Our aim

Light for the World aims to promote access to comprehensive, disability inclusive, quality eye health care for all. Our efforts are focused on regions where eye health services are scarce, especially for hard-to-reach populations, including persons with disabilities, children, women and men.

About us

Light for the World, established in 1988, is a global disability and development organisation, breaking down barriers to strengthen society and empower people with disabilities in some of the poorest regions of the world. We create change through local people, organisations, and governments to ensure lasting impact. Our focus areas are economic empowerment, eye health and neglected tropical diseases, humanitarian action, and inclusive education.

We have eye health programmes in Burkina Faso, Ethiopia, Mozambique, Uganda (and through our associate members, in Democratic Republic of Congo, Rwanda and Tanzania).

Why

Globally, at least 2.2 billion people have a near or distance vision impairment, and in almost half of these cases, vision impairment could have been prevented or has yet to be addressed. Vision impairment severely impacts quality of life among adults and children. Adults with vision impairment often have lower rates of workforce participation and productivity and children with vision impairment can experience delayed cognitive and language development and lower levels of educational achievement.

Approximately 90% of the world's visually impaired people live in low-income settings.

Our approach

Our comprehensive eye health programmes are underpinned by the World Health Organisation’s building blocks of health systems (service delivery, leadership and governance, health workforce, medicines and technologies, information and research, and health care financing) and on their framework on integrated people centred eye care – integrating eye care into the mainstream health system.

Our current priorities include:

1. Strengthen human resources for eye health in sub-Saharan Africa
2. Promote the provision of excellent quality and comprehensive eye care services (including contributing to the elimination of trachoma)
3. Support the infrastructure of eye health service delivery for functional eye health services
4. Advocacy, awareness-raising and policy influencing to promote comprehensive eye health
What we do

Our Comprehensive Eye Health work is patient-centred, implemented from primary to tertiary levels of care and on the community level, treating as many conditions as possible through promotion, prevention, care, rehabilitation and assistive devices.

► We work with Ministries of Health and Education to improve quality of eye health services and ensure sustainability through strengthening existing health systems.

► We provide scholarships for ophthalmology students, subspecialisation training for ophthalmologists and nurses, and offer equipment and medicines so that trained medical staff can work effectively with appropriate infrastructure in hospitals.

► We contribute to national eye health strategy plans and policies and systematically influence and support required changes in national health systems.

► We provide eye health services through hospital-based and mobile services, and work with partners to find innovative solutions to increase coverage of eye care services in low resource settings.

Child/School Eye Health

Our innovative pilot programme in Uganda providing eyeglasses to schoolchildren was recognised as a best practice model by the International Council of Ophthalmologists and inspired our current programme, “1,2,3 I can see!” in Burkina Faso, Ethiopia, Mozambique and Uganda. We train teachers to identify students with eye problems, and train eye health professionals, including addressing child eye health within official trainings of local medical professionals.

Glaucoma

While cataract is the main cause of avoidable blindness in our focus countries and therefore our main focus, we also address Glaucoma which is the leading cause of irreversible blindness globally. Our transnational programme in Africa “The Silent Thief of Sight”, supports the set-up and promotion of quality glaucoma services. The aim is to detect the disease as early as possible and involve all levels of care.

Neglected Tropical Diseases

Our Neglected Tropical Diseases (NTDs) programme in Ethiopia encompasses awareness raising, prevention, treatment and infection control. We support partners in their efforts to eliminate blinding trachoma as a public health problem. Our programmes are guided by the World Health Organisation’s recommended “SAFE” strategy: Surgery, Antibiotics, Facial Cleanliness, Environment.

Equitable eye health

Our gender-sensitive eye health pilot in three countries enabled us and our partners to initiate processes and activities to reduce the gender gap in our eye health programmes and build good practices that can easily be replicated. We will build on the evidence created and lessons learned, together with partners and allies, to enhance gender equality in eye health.
Achievement highlights 2018 – 2022

Joint lobbying of the UN General Assembly to adopt the “Vision for Everyone” Resolution to ensure eye health for the 1.1 Billion people living with preventable sight loss by 2030.

Supported the training of 130 general ophthalmologists since 1997.


Created a learning series on gender sensitive eye health outlining our cost-effective, scalable and easy to implement methods for gender equitable eye health programming, available to all IAPB members.

307,092 eye surgeries (177,194 for cataracts) supported since 2018.

+40 Million doses of medication against Neglected Tropical Diseases distributed in Ethiopia between 2018 and 2022.

