FACTSHEET

Improving vision for communities in Zimbabwe's Midland's Province

A health system strengthening approach to inclusive eye health.



Image caption: A patient leaves hospital following cataract surgery. ©CBM UK/Thabani.

When trust in healthcare is low, engaging community actors, including faith healers, can strengthen service uptake.

Project outcomes

8
district hospitals equipped with functional eye health equipment.

54,101
people accessed eye health services during the project.

1,483
health workers trained in inclusive eye health.

2,557
cataract surgeries performed.

Project description

Project Partners

HelpAge Zimbabwe, The Ministry of Health and Child Care Zimbabwe

Funding Partners

UK government through UK Aid Match.

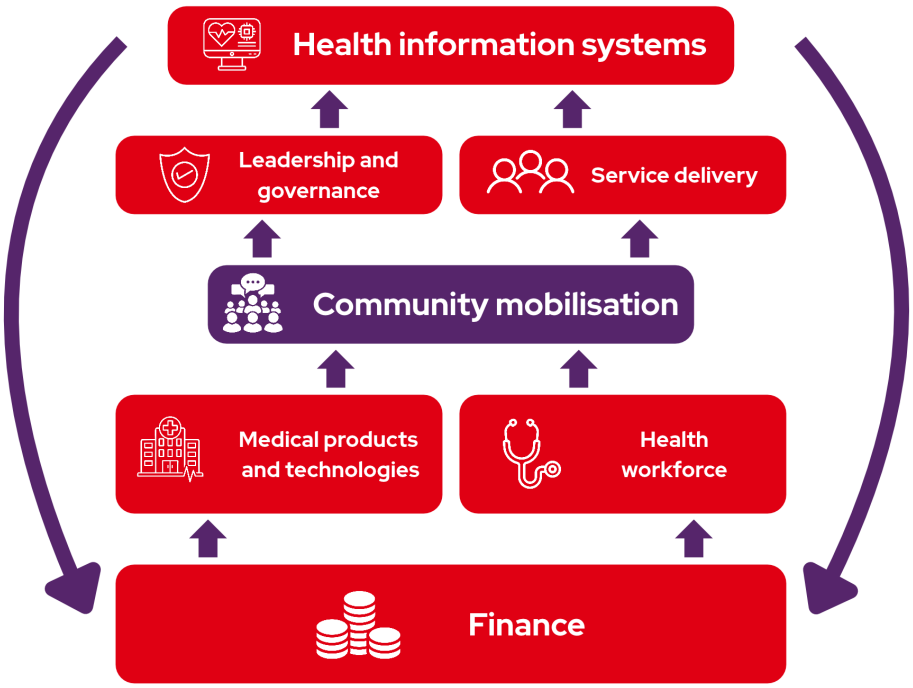
Project Timeline

July 2023 – September 2025

Midlands Province faced severe workforce and infrastructure gaps in eye health services, driving high rates of blindness, with 94.7% of bilateral blindness in the region considered avoidable. CBM and HelpAge Zimbabwe implemented a project underpinned by the WHO's health system strengthening approach, decentralising services and increasing access to eye health. Lessons from the project show that the building blocks of health system strengthening, shown below, must be applied as interacting components, not equal or separate parts.

Investment in infrastructure, equipment and workforce built the foundation for service delivery, while medical technologies, including the Arclight (an ophthalmoscope), and training of primary healthcare staff helped shift tasks to primary care. Community mobilisation, such as engaging traditional and faith healers and building a network of eye health champions, was critical for service uptake. In contexts where trust in formal healthcare is low, community mobilisation should be considered an additional building block of health system strengthening. Domestic finance is the foundation of sustainable system strengthening and investment should be guided by evidence from robust health information systems.

The building blocks of health system strengthening



Recommendations

The recommendations below identify priority actions for eye health system strengthening.

1. Advocate for sustainable domestic financing to integrate eye health into national health financing mechanisms.

Increased government investment and integration into national health financing policies enables long-term institutionalisation of eye health services. This underpins the success and sustainability of health system strengthening.

2. Strengthen collaboration between communities, health facilities, and health authorities.

Sustainable health system strengthening requires stronger connections among community groups, healthcare providers, and government systems. Programme design and investment should build on existing community and government structures, and stakeholder responsibilities must be clearly defined.

3. Invest in workforce development alongside health technologies.

Investments in low-cost technologies for primary healthcare can improve early detection, diagnosis and referral but their impact depends on an appropriately trained workforce. Programme implementers should pair technology investments with competency-based training, supportive supervision, maintenance systems and integration into routine primary healthcare.

4. Invest in in community mobilisation to strengthen service uptake and referral pathways

Where fears about contemporary healthcare are prevalent, community mobilisation is essential for improving service uptake. Programme implementers should engage trusted community members, and where appropriate, traditional and faith healers. This can support health promotion, strengthen referral pathways and reduce harmful practices.

5. Apply the WHO Health Systems Building Blocks Framework as an interconnected system

The building blocks framework should not be treated as a set of isolated or equally weighted components. Continuous monitoring, evaluation, accountability and learning (MEAL), supported by routine health information systems and referral pathway data, should be used to identify system bottlenecks, monitor progress and direct resources to areas of greatest need.



Image caption: Nelly threads a needle.©CBM UK/Thabani.

Project partners

HelpAge Zimbabwe

Christian Blind Mission (United Kingdom) Limited
1 Munro House, 20 Mercers Row, Cambridge CB5 8HY

Registered charity numbers: 1058162 (England and Wales) SC041101 (Scotland)

Search CBM UK to follow us on:

Visit our website: www.cbmuk.org.uk
Call us on: 01223 484700
Email us: info@cbmuk.org.uk

cbm Global Disability Inclusion