

Contribution analysis on the revision of Senegal's electoral code and introduction of an eye health policy in Sierra Leone

A new approach to the evaluation of Sightsavers' policy and advocacy work in Irish Aid Programme Grant II

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List of acronyms and abbreviations

APC	All People's Congress
APROFES	Association for the promotion of women
CBM	Christian Blind Mission
CENA	National Electoral Commission
CONGAD	Council of Non-Governmental Organisations for Development
COSCE	Collective of Civil Society Organizations for Elections
DGAS	Directorate General for Social Action
DGE	Directorate for Elections
DHIS2	District Health Management Information System
EH	Eye Health
EMB	Election Management Body
ETE	End-term Evaluation
FSAPH	Senegalese Federation of Organisations for People with Disabilities
GRADEDEC	Group for the research and support for democratic participation and good governance
HKI	Helen Keller International
HREH	Human Resources for Eye Health
IAPGII	Irish Aid Programme Grant II
IAPB	International Agency for the Prevention of Blindness
MoH	Ministry of Health
NEHP	National Eye Health Programme
NGO	Non-Governmental Organisation
NTDs	Neglected Tropical Diseases
OECD DAC	Organisation for Economic Cooperation and Development – Development Assistance Committee
OPD	Organisation for Persons with Disabilities

PGA	Policy and Global Advocacy
PP	Political Participation
RADDHO	African Group for the Defence of Human Rights
SDGs	Sustainable Development Goals
SLPP	Sierra Leone People's Party
SLAB	Sierra Leone Association of the Blind
UHC	Universal Health Coverage
WAHO	West African Health Organisation
WHO	World Health Organisation

Executive summary

From 2017 to 2022, Sightsavers implemented a six-year programme funded by Irish Aid, to deliver eye care and inclusive education, eliminate neglected tropical diseases and promote social inclusion for people with disabilities across Senegal, Liberia, Sierra Leone and Cameroon. A key component of the programme was focused on advocacy, to promote inclusive government policies for the provision of rights and services for people with disabilities.

An end-term evaluation was conducted in 2021 to assess the effectiveness of the Sightsavers programme in meeting its original objectives. While the evaluation produced a useful assessment of the programme's achievements in eye health, inclusive education, NTDs and social inclusion, inevitably it could not provide an in-depth analysis of every aspect of such a large, complex and wide-ranging programme, and the evaluation approach was not well-suited to policy and advocacy work. This is because of the changing nature of political contexts in which programme objectives often have to be adapted, and key achievements may not correspond with the original objectives. Moreover, due to the complexity of advocacy, in which policy change can only be achieved through input from multiple stakeholders, it is not useful to limit an evaluation of a policy change to a single programme or organisation.

In consequence, the evaluation did not provide a comprehensive analysis of how some of the key advocacy successes were achieved or the extent of Sightsavers' role, and there were limitations in the learning to be taken forward. This is a common challenge in the evaluation of policy and advocacy, which has been encountered in evaluations of other programmes as well.

To address these issues, Sightsavers piloted contribution analysis as a new approach to the evaluation of policy and advocacy. This method involves identifying programme achievements, and collecting evidence from a range of stakeholders to understand how they were delivered, which players were involved, and the role of each stakeholder, giving a sense of each actor's influence in contributing towards this success. Programme successes are selected on the basis of their significance and impact on beneficiaries, irrespective of whether they correspond to the original programme objectives, and evidence is obtained from any stakeholders that it seems have been involved in contributing to the result. These attributes make contribution analysis a useful framework for the evaluation of policy and advocacy.

Sightsavers trialled contribution analysis, adapting the methodology according to the size and scope of the pilot, and applying it to two advocacy achievements delivered in the Irish Aid programme. The first was the revision of the electoral code in Senegal to make provisions for the accessibility of polling stations and enabling people with disabilities to select a person to assist them in the voting process. We interviewed eleven people, obtaining testimonies from all of the key players involved including the Senegalese Federation of Organisations for People with Disabilities (FSAPH), the Directorate for Elections (DGE) and the National Electoral Commission (CENA). The second was the

introduction of an eye health policy in Sierra Leone to set out the government provision for the delivery of eye care services. In this case, we interviewed nine people, spanning the Ministry of Health, National Eye Health Programme (NEHP) and the Sierra Leone Association for the Blind (SLAB). While contribution analysis would typically involve more extensive data collection, this pilot was restricted to two examples due to resourcing constraints, with an example from two countries and two thematic areas to trial the approach. Moreover, while contribution analysis usually involves the development of a theory of change, in this case it was not deemed necessary as this had already been done for the end-term evaluation. Nevertheless, the approach was based on the principles of contribution analysis and inspired by its methodology.

