

Case Study: National Eye Health Strategy (NEHS)

“Bridging the Research–Policy Divide”

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The Fred Hollows
Foundation NZ

I2S: Question 1

What was the provision of research supporting aiming to achieve and who was intended to benefit?

For what and for whom?

1. Purposes of research:

- Provide reliable data to develop a comprehensive eye health strategy for Timor-Leste
- Identify priorities for eye health program and key actions
- Aiming to Reduce eye problems in the country that enable people fully responsible for their life economically and socially
- Contribute to national development



Who was intended to benefit from doing so?



OTHER NGO
Interested
in EH
Area



a. Organizational Structure

President Republic

RACS

MOU

MOH

FHFNZ

Minister

CEO

VM

Int. Manager

Permanent Sec.

Policy & Planning
FHFNZ TA

Service Delivery

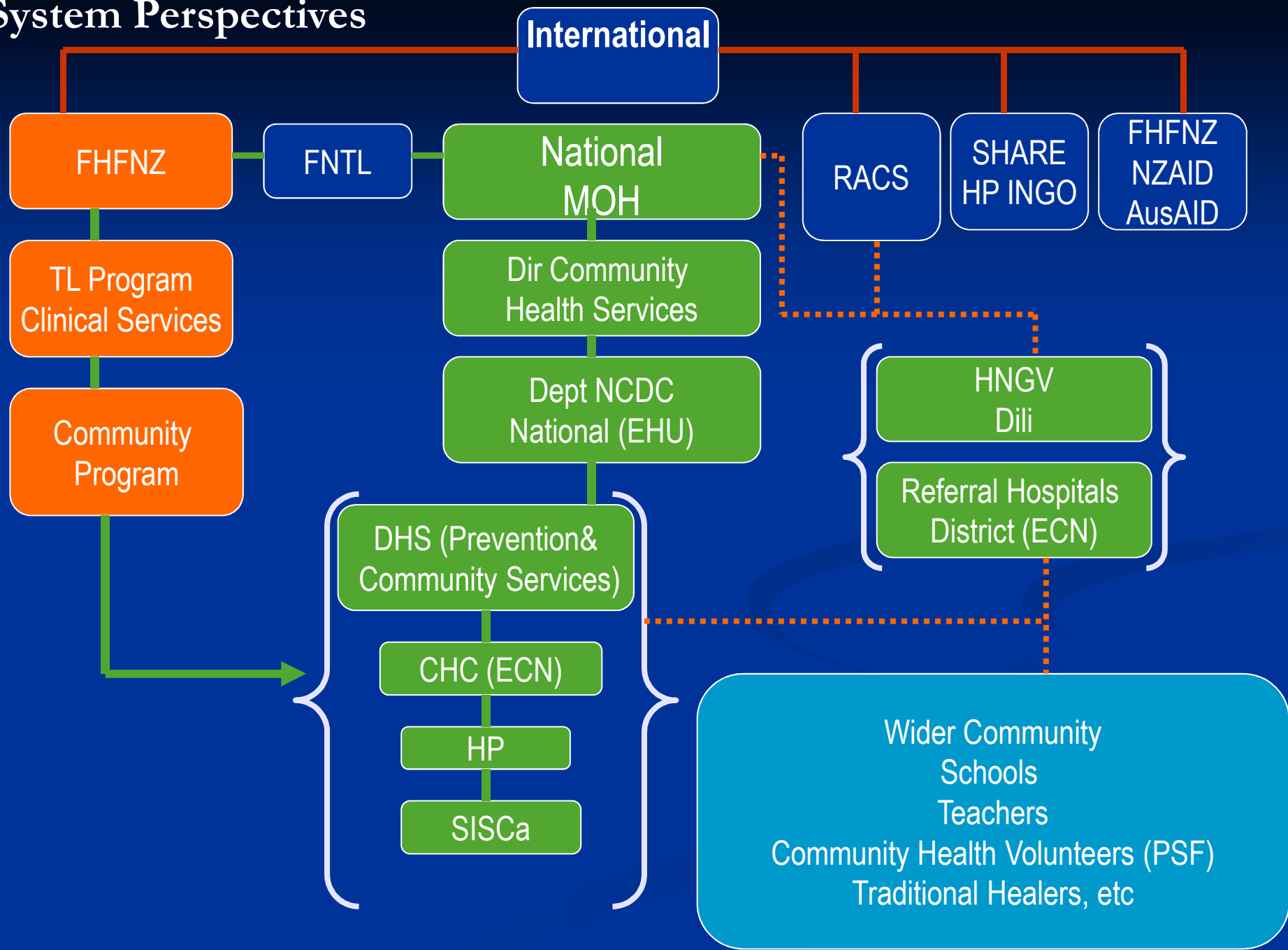
NCDC

Technical Advisor

Medical Director
Researcher
Statistician

INGO
Local NGO

System Perspectives



Policy Model

- Stages model is involved in shaping up the process of integrating the NEHS into the MoH strategically framework
- Rational Comprehensive model is highly involved in “providing evidence base”
- Engaging with MoH directly within the MoH system

