CATARACT

Moderator: Mr. Rainald Duerksen

Speakers: Dr. Boateng Wiafe

Dr. Sharif Lilah

Dr. Mariano Yee





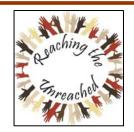


✓Awareness creation among public Methods to create felt need Case Finding & offer of treatment ✓ Strategies to address barriers Opportunities in marketing using patients ✓ Follow-up ✓ Networking ✓ Financing





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✓ Awareness creation among public
 ✓ Case Finding & offer of treatment
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Community Understanding

- Understand there need and felt need
- Counseling
- Use of existing network of Health Promoters
- Training volunteers and translators
- comprehensive eyecare services
- Zero cost policy transport, lodging



Using Patients as Promoters

- AECS post-op counselling/motivation
- Amethi patient experience not limited to visual acuity

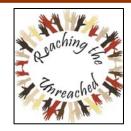
Finacing

- LRBT All treatment is TOTALLY free
- 20% paying, 70% subsidized, 10% free
- •Sustainability comes from quality not from funding



Motivating Ophthalmologists (staff) to serve in rural areas

- Distribution of resources according to the need
 - provide current care, training and appropriate resources to attract doctors
 - Create a sense of ownership
 - City doctors pooling resources for rural drs.



Principles

- Proactive Provider MUST go to the patient
- Must have adequate monitoring systems and accountability
- Voluntary community involvement