The interviews indicated the role played by each of the key actors, and the dynamics between them. In both Senegal and Sierra Leone, policy change was achieved through the long-term partnerships developed between government, civil society and international development players. In the case of Senegal, the revision of the electoral code was led by the FSAPH, representing people across the disability community and ensuring that the revised code met their needs. The DGE and CENA pushed forward the initiative at the government level, with Sightsavers as the leading external partner providing training on advocacy to the FSAPH, as well as technical assistance such as conducting accessibility audits and reviewing the electoral code, in addition to financial support.

Meanwhile in Sierra Leone, the eye health policy development process was led by the NEHP, with the SLAB providing coordinating input from the disability community. Once again, Sightsavers was the key provider of technical and financial assistance, contracting a consultant to draft the policy, delivering training in policy development to the SLAB, and facilitating consultations and engagement between government and civil society to ensure that the new eye health policy had input from people with blindness and visual impairment.

The contribution analysis revealed the principal external factors which enabled these advocacy achievements. In Senegal, this was primarily the national dialogue launched by the president in 2019, which created a favourable political environment through providing a structure for civil society engagement and putting issues of inclusion on the government agenda. Similarly in Sierra Leone, the political context was important, in particular the passing of the Disability Act in 2011 which raised the profile of disability issues, and the timing of elections in 2018 and 2023, providing a five-year period of political stability to focus on the eye care policy, which coincided with the Irish Aid programme.

Beyond this, the contribution analysis identified some lessons learned to be taken forward in future policy and advocacy work. These included the effectiveness of collaboration between government, civil society and international development partners, the need for long-term investment into building credibility and strong relationships, and the importance of the balance between providing sufficient support and ensuring local ownership.

This piece is intended to make sense as a lone-standing piece, but it also functions as an appendix to the 2021 end-term evaluation, providing two in-depth case studies to complement the full report. Ultimately, the pilot has demonstrated the value and viability of

the contribution analysis model, and Sightsavers will reflect on the experience to determine how it can be effectively applied in other programmes.

1. Introduction and background

Programme name: Irish Aid Programme Grant II (PGII)

Programme duration: 1st January 2017 – 31st December 2022

Total Programme budget: €12.7 million

Programme partners:

Cameroon	Ministry of Basic Education
	Ministry of Secondary Education
	Ministry of Decentralisation and Local Development
	Ministry of Territorial Administration
	Ministry of Social Affairs
	Father's House Muyuka Orphanage
	Inclusive Society for Persons with Disabilities, Platform
	Electoral Commission (ELECAM)
Liberia	Ministry of Health
	Phebe Hospital & School of Nursing
Senegal	Ministry of Health and Social Action
	Senegalese Federation of Organisations for Persons with Disabilities (FSAPH)
	General Directorate for Social Action (DGAS)
	National Electoral Commission (CENA)
Sierra Leone	National Eye Health Project (NEHP) (North, Southeast, West)
	Government Agency for Onchocerciasis and Lymphatic Filariasis

1.1 Programme context

Irish Aid Programme Grant II (IAPGII) was implemented in four countries – Sierra Leone, Liberia, Cameroon and Senegal – where between 2017 and 2022, Sightsavers delivered projects to provide eye care, eliminate neglected tropical diseases, deliver inclusive education, and promote social inclusion across the four countries. All of these countries rank in the bottom 50 on the Human Development Index and face constraints of poverty, limited resources in health systems and low prioritisation of social inclusion, particularly for people with disabilities:

- Liberia Eye Health 54009
- Sierra Leone National Onchocerciasis 57002
- Sierra Leone Eye Health 57011
- Cameroon Inclusive Education 42019

- Cameroon Political Participation 42020
- Senegal Eye health 56014
- Senegal Inclusive Education 56015
- Senegal Political Participation 56016
- Capacity building of southern partners 54012, 57016, 56020, 42028

Within each project, one component of the activities and budget was focused on policy and advocacy, with specific objectives to influence the governments in each of the countries to promote disability inclusion relating to eye health, NTDs, inclusive education and political participation. An external end-term evaluation (ETE) was completed in 2021, assessing the impact and effectiveness of the interventions, and evaluating the extent to which the projects met their objectives.

