

USAID'S CHILD BLINDNESS PROGRAM

USAID's current Child Blindness Program is a five-year (2018 - 2023), \$17.5 million program managed by Integrative Sciences LLC, with technical support from the International Eye Foundation. The program utilizes a competitive Grants Under Contract (GUC) mechanism to provide funding to U.S. and Non-U.S. Non-governmental Organizations (NGO) to deliver high quality eye health services to children and other vulnerable populations in countries around the world.

USAID's Child Blindness Program (CBP) began as a Congressional directive in 1991 to prevent and treat child blindness. Since that time, the U.S. Congress has provided over \$1 million per year to USAID for the program. In recent years, the annual funding has risen, enabling CBP to expand its field reach and provide critical services to more children. To date, CBP has awarded approximately \$29 million to more than 50 eye care and health NGOs to implement interventions worldwide, reaching over 7 million children.

The program's GUC mechanism uses the full grants cycle, including the release of a Request for Applications, review and selection of projects for funding, monitoring and evaluation of project activities, and targeted organizational capacity building.

USAID's Child Blindness Program funding supports a variety of eye health initiatives focusing on service delivery, scale-up, research and innovation. Examples include: health conditions in children including Diabetic Retinopathy, Pediatric Cataract, Uncorrected Refractive Error, Low Vision, Retinopathy of Prematurity, and Retinoblastoma.

PROGRAM PRIORITIES

- Providing Comprehensive Eye Health Services
- Creating Effective Training
 Programs
- Strengthening Infrastructure and Equipment
- Building Expansive Outreach and Referral Networks
- Forging Dynamic Partnerships
- Strengthening Local Capacity
- Promoting Gender Equity
- Ensuring a Continuum of Care
- Establishing Replicable, Scalable, Sustainable Programs
- Improving Monitoring, Evaluation, and Learning
- Ensuring Best Practices in Pediatric Eye Health

EXAMPLES OF CBP ACTIVITIES

CHILDREN WITH SPECIAL NEEDS IN NIGERIA

CHILD SURVIVAL FOUNDATION INTERNATIONAL (CSFI)

In Nigeria, many children enrolled in special needs schools have undetected visual impairment. These children do not receive routine eye examinations, and there are no referral systems linking schools with eye health services. Through this grant, CSFI is mapping special needs schools across 36 States, screening children in schools in six States, and evaluating existing services. Eye health professionals in each State are training teachers at the special needs schools to perform vision screenings and refer children for treatment. CSFI's ophthalmology team is also providing comprehensive exams, eyeglasses, surgery, and low vision services.

REFRACTIVE ERROR IN MONGOLIA

PROJECT ORBIS INTERNATIONAL, INC (ORBIS)

Uncorrected refractive error accounts for approximately 90% of poor vision among school children in Mongolia. Due to the country's low population density and geography, it is increasingly difficult for children to access timely and quality pediatric eye health services. Through this grant, Orbis is developing a comprehensive model to deliver traditional and novel refraction technologies. Orbis is also training school physicians/nurses and district ophthalmologists in vision screening techniques, conducting school-based vision screenings, dispensing ready-to-clip glasses, and establishing a referral network among schools, district centers, and the tertiary health center in the capital, Ulaanbaatar.

LOW VISION IN MALAWI

BLANTYRE INSTITUTE OF COMMUNITY OPHTHALMOLOGY (BICO)

The Northern region of Malawi lacks dedicated pediatric eye health services or referral mechanisms for the over I million children residing in that region. Through this grant, BICO is establishing a pediatric resource center at the Mzuzu Referral Eye Hospital, complete with an optical shop and fully-equipped operating theatre, as well as strengthening the capacity of existing ophthalmologists and clinical staff to perform pediatric examinations and surgery. The program is also training district eye health workers and teachers to identify children needing care and to refer them to Mzuzu, thus enabling a continuum of care.

RETINOPATHY OF PREMATURITY IN NEPAL

HELEN KELLER INTERNATIONAL (HKI)

Given the declining neonatal mortality rates in Nepal, many babies are at increased risk of developing Retinopathy of Prematurity (ROP). Through this grant, HKI is currently developing a district-wide program that will utilize innovative telemedicine to screen and diagnose ROP in at-risk infants and build capacity of partnering hospitals to deliver quality ROP prevention, screening, and treatment services. HKI is also providing comprehensive counselling to caregivers of babies identified with ROP to increase adherence to follow-up care and strengthen coverage of ROP services.

PRIMARY POINT OF CONTACT

Christopher Pearson

Senior Program Manager

Email: childblindness@intsci.com