



Eye Health Policy Brief

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Cover photo: Chemila, a student in Mozambique, received glasses through the 1,2,3... I Can See! programme. With her new glasses, she can now follow lessons more easily and participate fully in class.

Executive summary

Light for the World is committed to creating a world where people with disabilities and eye conditions can fully exercise their rights.

Two billion people globally need eye health services, yet access is often denied to marginalised populations, people with disabilities, and those in humanitarian crises.

This policy brief addresses the critical importance of eye health as an enabler for education and employment. It outlines five specific targets for Light for the World’s strategy period until 2030.

Light for the World uses a comprehensive approach to eye health, working with partners and authorities to strengthen national health systems and integrate eye health into universal health coverage plans.

Aligned with global efforts like the WHO’s World Report on Vision and the 2021 World Health Assembly resolution, our work aims to achieve a 40% increase in effective coverage of refractive errors and a 30% increase in effective coverage of cataract surgeries by 2030.

Our approach is based on a theory of change that operates at three levels: individual and community change; organisational change; and policy change.

Our thematic focus includes comprehensive eye health and child eye health, treatment of complex eye diseases, and elimination of neglected tropical diseases.

Key priorities include strengthening accessible eye care services, building a sustainable eye health workforce, improving eye health systems and data management, ensuring the availability of quality equipment and medicine, and fostering partnerships.

In all our work, our goal is to become more inclusive as a partner and organisation.



Nigest, a primary school student in Arba Minch, Ethiopia, received glasses through Light for the World's school eye health programme. Her teacher, Desalegn Wada, was trained to screen for children with vision challenges.

Introduction

At Light for the World, we believe in a world where people with disabilities and eye conditions can fully exercise their right to health, education, work - and protection in emergencies. Eye health is a critically important enabler for children to access and benefit from education and for people to access employment.

According to the World Health Organization (WHO), two billion people globally need eye health services.ⁱ Yet in the context of increasing political and budgetary volatility, preventing severe visual impairment or blindness from eye conditions that are treatable is challenging.

Too often marginalised populations, people with disabilities and people in humanitarian crises do not receive the necessary care. Furthermore, health systems often fail women and girls, who represent about 56% of the world's 36 million blind and 55% of the world's 217 million people with moderate and severe vision impairment.ⁱⁱ Light for the World's approach targets access for these marginalised groups.

Eye care is much more than a health intervention. It empowers individuals, advances education, increases resilience to crises, and fosters societal and economic development. For sighted people, around 85% of perception, learning, cognition, and activities are mediated through vision. With an estimated 36-fold return on investment, eye health is one of the most impactful areas to invest in.

Yet eye health risks falling off national and the global agenda as funding and budget cuts affect the care needed by millions of people.

Our approach

Light for the World has a comprehensive, integrated approach to eye health.

Working with partners and authorities in countries, we avoid creating parallel structures. We instead support national health plans, addressing system challenges such as health workforce shortages or lack of training of eye health specialists. We work to ensure that eye health services, including mass drug administration, are integrated into national health and universal health coverage plans.

Our work is aligned with global efforts such as the 2021 World Health Assembly (WHA) resolution on eye health, which set ambitious global targets, including a 40% increase in effective coverage of refractive errors and a 30% increase in effective coverage of cataract surgeries by 2030.

WHO's World Report on Visionⁱⁱⁱ and SPECS 2030^{iv} initiative emphasise the importance of integrating comprehensive, gender-sensitive and people-centered eye care into health systems.

By leveraging technology and expanding preventive measures, we aim to reduce inequities and support the growing demand for services.

We advocate for national services that are sustainable and inclusive of all genders, ages and populations. We will increasingly connect our technical expertise and work on eye health, including child eye health, to our work on broader disability rights and systems change.

Child eye health

We support child and school eye health initiatives through the '1,2,3... I can see!' programme in our focus countries. The goal of the programme is that all children can develop to their full potential, unhindered by any visual problems affecting their learning. For example, refractive errors prevent children from reading what is written on the blackboard and undetected medical eye problems can cause further damage in form of sight loss. We want to ensure that children who need glasses are examined, refracted, and provided with spectacles, or referred for medical treatment whenever necessary. We support training for eye care personnel and help to develop special eye units for children and to strengthen national health systems.

We aim to make services available and accessible to populations which are in urgent need of eye care, hard to reach or marginalised.

Our theory of change is based on working in an integrated, comprehensive way at three levels:

- 1) We fund and support our partners to bring about **individual and community change**. We do this through technical support for capacity development and supportive supervision of community workers, primary health workers and teachers in primary eye care and school eye health, including for social and behavioural change activities. We also support school screenings, referrals and provide spectacles, equipment and medicine.
- 2) To support **organisational change**, we provide training of ophthalmologists and allied ophthalmic personnel on glaucoma, paediatric eye care, and other subspecialties required for the treatment of complex eye diseases. We also strengthen eye health data and disaggregation, as well as research and evaluation.
- 3) We amplify the advocacy of partners for **policy change**, connecting national governments with national and international eye health networks and stakeholders. We co-develop public campaigns and strategic communication aimed at systems change.

Our thematic focus is based on our long-standing technical expertise and track record on the most pressing eye health issues:

- ▶ **Comprehensive eye health** focusing on the challenge of cataract, aggravated by the lack of qualified workforce, and resulting low service coverage.
- ▶ **Treatment of complex eye diseases** requiring highly specialised professionals, such as glaucoma, which we successfully integrated in comprehensive care in a pilot programme, as well as emerging diseases such as diabetic retinopathy, retinopathy of prematurity or retinoblastoma.
- ▶ **Elimination of neglected tropical diseases (NTDs)**, including trachoma, as a public health issue in Ethiopia.
- ▶ **Child eye health** including school eye health.

