population growth (2.8%) combined with very limited resources, make it harder to cope with the needs. Therefore, external funding is necessary.

However, Djibouti has a vision and a strategy for its health system aiming at universal health coverage. The newly developed Action Plan as part of AFAB II is the opportunity for eye health to be part of it and achieve: (1) better organization of the eye health system that is fully integrated to the national health system, (2) more qualified and well-trained eye health workers who are working in improved infrastructures, (3) better knowledge of the prevalence of blindness and ocular diseases and strong data collection.

Together, we can multiply the efforts made by Djibouti to date to improve the quantity and quality of eye care services delivered to the population, including the most vulnerable.







## Our vision is crystal clear:

# each Djiboutian will have access to quality comprehensive eye health services.

Did you know that in Djibouti there is only 1 ophthalmic surgeon for 250,000 people and 1 ophthalmic nurse for 170,000 people? Expatriates are called upon to fill the gap. But, for such a small population, we could, with adequate resources, quickly improve the situation and strengthen the eye health system in order to deliver quality eye care.

#### 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 comprehensive eye care services

is clearly based on a system-strengthening approach: while directing our services to the individual patients, we also build the capacity of the national eye health system workers through the following 5 interdependent and interconnected dimensions:











# 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



Give people access to locally produced glasses





Enable millions of people to lead an independent life



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





#### Seeing is a Blessing

Aged 61, Abdallah H. lives in Djibouti. Like his father and grandfather before him, he works as a a fisherman. 5 years ago, the vision on his left eye started to be blurry before going completely dark. Of course, the visual disability has affected his performances and therefore his income. Then he heard of a free ophthalmic screening organized by the Ministry of Health and funded by the Islamic Development Bank and its partners. He went to the hospital where a medical team diagnosed a cataract and he underwent sight recovering surgery.

Full of emotion, he shared his story with us: "I am a tough man but believe me when I lost sight in my left eye I realized what it really meant to see the beauty of the world. People take it for granted but now I think that seeing is a blessing...

...I am eager to have the bandage removed so as to move forward with my life and take care of my loved ones. Thanks to the Almighty, things will go back to what they used to be. My thanks and blessings go to those I owe this amazing gift. I will bless them in every one of my prayers."





# The Change we Are Seeking

The change we are see in our ambitious five-ye Action Plan, which add different entry points t the following 5 progra	ear AFAB II dresses these for change within		<u>-60</u>	*1/
		COMPONENT 1	COMPONENT 2	COMPONENT 3
		Provision of eye care services with a focus on cataracts	Uncorrected Refractive Errors (URE) treatment	Glaucoma services
The same of the sa	The change we are seeking at SERVICE PROVISION LEVEL	Quality comprehensive eye care is available and accessible to all.	People living in Djibouti have access to screening for URE.	More Djiboutians have access to specialized glaucoma care.
Le burne compagne de dans dans dans dans dans dans dans dans	The change we are seeking at HUMAN RESOURCE DEVELOPMENT LEVEL	The ratio eye health personnel per habitant is improved.	1 mobile team dedicated to school school eye health for children is established.	Eye health personnel implements the guideline for diagnostic, reference and treatment of glaucoma patients.
	The change we are seeking at INFRASTRUCTURE LEVEL	11 eye health centers are equipped according to medical- technical standards.	2 eyewear workshops are created and maintained in Djibouti.	The opportunity of a glaucoma center is examined thanks to a better knowledge of the disease nationwide.
LUNTE CONTRE LA CÉCITÉ : V  SISTER CONTRE LA CÉCITÉ : V  CHIRLIN E C  R	The change we are seeking for LEADERSHIP, GOVERNANCE AND AWARENESS	Authorities are aware of the need for a dedicated Eye Health National Program.	A team of ophthalmic professionals dedicated to URE in schools is set up.	Sensitization campaigns are organized for eye health agents and glaucoma patients' families.
	WHAT WE HOPE TO ACHIEVE.	5,000 CATARACT SURGERIES ARE PERFORMED.	1,000 CHILDREN IN NEED BENEFIT FROM GLASSES.	GLAUCOMA CARE SERVICES ARE ACCESSIBLE TO GLAUCOMA PATIENTS.

6 ------









COMPONENT 4	

# Diabetic Retinopathy (DR) treatment

The national diabetes patients database is running and maintained.

Health professionals know how to diagnose, refer and treat DR.

One laser is installed in the country's tertiary refence hospital.

As a chronic disease, DR is included in the national universal coverage policy. **COMPONENT 5** 

Cross-cutting capacity development

The overall eye health system is stronger as a result of better training for:

- 4 ophthalmologists
- 11 ophthalmic nurses
- 2 optometrists
- 2 eyewear technicians

Data about eye health are systematically collected.

Eye health is led by a national program which functions with adequate ressources. 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.

PATIENTS ARE
LISTED AND
FOLLOWED-UP
THROUGH THE
NATIONAL HEALTH
SYSTEM.

HUMAN RESOURCES RECEIVE TRAINING TO DELIVER COMPREHENSIVE EYE CARE SERVICES.

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# 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.



