• Editorial •

# LOVE your eyes--World Sight Day 2022

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nternational ophthalmology sometimes appears to be boring as its topics are mostly remote and we all have enough issues in front of our doorstep. However, sometimes important decisions affect all of us. This year's motto of World Sight Day (the 2<sup>nd</sup> Thursday of October) is "Love your eyes". We should join millions of others who will be doing the same. The World Health Organization (WHO) released the World Report on Vision (WRV)<sup>[1]</sup> on the 2019 World Sight Day with the motto "Vision First". The WRV explains the prevailing magnitude of eye disorders, as well as the success of worldwide efforts, current challenges, and strategies for universal health coverage (UHC) through eye care. Then the WHO passed the resolution "Integrated people-centered eye care (IPEC)"<sup>[2]</sup> during the 73<sup>rd</sup> WHO assembly in August 2020. In 2021 the United Nations General Assembly unanimously adopted the first-ever resolution on vision<sup>[3]</sup>, committing its 193 member nations to ensure eye care for everyone by 2030. This resolution makes eye health part of the United Nations Sustainable Development Goals<sup>[4]</sup> prompting the organization's 193 member nations to ensure access to care for their populations. To accomplish this objective the WHO launched the Eyecare in health systems-guide for action (the 75<sup>th</sup> WHO Assembly, May 2022)<sup>[5]</sup>.

Currently, half of the world's population does not have access to the health care they need. At the same time, eye conditions are predicted to increase due to a variety of factors, including aging population, lifestyle, and non-communicable diseases (NCDs). Everyone, if they live long enough, will experience a minimum of one eye condition in their lifetime. A summary WRV infographic<sup>[6]</sup> published by WHO shows the problem of global ophthalmology: At present at least 2.2 billion people around the world have a vision impairment, of whom at least 1 billion have a vision impairment that could have been prevented or is yet to be addressed. Often, all that is required is a cost-effective intervention, such as a pair of glasses or cataract surgery. The availability, accessibility, and acceptability of eye care services have an impact on eye conditions and vision impairment. For example, in many countries, eye care needs are greater in rural areas, but services are often provided in hospitals in urban areas. At this moment eye care services are often inadequately integrated into health systems.

We ophthalmologists ought to be at the front of this venture and therefore should know these documents. The International Council of Ophthalmology (ICO) is the only ophthalmology association in official relations with the WHO and has contributed to the WRV. The ICO supports the WHO and advocates for the implementation of recommendations of the WRV.

Produced at the request of Member States during a side event to the 70<sup>th</sup> World Health Assembly (2017), and with the support of experts from around the world amongst them the ICO, the WRV (2019)<sup>[1]</sup> offers evidence of the magnitude of eye conditions and vision impairment worldwide. It proposes effective strategies to address eye care and provides recommendations for action to improve eye care services worldwide.

The WRV is aimed at ministries of health, development agencies, civil society organizations and scientists, policymakers, and practitioners from the field of eye care. It is hoped that by shaping the global agenda on vision, the report will assist the Member States and their partners in their efforts to reduce the burden of eye conditions and vision loss and achieve the Sustainable Development Goals (SDG), especially SDG target 3.8 on universal health coverage.

The report provides evidence on the magnitude of eye conditions and vision impairment globally, draws attention to effective strategies to address eye care, and offers recommendations for action to improve eye care services globally. The key message of the report is to furnish integrated people-centered eye care services everywhere which will ensure that people receive eye care based on their personal needs throughout their lives without experiencing financial hardship. The concept of UHC<sup>[7]</sup> is globally adopted as the key guiding principle for health planning. To address these problems eye care needs to be an integral part of UHC.

To this end, the Eyecare in health systems–guide for action<sup>[5]</sup> (the Guide) was developed as a handbook for health planners and was launched on May 24<sup>th</sup>, during the 75<sup>th</sup> World Health Assembly at the United Nations in Geneva. The Guide outlines strategies and approaches proposed by WHO that lay out practical, step-by-step support to the Member States in the planning and implementation of integrated people-centered eye care (IPEC)<sup>[8]</sup>.

This new resource leads the Member States through a four-step process: situation analysis; development of a strategic plan and monitoring framework; development and implementation of an operational plan; and establishing and maintaining evaluation. The Guide further describes and links the following four new tools established by WHO to support country planning<sup>[5]</sup>.

ECSAT (Eye care situation analysis tool)<sup>[9]</sup> is a questionnairebased survey tool to comprehensively assess eye care in a country. ECIM (Eye care indicator menu)<sup>[10]</sup> is a list of recommended eye care indicators to be collected regularly.

PECI (Package of eye care interventions)<sup>[11]</sup> describes planning and budgeting for eye care at each level of the health system. ECCF (Eye care competency framework)<sup>[12]</sup> is a planning tool for eye care human resources based on competencies.

These tools provide a blueprint for improving access to appropriate, affordable, and high-quality eye care for everyone, building on the WHO's WRV and the global commitments made last year to adopt two ambitious eye targets by 2030.

The ECIM<sup>[10]</sup> provides a comprehensive set of input, output, outcome, and impact indicators from which the Member States can select, to facilitate the monitoring of strategies and actions for eye care at national and subnational levels, in line with integrated people-centered eye care (IPEC). The ECIM provides a purposeful resource for the Member States to develop or improve an eye care monitoring framework. It is possible to monitor the implementation and results of their strategic eye care plan against intended objectives; integrate eye care into the health information system; build evidence through eye care data collection; identify gaps and successes of the strategic plan; provide evidence for advocacy for further allocation of resources and development.

The PECI<sup>[11]</sup> provides a set of recommended, evidenced-based eye care interventions with material resources required for implementation, presented across the following continuum of care: 1) health promotion and prevention; 2) screening; 3) diagnosis and monitoring; 4) treatment; and 5) rehabilitation. For each selected intervention, information is also provided on the relevant period of life course; recommended level(s) of care (*i.e.*, community, primary, secondary, and tertiary health care) for delivery; and potential links to health program(s) and sectors. The ECCF<sup>[12]</sup> presents the competencies and activities of an eye care worker through six domains: Practice, Professionalism, Learning and Development, Management and Leadership, Community and Advocacy, and Evidence. Within these areas, each competency and activity are supported by knowledge and skills.

These documents are a milestone in vision care. In summary, the WRV recommendations are: 1) Make eye care an integral part of UHC; 2) Implement IPEC in health systems; 3) Promote high-quality implementation and health systems research complementing existing evidence for effective eye care interventions; 4) Monitor trends and evaluate progress towards implementing IPEC; 5) Raise awareness, engage, and empower people and communities about eye care needs.

Eye Health services link to SDGs. Implementing IPEC has the potential to improve millions of lives worldwide and produce huge benefits for the economy, gender equity, inclusion, education, and the workplace. Eye health is critical to achieving the SDGs.

Improved eye health<sup>[13]</sup> reduces poverty (SDG1) and improves productivity (SDG8); advances general health and well-being (SDG3); advances educational outcomes (SDG4); advances equality (SDG5 and SDG10); reduces road traffic accidents (SDG11).

It is hoped that by forming the global agenda on vision, the burden of eye conditions and vision loss can be further reduced and achieve the SDGs, particularly SDG target 3.8 on UHC.

To achieve adequate eye care for everyone by 2030, ophthalmologists must find opportunities and strategies to effectively advocate and drive change in government policy and practice<sup>[14]</sup>.

#### ACKNOWLEDGEMENTS

### Conflicts of Interest: Wiedemann P, None. REFERENCES

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