Scoping

- There are many health constraints within the MoH included eye health in Timor-Leste
- Opportunity to create a policy and program if data on the size of problem becomes available

Boundary Setting



- Survey Cover 2 Districts of 13
- Involve 30 people/cluster 40 yrs+ (female Male)
- Required No of Participants 1500



c. Problem Framing

Celebrating World Sight Day in Timor-Leste and World Wide. Initiated by Vision 2020 and WHO



“The Fred Hollows Foundation (NZ) holds a vision of a world where no one is needlessly blind”

d. Taking values into account



*The Right to sight
(Vision 2020)*



*“Population who live in the city, in the mountains or in the valley, must receive the same quality of health assistance“
(Nelson Martins, Minister for Health, TL)*

Harnessing and Managing differences

- E. Deciding which differences to harness and which to manage

Harness

- Good relationship established between Technical Advisor and Senior Policy maker at MOH

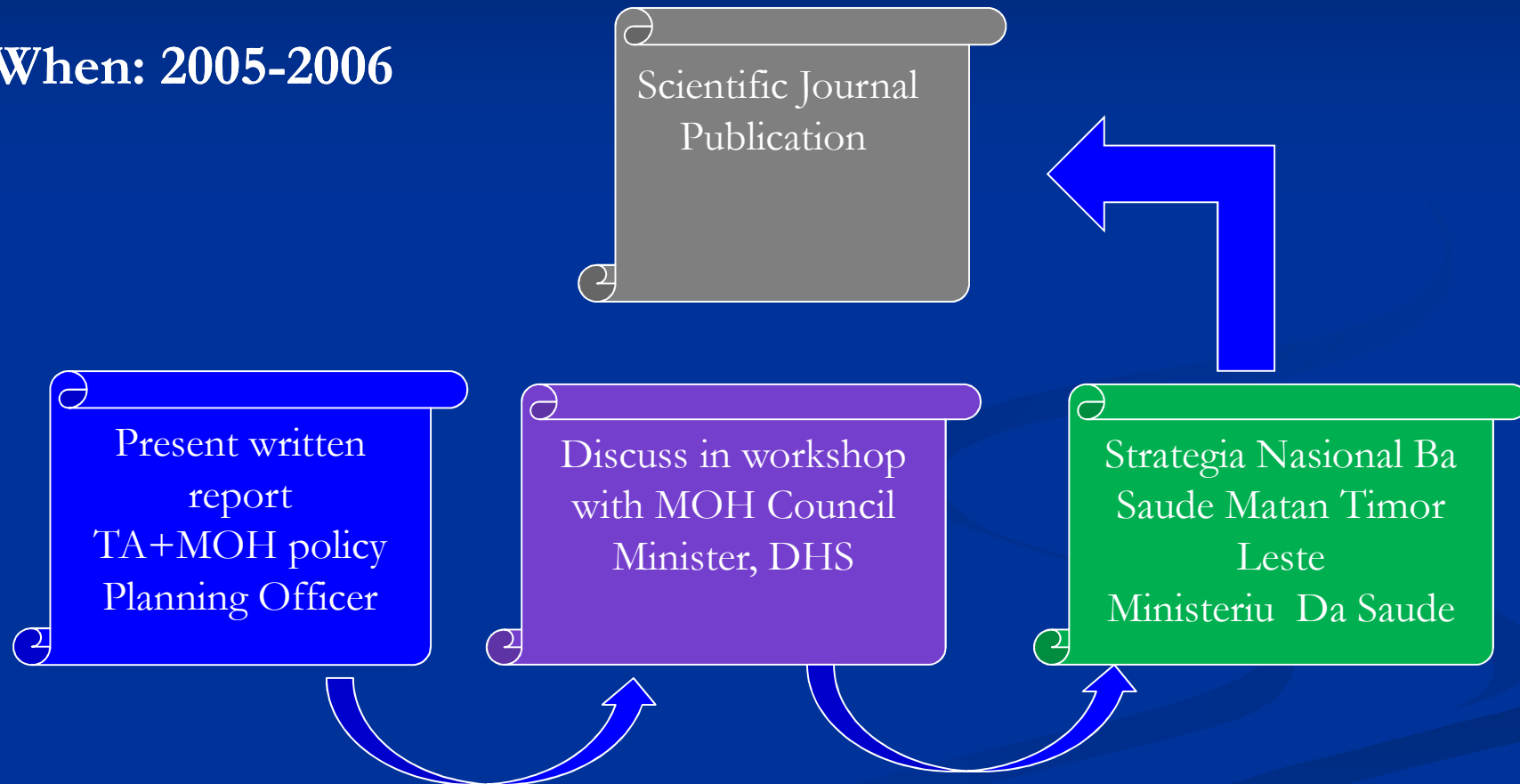
Manage

- RACS has different approach by providing annual eye surgery
- FHFNZ has long term commitment to working in country, capacity building national staff and working in partnership with MOH

Information Provided

- How the Foundation provide the information?

