The challenge of improving program outcome and impact to enhance the delivery of equitable people-centered services

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Eye health care delivery in low-resource countries is complex, set within a host of multi-faceted considerations including: The need for universal health coverage, changing causes of vision loss and epidemiological patterns, under-resourced services, challenges of financing, cost recovery and patient insurance for eye care services, limited integrated health systems, limited governance and accountability, and varying approaches to service delivery with adequate financial support. To address avoidable blindness, cataract surgery is the most commonly performed sight-restoring intervention. However, uncorrected refractive error continues to be a significant debilitating condition which places unnecessary burden and loss of productivity upon people and requires improved intervention strategies for low-resource settings. A challenge is how to improve the efficiency, effectiveness and impact of program strategies. Additionally, the consideration of patient-centered indicators such as timely health seeking behavior, equitable services, vision quality and quality of life need further study. The Cambodian 2009 Knowledge Attitude and Practice survey showed that only 19% of people with self-reported impairments (including vision) reported being able to travel to the eye hospital on their own, whereas nearly twice as many people with no reported impairment (36%) stated they could travel alone. A follow-up study in 2013, of patients who had received refraction services, revealed that some patients reported concerns about the quality/durability/cost of spectacles. The challenge is to acquire and apply available evidence to enhance the delivery of integrated eye health services within the public health system. This presentation discusses the relevance of outcome measures including effectiveness, equity and quality.

Biography
Gail M Ormsby has completed her PhD from the University of Melbourne, Centre for Eye Research, Australia. She has worked in international humanitarian programs for more than 25 years. Her recent experience was focused in Pakistan, Cambodia and Vietnam. She is interested in addressing issues of quality and the barriers associated with accessing eye health care to decrease the impact of avoidable blindness.

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