Our priorities

Our work focusses on strengthening accessible, resilient and integrated eye health systems in focus countries and on the elimination of two eye-health-related NTDs that are a public health issue. The following priorities all contribute to achieving these goals.

Strengthening comprehensive and accessible eye care services at all levels: Our goal is to drive systemic change in eye health care delivery and contribute to universal health coverage. We do so by working closely with national governments, and international networks such as the International Agency for the Prevention of Blindness (IAPB), and the WHO. We advocate and support national governments to make the required changes to their eye health strategy plans and policies by aligning them with international standards and implementing them effectively. We work closely with governments in enhancing people-centred and community-based eye care services at primary, secondary and tertiary levels. We focus on marginalised groups, including women, children, people with disabilities and those living in remote and underserved areas.

Strengthening a sustainable eye health workforce: We work with public health system actors local to sustainably build a skilled eye health workforce. We do so by bringing together needed resources, relevant stakeholders and expertise across different sectors. We support the establishment of sub-national training hubs to provide comprehensive subspecialised training and ongoing professional development. These qualified professionals build skills and sustainably enhance national capacity.

Improving eye health systems and data management: We work with national and local governments to enhance eye health information systems for effective monitoring, evaluation and decision making in the eye health sectors of focus countries. We promote the use of tools that measure service quality and enable evidence-based improvements with a focus on children and people with disabilities. We make sure that the national data system eye health indicators are inclusive of disability and gender.

Ensuring the sustainable availability of quality eye care equipment, medicine and consumables: We work with public health institutions in focus countries to ensure that eye care facilities at all levels have not only the equipment, medicine and consumables they need, but also the maintenance knowledge to keep them in good working conditions. We bring concrete value by working with eye care clinics to find innovative solutions and technologies that enhance the quality, accessibility and efficiency of eye care services. We foster partnerships with eye care clinics and other stakeholders such as those in the private sector to increase coverage of eye care services in low resource settings.

Building partnerships and bringing stakeholders together: By contributing our expertise in areas such as glaucoma, school eye health, gender equity and the environment, we collaborate towards meaningful, systemic change. We advocate for and support the participation of national government delegates in international fora to ensure their voices are heard. We work closely with national governments and international stakeholders in national taskforces for eye health and NTDs. We foster cross-sector coordination and collaboration among stakeholders in countries, particularly with the education sector to ensure sustainable, inclusive, and equitable eye care for all. We enable knowledge sharing and cross-fertilisation between focus countries at various levels.



Camilo, born with bilateral cataracts, receives sight-restoring surgery from Dr. Vasco da Gama at Central Hospital Quelimane, Mozambique, as part of the 1,2,3... I Can See! Programme.

Our targets

1) Strengthening accessible eye care services at all levels

National eye health systems in implementation countries have made progress in the integration of eye health services across all levels, from primary to tertiary care, and ensuring accessibility for women, children and people with disabilities. This improved access is also ensured in underserved geographical areas.

2) Strengthening the eye health system

There is an increase in the human resources available for eye health and an improved financial support system for eye health in national health plans. School eye health and child eye health policies are endorsed and implemented, under the health and education ministries. Information, education, and communication tools are developed and integrated into health and educational systems to ensure sustainability of services.

3) Improving eye health systems and data management

National and local governments have further strengthened their eye health information systems. Health and Management Information Systems ensure effective monitoring and evaluation. The health data is used in decision-making leading to improved quality of service delivery. Additionally, evidence-based tools to measure service quality in the healthcare facilities are adopted by partners with a specific focus on improving services for women, children and people with disabilities.

4) Sustainable availability of quality eye care equipment, medicine and consumables

The availability of needed eye health equipment and consumables has increased, and eye health departments have knowledge and skills to maintain equipment and support continuation of eye health services.

5) Light for the World as a convener of eye health expertise

We remain an active member of inclusive eye health practices in IAPB and support the body of knowledge on the topic, strengthening collaboration across the sector to achieve meaningful systemic change. We are key players in fostering cross-sector coordination in all focus countries to ensure sustainable, inclusive and equitable eye care for all.

Glaucoma – the global main cause of irreversible blindness

Seeing the burden and lack of services, Light for the World took special interest in glaucoma, with emphasis on early detection and improved management. Engaging global experts, a Toolkit for Glaucoma Management in Sub-Saharan Africa was developed, enabling 7 ophthalmologists to subspecialise in glaucoma and use the “glaucoma toolkit” to train their peer ophthalmology professionals. A wet and dry lab Menelik II Addis Ababa were established and enhance skills of ophthalmologists in Africa in the surgical interventions in glaucoma. Our glaucoma pilot programme’s success is exemplary for our twin-track approach of dramatically promoting an underserved subspecialty while fostering its integration as a standard component of comprehensive health care.

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- i World Health Organization Blindness and vision impairment, <https://www.who.int/news-room/fact-sheets/detail/blindness-and-visual-impairment> [Accessed February 19, 2025]
- ii Bourne RRA et al.: Magnitude, temporal trends, and projections of the global prevalence of blindness and distance and near vision impairment. The Lancet Global Health, 2017 [Accessed February 19, 2025]
- iii WHO World Report on Vision (2019): <https://www.who.int/news/item/08-10-2019-who-launches-first-world-report-on-vision> [Accessed February 19, 2025]
- iv WHO SPECS 2030: <https://www.who.int/initiatives/specs-2030>



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