

Building networks of collaboration

VOSH chapters share valuable lessons of their work in Latin America and the Caribbean

This year our Midyear meeting took place on two separate dates: June 19th and 27th via Zoom. Two hundred and thirty-five different participants registered to the events with an average attendance of 65 attendants per session. 70% of the participants identified as members of either a VOSH or a SVOSH chapter, 20% were partners and 10% individuals. Participants represented 18 different countries namely Argentina, Bolivia, Canada, Colombia, Dominican Republic, Ghana, Guyana, Haiti, India, Nicaragua, Mexico, Peru, the Philippines, Trinidad & Tobago, Thailand, South Africa, Venezuela and the USA. Twenty US VOSH and SVOSH chapters were represented. We were delighted to welcome 8 Haitian third year optometry students.

As the biggest global network of volunteer optometrists, our impact can be increased through better collaboration between our chapters and with our strategic partners. The meeting aimed at improving the understanding of our chapters and partners' work in Latin America and the Caribbean and of the current situation of eye health and optometry in selected countries.

It was a remarkable journey through several countries that US VOSH chapters visit regularly and where we have local chapters. There is so much diversity between and within countries that the knowledge shared in the sessions will help us develop more tailored support for our chapters and engage them more actively in our planning.

The program of the meeting reflected the expertise of 25 speakers, four of which offered COPE accredited courses. The latter were offered by Dr Matchinski on the **Evaluation of Patients with Visual Impairment**, Professor Bruce Moore on **A Practical and Evidence-Based Approach to Vision Screening of Children** and Drs Timothy Wingert and Carol V. Pinzon on **The internationalization of optometric education**.

Panels were held on Mexico, Nicaragua, Dominican Republic, Haiti and Peru. Each country panel helped us understand a bit more about the dynamics and priorities that our colleagues have. We heard how our SVOSH chapters use their community outreach work to address unmet visual health needs of the local population especially where primary eye care is not a priority for the authorities, some chapters are using community outreach and research to generate evidence for change and building multidisciplinary collaborations in the process (SVOSH- Universidad Autónoma de la Laguna, SVOSH-Universidad Autónoma de Sinaloa, SVOSH- Universidad Autónoma de Nicaragua). Established US VOSH chapters have very effective systems and strong local partners who help them deliver the humanitarian clinics at scale (VOSH-Ohio in Mexico, VOSH-Connecticut in Nicaragua, SVOSH-NECO in Dominican Republic). More recently established chapters also engage more actively with education including patients' education stations where besides eye health they also offer information on systemic health topics like diabetes and high blood pressure using videos in Spanish or inviting local SVOSH chapters to join in their clinics (VOSH-Arizona). Other chapters provide training to community eye health promoters and resident MDs on eye health and prevention (VOSH-Fumvision-Dominican Republic). Improving the standards of education and clinical practice is a priority for chapters like SVOSH-Eurohispano-Peru that has managed to establish collaborations with several VOSH and SVOSH chapters and other international bodies for both purposes. In a context where the profession is not fully recognized and/or regulated these collaborations contribute to improve the quality of delivery and highlight the need to prioritize primary eye health care.

Recently established schools of optometry have successfully developed sound collaborations with local NGOs and key government agencies (education and health) that can generate the momentum required for sustainable services in the country (SVOSH- Universidad Autónoma de Nicaragua). A previous VOSH/International initiative in Nicaragua to establish local eye care services transformed itself into a local initiative -still with some VOSH-CA leadership-that it is contributing to the development of the optometric workforce and offers eye health services to the local community.

Collaboration between US VOSH chapters (Nebraska and Iowa) and a well-established local comprehensive health nonprofit provider works effectively to deliver eye health care, referrals and follow up for patients. These links can include good collaboration with volunteer ophthalmologists to ensure patients get the referrals and extended care needed (VOSH-PA).

Focusing on individual countries helped us understand the development of optometry and primary eye health care services and remaining challenges in Colombia. We also had a fascinating account of the situation of optometry in Trinidad & Tobago, the challenge of having a higher level of education than allowed by legislation, the efforts to change the policy and the importance of collaboration at the academic, organized profession and student levels. In Haiti, the new school of optometry will help address the significant eye health needs of the population but collaboration must be maintained to ensure students can achieve the professional level required by their role. In such a challenging environment, their optimism for the future can only motivate us to continue our support.

Other invited speakers included Dr Abraham Bromberg who shared a fascinating overview of the development of optometry in Mexico and took us through a historical trip from the first recorded glasses used in the Americas to the evolution of the organised profession and education reminding us of the importance of nurturing young talent and a different vision for the profession in a country with significant visual impairment challenges. Dr Castellanos, the president of the Latin American Association of Optometry and Optics-ALDOO, offered an insight on the situation of optometry in the whole Latin American and Caribbean region highlighting the extent of refractive error and blindness, key conditions and workforce needs. The role of optometry addressing socio-economic challenges was clearly outlined and how different organisations could contribute and take responsibility to support the development of the profession in the region. ALDOO's committees are making a clear contribution and VOSH/International is delighted to support these efforts.

Two full days of information and reflection could not have been possible without the support of a silent team of volunteers who helped us with the translation, moderation and technical support. The feedback received motivates us to continue with this type of initiatives and do better.

Thank you from VOSH/International.