1.2 Limitations of the end-term evaluation

While the end-term evaluation report provided many useful insights and recommendations, it had a number of limitations in terms of its focus on advocacy. Firstly, the conventional approach to evaluation, in which progress is assessed against objectives set at the start of the project, is not well-suited to policy and advocacy work. This is because the advocacy is inherently political, and political contexts are prone to rapid and unpredictable change. Thus, while project objectives in thematic areas such as eye health and education are likely to remain consistent throughout a six-year programme, advocacy objectives have to be reviewed annually as they may no longer be appropriate, while new advocacy opportunities may have emerged.

One of the key advocacy achievements of the programme, reviewed in this piece, was the development of an eye health policy in Sierra Leone. However, development of an eye health policy was not one of the objectives listed in the Sierra Leone advocacy plan, (shown in the appendix 1). This is because in the policy environment in 2017, it was not apparent that this would be an area where policy change was possible, and the objectives were focused on implementation of the 2011 Disability Act and integration of eye health indicators into the district health management information system (DHIS2).

Secondly, the structure of the report follows the OECD DAC criteria rather than being sequenced by project or thematic area. As a result, there is no advocacy section, and the evaluation of the advocacy components of the projects are separated and truncated across multiple sections. The new electoral code for Senegal is covered on pages 61, 77, 78, 79 and 86, making it difficult for the reader to obtain a comprehensive understanding of how this was achieved and its overall significance for beneficiaries. Similarly, the development of the eye health policy in Sierra Leone is mentioned on pages 29, 55 and 81, as a result of which there is some duplication, no cohesive analysis and no detailed analysis of how this was achieved.

Thirdly, due to donor requirements, the end-term evaluation was conducted in 2021, although Irish Aid PGII continued until December 2022, with the no-cost extension, to provide time to catch up following the disruption caused by the COVID-19 pandemic. As a

result of this, some of the findings of the evaluation are not fully up to date as they do not reflect further achievements which were delivered in 2022. On page 81, the evaluation report notes that the Sierra Leone eye health policy is ‘currently undergoing MoH final reviews before launch’. The policy was launched in November 2022.

Fourthly, the specialisms of the external consultants were not focused on the specificities of policy and advocacy. In a programme comprising numerous thematic areas such as Irish Aid PGII, it is inevitable that the evaluation consultants cannot be experts in every aspect of the project. In this case, policy and advocacy did not receive a prominent position in the evaluation, and the coverage of policy and advocacy indicated a lack of understanding among the consultants of the intricacies of the contexts and policy making processes.

Lastly, following the conventional evaluation approach, the report focused solely on Sightsavers’ role in the projects. In the case of policy and advocacy, change is delivered through long term engagement by multiple governmental and non-state actors, and it is not realistic or appropriate to expect an NGO such as Sightsavers to single-handedly deliver policy change. Therefore, an evaluation approach focused on one actor will be limited in its ability to provide a useful understanding of how policy change was achieved.

As a result of these limitations, the evaluation report was able to provide an overview of some of the advocacy achievements, but it did not provide new information to Sightsavers teams or country office staff involved in the projects in terms of policy and advocacy, and it didn’t reveal any new insights or provide useful recommendations or learnings to take forward in future projects.

2. Contribution analysis

Contribution analysis is an evaluation approach developed in the early 2000s, as a new method for understanding the consequences of a policy or programme intervention in contexts in which conducting a scientific experiment or randomised control trial is not possible. Rather than attempt to prove that a policy or project caused a specific outcome, this approach seeks to assess the contribution that it made to any observable changes. According to Better Evaluation,

“The essential value of contribution analysis is that it offers an approach designed to reduce uncertainty about the contribution the intervention is making to the observed results through an increased understanding of why the observed results have occurred (or not!) and the roles played by the intervention and other internal and external factors”¹.