Facilitated the design of the first ever “Toolkit for the Management of Glaucoma in Sub-Saharan Africa” for clinicians and eye health stakeholders, used to train ophthalmologists allied ophthalmic personnel across 4 countries.
<table>
<thead>
<tr>
<th>PROJECT/DATES</th>
<th>PARTNER/DONOR</th>
<th>PROJECT PARTICIPANTS/IMPACT</th>
</tr>
</thead>
<tbody>
<tr>
<td>“1,2,3…I Can See” 01.01.2019 - 31.12.2029</td>
<td>Various private donors</td>
<td>PARTICIPANTS: Girls and boys in need of eye care in the project locations. IMPACT IN BRIEF: Comprehensive Child Eye Health services to be integrated into the health systems of Burkina Faso, Mozambique, Ethiopia and Uganda. At least 1.2 million girls and boys screened for visual impairments and supported as needed.</td>
</tr>
<tr>
<td>Equitable, Sustainable Eye Care for All! 01.07.2021 - 31.12.2022</td>
<td>Austria Ministry of Social Affairs</td>
<td>PARTICIPANTS: General population in need of eye care, with a focus on women and girls. IMPACT IN BRIEF: The pilot project enabled the development and testing of cost-effective, scalable and easy to implement methods for gender equitable eye health programming.</td>
</tr>
<tr>
<td>Glaucoma programme 2019 – 2025 (and beyond)</td>
<td>Else Kröner-Fresenius-Stiftung, and other private donors</td>
<td>PARTICIPANTS: Ophthalmologists and broad population at risk of untreated Glaucoma. IMPACT IN BRIEF: Establishment of glaucoma units at 7 tertiary hospitals in 3 countries, and a glaucoma fellowship programme in Ethiopia. The first ever “Toolkit for the Management of Glaucoma in Sub-Saharan Africa” developed and already used to train over 150 eye health professionals in 4 countries.</td>
</tr>
<tr>
<td>Eye Health Human Resources Development (Ongoing)</td>
<td>Various private donors</td>
<td>PARTICIPANTS: Ophthalmologists (including sub-specialists such as paediatric glaucoma), Optometrists, and other health care workers who support eye health services. IMPACT IN BRIEF: Improving human resources for eye health (quantity, quality, distribution).</td>
</tr>
<tr>
<td>Strengthening Eye Health Services in Kaya, Burkina Faso 01.01.2019 - 31.03.2025</td>
<td>Various private donors</td>
<td>PARTICIPANTS: General population in need of eye care, with a focus on hard-to-reach populations; primary and community health workers. IMPACT IN BRIEF: Improved comprehensive eye health services through strengthened healthcare structures and human resources (573 health workers trained), and improved knowledge on eye health and services at community level (over 1.3m people reached).</td>
</tr>
<tr>
<td>Neglected Tropical Diseases (NTDs) Programme in Ethiopia 2014 – 2025 (and beyond)</td>
<td>USAID/RTI, FCDO/Sightsavers, Premium Immobilien, and various private donors</td>
<td>PARTICIPANTS: Rural communities, especially women and children, especially girls, in Tigray and Western Oromia regions at risk of Trachoma and other NTDs. IMPACT IN BRIEF: As a major NTD partner of the Ministry of Health in Ethiopia, we contribute to the national efforts to eliminate NTDs, including implementing the full ‘SAFE’ programme for Trachoma in Tigray and Western Oromia regions.</td>
</tr>
<tr>
<td>Strengthening the Eye Health System in Mozambique 01.01.2020 - 31.12.2022</td>
<td>Various private donors</td>
<td>PARTICIPANTS: General population in need of eye care, with a focus on hard-to-reach populations; and eye health workers. IMPACT IN BRIEF: Strengthening the Mozambican Eye Health System in 5 of 11 provinces (Sofala, Tete, Cabo Delgado, Niassa and Zambézia). Over 200,000 eye consultations and over 5,800 surgeries performed.</td>
</tr>
<tr>
<td>National Intervention on Uncorrected Refractive Errors (NIURE), Uganda 2008 – 2019</td>
<td>Various private donors (Ongoing through the Ministry of Health)</td>
<td>PARTICIPANTS: Ophthalmic clinical officers, optometrists, teachers, children. IMPACT IN BRIEF: National Workshop and logistics system developed to serve all trained OCO/Refractionists (more than 80) in the country. The National Workshop has produced over 20,000 spectacles to date. The initiative has been successfully handed over to the Ministry of Health.</td>
</tr>
</tbody>
</table>
Key partners

PUBLIC SERVICE PROVIDERS: e.g., Ministries of Health and Education; national, regional and district hospitals.

TRAINING INSTITUTIONS: e.g., Universities or training centres (including those linked to hospitals) that provide medical training, specifically related to eye care.

CIVIL SOCIETY/NON-GOVERNMENTAL ORGANISATION SERVICE PROVIDERS: national or international organisations working to achieve universal access to eye care for all.

PRIVATE SECTOR: national and international businesses that contribute in various ways, e.g., donation of materials (frames, lenses, etc.) supporting advocacy, among others.

NATIONAL AND INTERNATIONAL PROFESSIONAL ASSOCIATIONS AND EYE HEALTH NETWORKS:
National: Ophthalmology/Optometry Associations; Africa: College of Ophthalmology of Eastern, Central and Southern Africa (COECSA); and Francophone Africa Ophthalmology Society (SAFO); International: International Agency for the Prevention of Blindness (IAPB); World Health Organisation (WHO); International Council of Ophthalmology (ICO); International Coalition for Trachoma Control (ICTC); NGDO Coordination Group for Onchocerciasis Elimination; Neglected Tropical Diseases NGO Network (NNN); the Coalition for Clear Vision, and the Eyelliance.

Key experts

DR. GEOFFREY WABULEMBO Thematic Director, Eye Health and Neglected Tropical Diseases

WOLFGANG GINDORFER Thematic Director, Uncorrected Refractive Errors and Child Eye Health