



INTERNATIONAL CENTRE FOR EYE HEALTH

# Planning for VISION 2020 at the District Level

## A Manual



# Acknowledgements

The preparation of this manual has depended heavily on the advice and support of the key personnel responsible for leading the selected eye care programmes so successfully over recent years.

- Kitwe**            **Asiwome Seneadza**, Medical Director  
                      **Winston Mbao**, Administrator
- Mudhole**        **Sirigiri Babu Rao**, Administrator  
                      **Shamanna Ramaswamy**, Group Leader ICARE
- Yaruquí**         **Felipe Chiriboga**, Medical Director  
                      **María Augusta Vega**, Administrator

My gratitude respects the time devoted to my enquiries, both while visiting their eye care centres and also their patience and care in meeting my many subsequent e-mail requests. I hope that what I have written represents clearly and accurately the wise and whole-hearted commitment of these project leaders and their teams to the development of community eye health for their local communities.

I also wish to acknowledge the support of Allen Foster and many colleagues at ICEH who have made very helpful suggestions as the work has progressed.

Graham Dyer  
December 2006

# **Planning for VISION 2020**

## **at the District Level**

### **A Manual**

**Graham Dyer**

**ICEH**



# Preface

**VISION 2020: The Right to Sight** was launched by WHO in February 1999. In the intervening seven years national governments and non-governmental organisations have progressively accepted this initiative as the best approach for improving eye health and preventing blindness.

The realisation of VISION 2020 requires a commitment to develop programmes serving populations at the district level, where needs can be assessed, resources identified and community support motivated. While the need for district planning is clear, the means of bringing this about is more difficult to define. This manual is an attempt to document some lessons being learnt from three successful but different district models that have been developed in response to local conditions.

The manual starts with two chapters introducing VISION 2020 and setting out a generic model for planning and implementing VISION 2020 at the district level. This is followed by three case studies that have been selected to represent the needs and programmes in three different continental locations. The manual concludes with a chapter of exercises to help apply the principles of district level planning to individual situations. The reader is encouraged to consider with each case study:

1. The key factors in designing the programme.
2. The major activities to implement the programme.
3. The effectiveness of the programme.

It is hoped that this practical manual will assist eye health providers and programme managers to plan and implement VISION 2020 activities at the district level so reducing the prevalence of eye diseases and improving the vision of the population.

My sincere thanks to Graham Dyer and all those who have contributed to this work.



Professor Allen Foster  
Director of ICEH

December 2006

# Contents

<b>1</b>	<b>Introduction</b>	<b>1</b>
	<b>1. VISION 2020 – The Rationale</b>	<b>1</b>
	<b>2. VISION 2020 – The Strategy</b>	<b>2</b>
	<b>3. VISION 2020 – The District</b>	<b>3</b>
<b>2</b>	<b>Principles of District Planning</b>	<b>4</b>
	<b>1. The planning model</b>	<b>4</b>
	<i>Deciding where you are – a situational analysis</i>	
	<b>2. Assessing needs</b>	<b>5</b>
	<b>3. Assessing resources</b>	<b>5</b>
	<i>Deciding where you want to be</i>	
	<b>4. Defining the aim</b>	<b>7</b>
	<b>5. Specifying the objectives</b>	<b>8</b>
	<b>6. Defining priorities and strategies</b>	<b>9</b>
	<i>Deciding how to get there</i>	
	<b>7. Preparing a timetable</b>	<b>10</b>
	<b>8. Preparing a budget</b>	<b>11</b>
	<i>Getting there</i>	
	<b>9. Establishing a management structure</b>	<b>12</b>
	<b>10. Monitoring progress</b>	<b>13</b>
<b>3</b>	<b>Case Study 1– KITWE, ZAMBIA</b>	<b>15</b>
<b>4</b>	<b>Case Study 2– MUDHOLE, INDIA</b>	<b>40</b>
<b>5</b>	<b>Case Study 3– YARUQUÍ, ECUADOR</b>	<b>69</b>
<b>6</b>	<b>Summary - Designing a district programme for VISION 2020</b>	<b>96</b>