The end product is a Performance Story, articulating how each actor contributed to the key achievements.

Contribution analysis was first outlined as an approach to evaluation in a 2001 article in the Canadian Journal of Programme Evaluation by John Mayne. As Mayne explained,

“Contribution analysis does not seek to conclusively prove whether, or how far, a development intervention has contributed to a change or set of changes. Instead, it seeks to reduce uncertainty. The aim is to produce a plausible, evidence-based narrative that a reasonable person would be likely to agree with. Contribution analysis can also be used to help explain how and why changes occurred”.²

According to Laura Hopkins, lead on policy and advocacy evaluation at Itad, an evaluation consultancy, this makes a contribution analysis ‘a flexible approach that lends itself to advocacy impact evaluation.’³

While contribution analysis has been written about extensively, it remains relatively new to the international development sector. In 2014, researchers at the University of Sydney used contribution analysis to understand the outcomes of state-wide public health intervention delivered in New South Wales, Australia.⁴ Itad gave a presentation on contribution analysis at the UK Evaluation Society conference in 2019, and Oxfam employed contribution analysis as part of an impact evaluation of regional influencing work in East Africa.⁵

The purpose of this piece is to pilot contribution analysis as a new approach to the evaluation of policy and advocacy at Sightsavers, and to assess the extent to which contribution analysis is a viable model. Contribution analysis has a number of potential advantages which make it more suited to the dynamics of policy and advocacy, including:

¹ <https://www.betterevaluation.org/methods-approaches/approaches/contribution-analysis>

² Mayne, J., 2011. Addressing Cause and Effect in Simple and Complex Settings through Contribution analysis. In R. Schwartz, K. Forss, & M. Marra, eds. Evaluating the Complex. Transaction Publishers

³ <https://www.itad.com/wp-content/uploads/2021/03/Contribution-Analysis-Report.pdf>

⁴ <https://journals.sagepub.com/doi/abs/10.1177/1356389014527527?journalCode=evia>

⁵ <https://oxfamilibrary.openrepository.com/bitstream/handle/10546/621454/er-oxfam-heca-influencing-impact-evaluation-281122.pdf;jsessionid=954B34A9C11A38E9387BA84CFD0F50A0?sequence=2>

- A more flexible approach in which any achievements can be evaluated, not only those relating to original objectives
- Giving a broader assessment of contribution involving all key actors involved in delivering change, beyond the role of Sightsavers and the project under review
- Acknowledgement that many factors influence a given outcome. It is not trying to prove attribution or claim that Sightsavers was the sole driver of change.

3. Methodology

3.1 Contribution analysis evaluation approach

There are different approaches to contribution analysis according to the subject under evaluation. One approach is contribution ranking, in which information is collected to assess whether the contribution of a project activity to a policy outcome was high, medium, or low. A second approach involves developing a theory as to how change was delivered, and then gathering evidence to support the theory. A final approach is contribution tracing, a more complex approach in which a hypothesis is tested to assess the extent to which we can be confident in the claim that our intervention played a role in delivering change.

In this case, we took the second approach, gathering information to assess the extent to which Sightsavers and other external organisations played a role in achieving some of the key advocacy successes across IAPGII. However, as the contribution analysis piece is a small pilot and designed to complement the existing end-term evaluation of IAPGII, we did not develop a separate theory of change as would typically be done in contribution analysis, as this had already been done as part of the wider evaluation. The scope was limited to analysing two instances of policy change, with twenty people interviewed in total, of which eight were Sightsavers staff, a smaller sample than would typically be used. In this way, our methodology based on the principles of contribution analysis, adapted and simplified to address the gaps that had been identified in the end-term evaluation.

The contribution analysis was conducted by Sightsavers' Policy and Global Advocacy (PGA) team, with the Senior Global Advocacy Advisors and Global Advocacy Officers for anglophone and francophone West Africa taking the lead in conducting interviews with internal and external stakeholders in country. Consultations with Sightsavers country offices in Senegal and Sierra Leone were held to determine the focus of the contribution analysis and the key stakeholders to be approached and interviewed, and to obtain the necessary context analysis and background. The piece was coordinated and written up by the Global Advocacy Monitoring Advisor and Global Advocacy Manager.

