

Which models of low vision service provision work best in low-resource settings?



Chair: Dr Karin van Dijk, Low Vision Consultant

Karin van Dijk advises on the integration of (paediatric) low vision care into existing eye health, (inclusive) education and disability-related programs in low- and middle-income countries. Her professional activities include the training of eye health, education and (re)habilitation professionals and caregivers; designing, developing and mentoring new low vision services; national and organisational low-vision-related policy development; monitoring and evaluation of programs; operational research to inform program and policy development; and the development of training curricula and service manuals.

She has worked in more than 25 countries in Africa, Asia, Latin America and Oceania for employers including CBM, Light for the World Netherlands, the Kilimanjaro Centre for Community Ophthalmology, Oxfam Novib and UNICEF.

She has a PhD in Low Vision Rehabilitation and an MSc in Public Health.

Workshop outline and aim

The demand for (paediatric) low vision care continues to grow. This is in part because children with low vision have in most countries now obtained the right to be educated at local schools, and their inclusion implies that they should also be able to obtain their 'best possible vision' when attending school. However, many tertiary and secondary level eye health services in low-resource settings are challenged in commencing or expanding the provision of clinical low vision services by limited human and material resources, skills and access to low vision devices, and this is exacerbated by a lack of community awareness of the need for low vision care.

The workshop illustrates lessons learned from clinical, educational and rehabilitation services providing low vision care in low-resource settings in Asia, Africa and Latin America. It aims to enable participants to describe promising models of comprehensive service delivery in low-resource settings, including planning and implementation strategies and minimum requirements needed to commence or upgrade services.

	time (min)
Facilitator: Introduction to the topic	10
Facilitator: Introduction to small group work by participants	5
Participants: Small group discussion of strategies, requirements and models using case studies	20
Participants: Feedback from small groups, summary of main points	20
Facilitator: Discussion of examples of successful strategies and models of low vision services in a variety of low-resource settings and comparisons with main points listed by participants	25
Questions	10