	<b>Appendices</b>	<b>103</b>
	<b>Ap1 The focus of National and District VISION 2020 Plans</b>	<b>103</b>
	<b>Ap2 Needs assessment</b>	<b>104</b>
	<b>Ap3 Situation analysis</b>	<b>105</b>
	<b>Ap4 Questionnaire on available human resources, infrastructure and equipment</b>	<b>108</b>
	<b>Ap5 Eye care infrastructure and human resources in relation to need</b>	<b>110</b>
	<b>Ap6 Charting the need and means for improvement in eye disease treatment</b>	<b>111</b>
	<b>Ap7 An action plan for improving cataract services</b>	<b>112</b>
	<b>Ap8 Gantt Chart – A one-year time frame for district level VISION 2020 planning activities - a tracking tool to aid the monitoring process</b>	<b>114</b>
	<b>Resources and references</b>	<b>115</b>

# Abbreviations

<b>AD</b>	Adilabad District	<b>LV</b>	Low vision
<b>AEPREC</b>	Association Ecuatoriana for PBL	<b>LVPEI</b>	LV Prasad Eye Institute
<b>AP</b>	Andhra Pradesh	<b>MD</b>	Medical director
<b>CB</b>	Childhood blindness	<b>MIS</b>	Management information system
<b>CBMI</b>	Christian Blind Mission International	<b>MLOP</b>	Mid-level ophthalmic personnel
<b>CBoH</b>	Central Board of Health	<b>MMED</b>	Master of Medicine
<b>CBP</b>	Copperbelt Province	<b>MoE</b>	Ministry of Education
<b>CBR</b>	Community-based rehabilitation	<b>MoH</b>	Ministry of Health
<b>CEC</b>	Community eye care co-ordinator	<b>O</b>	Ophthalmologist
<b>CEH</b>	Community eye health	<b>OA</b>	Ophthalmic assistant
<b>CO</b>	Clinical officer	<b>OCO</b>	Ophthalmic clinical officer
<b>CSR</b>	Cataract surgical rate	<b>ON</b>	Ophthalmic nurse
<b>(D)BCS</b>	(District) Blindness control society	<b>OP</b>	Out-patient
<b>DHMT</b>	District health management team	<b>OPD</b>	Out-patients department
<b>DR</b>	Diabetic retinopathy	<b>OT</b>	Operating theatre
<b>ECCE</b>	Extra-capsular cataract extraction	<b>PBL</b>	Prevention of blindness
<b>EN</b>	Enrolled nurse	<b>PEC</b>	Primary eye care
<b>FOV</b>	Fundacion Oftalmologica del Valle	<b>PEEP</b>	Providing Eye Care through Empowered People
<b>GDP</b>	Gross Domestic Product	<b>PHC</b>	Primary health care
<b>HKI</b>	Helen Keller International	<b>PHO</b>	Provincial health office
<b>HR</b>	Human resources	<b>RACSS</b>	Rapid assessment of cataract surgical services
<b>IAPB</b>	International Agency for the Prevention of Blindness	<b>RN</b>	Registered nurse
<b>ICARE</b>	International Centre for the Advancement of Rural Eye Care	<b>ROP</b>	Retinopathy of prematurity
<b>ICEH</b>	International Centre for Eye Health	<b>RSS</b>	Right to Sight Society
<b>IDA</b>	International Development Agency	<b>SSI</b>	Sightsavers International
<b>IMF</b>	International Monetary Fund	<b>UN</b>	United Nations Organisation
<b>I/NGO</b>	International non-governmental organisation	<b>UTL</b>	University Teaching Hospital, Lusaka
<b>INR</b>	Indian rupees	<b>VC</b>	Vision centre
<b>IOL</b>	Intra-ocular lens	<b>WHO</b>	World Health Organisation
<b>KCH</b>	Kitwe Central Hospital		