For the purposes of the contribution analysis, one example of an advocacy success achieved during IAPGII has been selected from each of the two countries stated below.

Senegal	Revision of the electoral code
Sierra Leone	Development of the national eye health policy

The examples of successes were selected to reflect some of the key achievements made in advocacy during IAPGII. The revision of the electoral code relates to the political participation project in Senegal, while the introduction of the new eye health policy relates to the eye health project in Sierra Leone, ensuring that the piece covered two separate thematic areas. Senegal and Sierra Leone were selected due to the presence of PGA staff in country, making it more possible and cost-effective to conduct in-person interviews with external stakeholders, while the team does not have a presence in Cameroon or Liberia. The piece was limited to assessing two achievements as part of a small pilot project.

The contribution analysis piece was conducted in the autumn of 2023. This is because the IAPGII projects ended in December 2022, and it was important to make sure that this evaluation was delivered within a year of project completion so that key stakeholders in Sightsavers and partner organisations were still in post, and had the advocacy successes in recent memory for the purpose of conducting interviews.

In order to assess the extent to which Sightsavers played a role in delivering these advocacy successes, we conducted a range of interviews with Sightsavers staff who were involved in delivering policy and advocacy work in Senegal and Sierra Leone. In addition, we arranged interviews with representatives from partner organisations, government ministries, organisations for persons with disabilities, other international development organisations and any other stakeholders who we thought may have played a role in the advocacy achievements under review. We used the same interview questions (seen in appendix 3), to provide a standardised framework between interviews and in both case studies.

In Senegal, a total of eleven people were approached for interviews. Interviewees encompassed representatives of Sightsavers at regional and country office levels, those of the Federation of organisations for persons with disabilities (FSAPH) including representatives of its women's committee, government representatives at the general directorate for elections (DGE), as well as representatives of civil society such as the group for the research and support for democratic participation and good governance (GRADE). In Sierra Leone, nine people were interviewed, including representatives from the Ministry of Health and National Eye Health Programme, current and former Sightsavers' staff, as well as members of other international organisations including Helen Keller International and Vision Aid Overseas.

While we conducted extensive interviews, it was not possible to obtain meetings with every governmental and non-governmental organisation involved. However, using the testimonies, we have produced an analysis for the two cases of policy change in Senegal and Sierra Leone, providing an assessment of the extent to which Sightsavers and other stakeholders played a role in delivering this change. Due to the qualitative nature of the content, it is not possible to conduct a statistical analysis or arrive at a conclusion as to a percentage figure as to the proportion of the input provided by each actor. Instead, we have produced a

performance story for each country, giving an account of the contributions made by the key stakeholders and partners and the interplay between them. This gives us a rich picture of how policy change was achieved in each case. Finally, we have identified some of the best practices and challenges encountered, the key lessons learned, and some recommendations to take forward in future projects.

3.2 Challenges, limitations and mitigation

The evaluation faced several challenges, including:

- Some internal and external stakeholders involved in delivering the advocacy achievements of IAPGII were no longer in post and unavailable. However, we endeavoured to arrange interviews with as many internal and external stakeholders as possible.
- Some key developments along the way to reaching the selected advocacy successes happened several years ago. In some cases, information was not available, and the recollections of stakeholders may not be fully accurate. However, through interviewing a wide range of people, we attempted to compile as complete an assessment as possible.
- Due to the limited number of examples of advocacy successes selected, it is not possible to reach clear conclusions or comparisons as to the extent of Sightsavers' role in each country, and the results could look very different if different examples had been selected. In this way, it will not be possible to conclude that Sightsavers has been more successful in one country than another, or that the extent of Sightsavers' role was greater overall in one country than another, and this is not an aim of the contribution analysis piece.
- The interview questions were asked by Sightsavers' staff, and nearly half of the interviewees were Sightsavers' staff. This may lead to some inherent bias in which the role of Sightsavers' is overblown. However, we have included questions referring to the role played by other organisations and actors, and the piece starts from the understanding that Sightsavers is not, cannot and should not be the only actor involved in achieving the successes in policy and advocacy.
- The findings from the interviews will not be fully objective, there will inevitably be an element of subjectivity. This is acknowledged from the outset and was addressed as far as possible through ensuring that interviewees included a mix of stakeholders, but due to the limitations in time and scope, it was not possible to secure testimonies from all people involved.
- The piece will not be able to display proof of attribution or demonstrate scientific evidence showing statistically significant data as to the precise role that Sightsavers played in each case. This is acknowledged from the outset and the piece will instead endeavour to show how Sightsavers contributed to the changes in policy that have been identified.