When: 2005-2006



Question 3: How, by whom and when?

Who was the responsible for the research?

- Technical Advisor for MOH- TL
- Researchers & Statistician,
- Eye expertise
- Senior Officer from MoH

Media was not involved

- **When:** Throughout the whole process

Overall Context factors

“we did not understand the extent of the problem” Former Minister for Health, TL

NEHS is undertaken – No Existing NEHS

Divided into five region:
Region1: 25% Population
Region2: 15% Population
Region3: 33% Population
Region4: 21% Population
Region5: 6% Population



Economic Under developed
Primary Economic Subsistence
agriculture.
Main commercial Rice and Coffee

Overall Context (2005)

In 1999, with massive displacement, loss of skilled health personnel, and almost total destruction of social and Physical infrastructure



Total population of 924,642

Female: 49%

Estimated Infant Mortality rate
60/1000

Estimated Maternal Mortality
range from 420-800/100,000

High Prevalence of Malnutrition

Vit A deficiency in Babies &
Children were high

Legitimacy

- MoH approved the Research Ethics & endorsed the Eye Health Survey
- MoH approved the NEHS
- FHNZ is International NGO
- Has good reputation in TL, Pacific and Internationally



Organizational Barriers

- FHFNZ do not have the resources to monitor National Eye Health Implementation
- FHFNZ has to work in the circumstances where people do not realize the value and importance of research

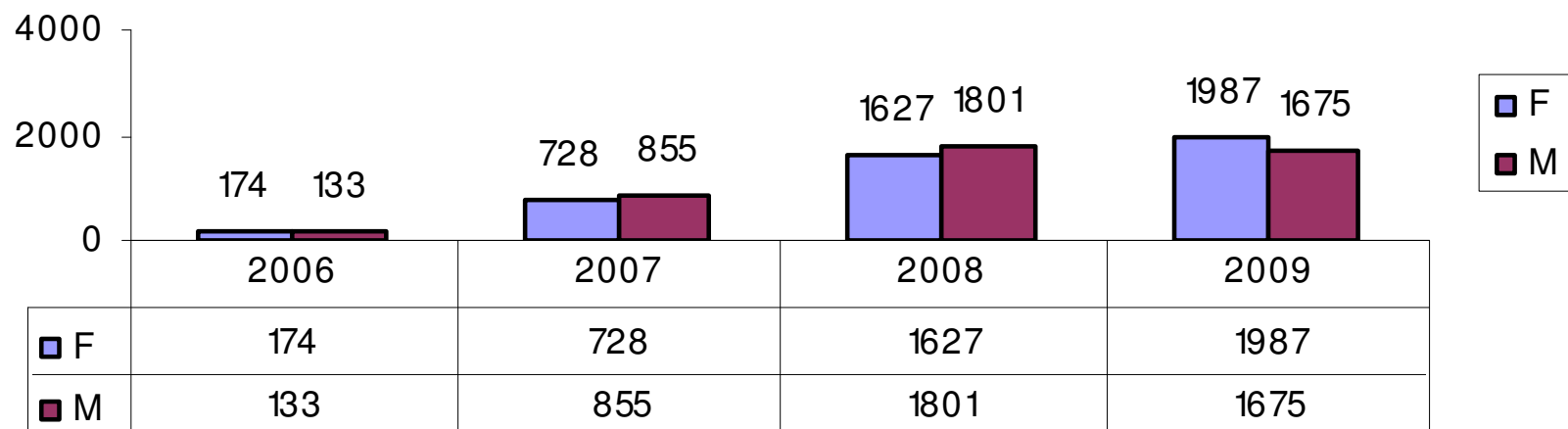
Organizational Facilitators

- Technical Advisor positioned was created within the MoH
- No conflict interest for FHF
- Collaborative work to conduct the research and develop the NEHS
- FHFNZ has well supported in providing the resources and funding for the program

Question 5: What was the outcome of the provision of (integrated) research support?

- How well did the provision of integrated research support meet its aims and target the intended beneficiaries?
- Policy maker : Developed a comprehensive NEHS and its implementation

RESULTADO ACTIVIDADES OUTREACH (PASIENTE NEBE HETAN OCLUS)



Question 5: What was the outcome of the provision of (integrated) research support?

1. How well did the provision of integrated research support meet its aims and target the intended beneficiaries?



Primary Eye Care: Healthy eyes activity have been implemented only in five schools. Coverage is still limited

Overall Outcomes

The research has provided the support needed for all beneficiaries in many different way and different level

BUT

Quality

needed further work:

**Accessibility of
eye care
services**

Equality

Question 5: What was the outcome of the provision of (integrated) research support?

1. Were effective methods used for providing integrated research support?

- The Engineering and Engagement
- Good relationship and trust that has been built up for long time

2. Would other methods have made useful contributions?

- ???????????

Question 5: What was the outcome of the provision of (integrated) research support?

■ Can only control

Technical Input

Conducting the research

■ Cannot Control

Decision making on its implementation and Monitoring

Evaluation

Thank You!