#### 5.000 CATARACTS ARE REMOVED.

The annual cataract surgical rate of 1,250 is reached by combining static and mobile surgical campaigns.

Community relays are trained in order to find and refer patients to the appropriate structures.

Each year, about 1,250 patients have access to cataract surgery carried out by local and foreign surgeons.

Quality of outcome surgery are monitored through the BOOST program.

The threshold of 75% of operated cases with an uncorrected visual acuity of 3/10 thirty days post-surgery is aimed for.

A surgical recycling training program means quality is sustained.

REQUIRED BUDGET: USD 674,000.-



## 1,000 SCHOOL CHILDREN IN NEED WILL BENEFIT FROM GLASSES.

A situational analysis on URE management in Djibouti is undertaken.

20,000 enrolled school children in Djibouti city are screened for URE.

4,000 school children benefit from a ophthalmic medical visit at school.

Children with other eye health issues are referred to an eye health center and followed.

Two eyewear workshops are created and supported in Djibouti city.

A dedicated URE team is created and supported.

Advocacy campaigns push to include visual acuity tests in teachers' training curricula.

REQUIRED BUDGET: USD 180,000.-







## THE NATIONAL EYE HEALTH SYSTEM IS EFFICIENTLY HANDLING GLAUCOMA PATIENTS.

A national guideline for the management of glaucoma patients is established.

Eye health personnel is trained to glaucoma care (screening, reference, treatment and follow-up).

Products and technology are in place to ensure proper glaucoma treatment.

Advocacy effort for affordable means of treatment and sensitization campaigns are organized.

**REQUIRED BUDGET: USD 169,000.-**



#### **COMPONENT 4**

Diabetic Retinopathy (DR) treatment

## THE NATIONAL GUIDELINE FOR DIABETES AND DR PATIENTS IS ESTABLISHED AND IMPLEMENTED.

The national database of diabetic patients is developed and maintained.

The patient's reference mechanism throughout the health system is working.

1 laser is installed at the national reference hospital with the provision of all necessary consumables.

As chronic diseases, diabetes and diabetic retinopathy, are included into the national universal health coverage.

**REQUIRED BUDGET: USD 134,000.-**



#### **COMPONENT 5**

**Cross-cutting capacity building** 

# QUALITY TRAININGS TO IMPROVE THE PROVISION OF COMPREHENSIVE EYE CARE SERVICES.

- 11 eye health centers are equipped and staffed
- · 4 new ophthalmologists are trained
- 11 new ophthalmic nurses are trained
- 2 new optometrists are trained

Gathering knowledge is key for planning.

- Conduction of Rapid Assessment of Avoidable Blindness (RAAB) in 2 regions to support eye health planning.
- 3 situational analysis realized for URE, diabetes/ DR and glaucoma.
- Systematic data collection with the District Health Information Software (DHIS2).

3 new eye diseases national guidelines developed to improve the provision of eye health.

The project committee acts as the national taskforce for eye care and demonstrates the need for a national program to handle ocular health interventions.

A national plan for eye health 2022-2026 is developed.

The program is effectively monitored with regular technical field support. Mid-term and final evaluations are undertaken.

**REQUIRED BUDGET: USD 804,000.-**



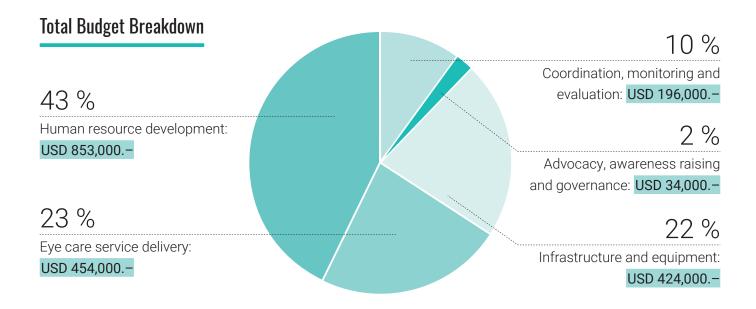


# **Joining Forces**

## WORKING TOGETHER, WE CAN BE CATALYSTS FOR FAR-REACHING SOCIAL CHANGE.

With the Djiboutian Ministry of Health in the driving seat, we are joining forces to expand coverage and quality of eye health services across the country. Partners include all the stakeholders of the sanitary

pyramid (i.e. national, regional and district levels), NGOs, the civil society and community structures. Djibouti is ready to improve its eye health sector and together we'll reach the set goals!



Budget required for Djibouti: USD 1,961,000.-

## The Djiboutian Government Commits USD 1,840,000.— to Fund:

- Eye health personnel salaries
- Standard medication and consumables used in eye health
- Infrastructures operations and maintenance costs

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 Djiboutian, and all of those from neighboring countries coming to Djibouti seeking care, 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.

As part of the larger AFAB II program spanning across 13 member countries, the leverage of this impact-driven Action Plan is immense. Promoting South-South partnerships will lay the foundations of a strengthened and sustainable eye health system, which is available and accessible to all, across the African continent.

## OUR VISION + YOUR INVESTMENT = A BRIGHTER FUTURE













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