3.3 Reporting of findings

The target audience for the report is the donor, partners, programme staff and global programme support teams within Sightsavers. The learning from the experience of conducting contribution analysis will be reviewed, and if deemed successful, the approach will be applied to policy and advocacy in other Sightsavers projects. The findings were presented and discussed in advance to enable stakeholders to respond and input into them, before the report was finalised. The report and its findings have been made accessible to the interviewees, and the content is available in both English and French.

4. Revision of the electoral code in Senegal

4.1 Coverage in the end-term evaluation report

The revision of the electoral code is mentioned in the end-term evaluation report. On page 78 it notes, “the most significant long-term change in Senegal (in the PP project) was the change in electoral code”. Beyond this, it quotes an official at the Ministry of the Interior saying,

“...many articles have been introduced in the new electoral code, unlike in the past when there was only one article, Article 80, dedicated to people with disabilities. And now, there are a number of provisions that have been revised, with the aim of facilitating access to polling stations so that people with disabilities can exercise their rights. The new code states that physically disabled people are allowed to select the most accessible polling station. That is notable progress”.

However, the ETE goes on to note that, “nonetheless, evaluation respondents pointed out that more work remains to be done and that time and patience are necessary for people to further advance their PP”. The report doesn’t explore how the revision of the electoral code was achieved, and ultimately it gives more coverage to the voter registration and political participation of individuals than the aspect of policy, even though this is the more important and sustainable long-term achievement of the project.

4.2 Significance of the revised electoral code

The revision of the electoral code is an important step forward in making the electoral process accessible for people with disabilities. In addition, the revision of the electoral code has strengthened the political participation of people with disabilities. The year 2021 saw the amendment of Articles 69 and 80 to provide people with disabilities with the option of being assisted at polling stations by a person of their choice, and to address access to polling stations for people with disabilities. As a result of these amendments, regardless of where

they vote, people with disabilities have the right to cast their vote at the most accessible polling station in the area, and their names are added to the polling station's list of voters.

The local elections held in 2022 were the first to be held under the new electoral code. While the change in the law inevitably doesn't translate into instant implementation across the country as this takes time, people with disabilities noted the difference in the voting experience. According to Khady Ba, Vice President of the FSAPH, "It felt great to go to voting centres and be able to vote in any one of the stations. The only thing is that many of the staff members were not aware of the existence of the electoral law. More needs therefore to be done to sensitize people on it."

4.3 Which stakeholders contributed to the advocacy success and what role did each of them play?

The contribution analysis revealed that the revision of the electoral code was made possible through the efforts and collaboration of a wide range of stakeholders. These included the Ministry of the Interior through its Directorate for Elections (DGE), the National Commission on Elections (CENA), the FSAPH, civil society organisations, technical and financial partners such as Sightsavers, community and religious leaders as well as political parties and the media. However, the key was the triptych of the Directorate for Elections (DGE) at the state level, OPDs collaborating through the FSAPH, and Sightsavers as a technical and financial partner. As Mr. Alioune, Diallo, Director of the DGE said,

"The review of the electoral code is the success of the collaboration between the three parties, to have the technical and financial partner (Sightsavers), the commitment of people with disabilities to lead the campaign (FSAPH), and at the centre, an attentive ear of the State through the DGE".

The government of Senegal

The government of Senegal, represented by directorates within some of its ministries, was a key strategic player in the process. Firstly, President Macky Sall launched a national dialogue in May 2019, to build political consensus and calm tensions following his controversial election victory in February 2019. This created an environment that was conducive to civil society engagement and allowed the FSAPH to position itself as a key player. Conversely, the interest expressed by the FSAPH to be part of the national dialogue allowed the government to demonstrate its openness to engagement with marginalised groups, counteracting criticisms levelled at the government in the past for ignoring minority voices.

"For us, the main door was the state", said Khady Ba, Sightsavers' Project Officer on Political Participation, who recalled all the measures put in place at the time to support the FSAPH. In previous elections, the FSAPH had already been given observer status and had been able to see the shortcomings in terms of voting.

It was the President of the Republic who called for the dialogue and who by decree, appointed the coordinator of this dialogue. This led to the establishment of nine committees, in which issues of inclusion could be discussed, creating a structure for the FSAPH to engage with ministry officials.

Within the government, responsibility for elections sits with the Ministry of the Interior. Within the ministry, the General Directorate of Elections (DGE) is in charge of organizing the elections, and the National Electoral Commission (CENA) is a separate entity whose role is to oversee the elections and ensure they are conducted in a fair and transparent way. To this end, the CENA has staff represented at all polling stations to ensure that the elections are held in compliance with the electoral code.

The process for the revision of the electoral code was the following: an audit of polling stations and the electoral code, reviewing the accessibility for people with disabilities, led to the production of a report and recommendations. Together with other partners, the FSAPH developed the recommendations into seven key asks, on which it engaged the DGE. These were: (i) the provision of posters in front of each polling station; (ii) the implementation of an inclusive voting station or voting room in each voting centre; (iii) the possibility given to persons with disabilities to be accompanied by a person of their choice and or to have support within the voting station; (iv) introducing braille into the design of all documents related to the electoral process; (v) making mandatory the presence of sign language interpreters in voting stations; (vi) the provision of appropriate inclusive infrastructure and logistics; (vii) political parties to introduce a quota for a minimum number of people with disabilities among the first 10 candidates on their party list.

Within the code, articles 69 and 80 were key targets for revision. Article 69 is intended to address the needs of people living with a disability or difficulty judged to be temporary, such as pregnant or breastfeeding women, or people suffering from a physical injury hampering their ability to exercise their right to vote. Meanwhile Article 80 focuses on the needs of people with disabilities. In order to amend the electoral code to make it more disability inclusive, the FSAPH, with support from Sightsavers, worked on incorporating the key recommendations into these two articles.

Sightsavers contracted a consultant from the Group for the research and support for democratic participation and good governance (GRADEDEC) to draft a suggested revision to the electoral code. A committee was then formed to review the electoral code and the suggestions revisions to the text, with representatives from the DGE, CENA, political parties and civil society. This committee approved all of the recommended revisions to the electoral code apart from the introduction of quotas for people with disabilities among party candidates.

Once the revisions had been approved by the committee, they were formally included in the electoral code by technical focal points at the DGE, under the supervision of CENA. The amended code was presented at a ministerial meeting for validation, and then at the National Assembly for approval by MPs.

Political parties

Political parties played an important role in the revision to the electoral code through their engagement with civil society and in the committee for reviewing the code. Political party leaders hosted meetings with the FSAPH at the party headquarters, while some met in restaurants or even their private homes, to discuss the proposed changes to the electoral code. All of the main political parties including the President's Alliance for the Republic party, the Democratic Party and Bokk Gis Gis all responded to requests for meetings and showed interest in the issues of disability inclusion and the accessibility of the electoral process. Political parties opposed the introduction of quotas for people with disabilities among election candidates on the grounds that this would be positive discrimination. However, they approved all of the other changes to the electoral code.

The FSAPH

The FSAPH positioned itself as the leader of organisations of people with disabilities so that they take ownership of the process before going to the actors for advocacy. It has thus played several roles:

- Mobilisation: The FSAPH mobilised people at the community and national level and contributed to the identification of actors as well as stakeholders.
- Empowerment and Training: The FSAPH strengthened the capacities of actors including opinion leaders including the DGE, political parties, journalists, etc. on disability-related issues and related instruments, among others.
- Advocacy: The FSAPH positioned itself in its role as a catalyst and took the lead in advocacy to meet with stakeholders and convince them, initiating actions that triggered the process. Within the national dialogue, there was a political dialogue that brought together all stakeholders, including election management bodies (EMBs), to discuss how to make the electoral system inclusive. This dialogue, beforehand, had not taken into account people with disabilities and therefore the FSAPH played an important role to convince the decision-makers of the need to integrate the commissions.
- Shaping the balance of power: The FSAPH was able to position itself as a central player, ensuring that the group dynamics and balance of power between other actors was conducive to the dialogue.
- Raising the profile of people with disabilities: Many institutions and people were previously unaware of the existence of the federation. This was the case of Mr. Babacar Gaye, Secretary General of GRADEC:
"It was as a consultant that I knew that an organisation existed, well structured, organised with an office and within it different associations with branches everywhere in the areas where the project is implemented. The FSAPH's organisational system is to be commended".

Two of the FSAPH's leaders, the former president, Yatma Fall, and Mr. Moussa Thiaré, the Secretary General who became the new president of the association, have been a key strength of the FSAPH. These two individuals have been key players in this success

because of their ability to conduct effective influencing and advocacy. Mr Fall is a member of the High Council for Local Authorities, and he is number two in a party, well established at the political level and at the African regional level. He is the head of the structure at the sub-regional level. This is what allowed the FSAPH to manage the situation well and to develop a functional management structure.

However, it should be noted that in this same phase of the project, the General Assembly of the FSAPH reported internal vulnerabilities which "undermined the effectiveness of the FSAPH", given that the President had a mandate that had expired a few years ago. Nevertheless, this strength in leadership remains what people remember in the success that has been noted with the revision of the electoral code.

Sightsavers

Sightsavers played an instrumental role in raising the profile of disability rights, and advocating with the commission to deliver an inclusive electoral code. In its role as consultant, starting in 2017 with the accessibility audit, the role of Sightsavers, according to GRADEC, can be summarised as follows:

- Financial support for the FSAPH
- Provision of human and logistical resources, programme and project managers who were there to provide support, including the institution's Country Director at the time, who spared no effort to achieve the result. The names of three people came up frequently, even with the government representatives, namely Khady Ba, Astou Sarr and Salimata Bocoum. During the mission to Cameroon, Astou Sarr's leadership was mentioned and recognised in her role as head of delegation in Cameroon, who facilitated meetings and prepared the Cameroon team even before the delegation arrived.
- Logistical support by making its premises available for a number of strategic and technical meetings.
- Facilitating meetings with parties and others
- According to the CENA representative, 'in operations, Senegal refuses to be financed for the organisation of elections. However, there is a need for support in other aspects of the electoral process, and Sightsavers' coverage of certain aspects of training and communication has been and remains a considerable added value.'

Other perceptions of the role of Sightsavers, particularly those of representatives of the women's committee, have shown that the provision of financial resources by Sightsavers made a number of things possible:

- Building the capacity of FSAPH members involved in politics through training and coaching sessions of all kinds, building their capacity to engage in politics.
- Providing access to venues, which enhanced the profile of the FSAPH.
- Raising the awareness of a number of stakeholders, in particular local authorities and other political parties, through covering the costs of events, meetings, venue hire and transportation costs. This financial aspect should not be overlooked in achieving the advocacy results achieved.

- Support for networking between the FSAPH and government stakeholders, enabling the OPD federation to have access to scope to influence policy change.

Sightsavers' essential role in achieving the result led Mr Diallo at the DGE to say that “without Sightsavers and its presence, this project would never have succeeded”. He continued: “We needed support. Legislation means a process of negotiation and discussion in order to reach a conclusion”.

In addition to providing financial support for the process, Sightsavers was always available for the FSAPH as a companion and facilitator. Most of the players interviewed recall Sightsavers' constant presence in the room and in the technical sessions, making it “more than a typical technical and financial partner”. Sightsavers was fully involved in the entire process, including the drafting and presentation of key documents, in particular relating to the FSAPH's recommendations and during the federation's hearing before the electoral commission.

4.4 What evidence and documentation do you have to show the importance of Sightsavers' role?

“The review of the electoral code is the success of the collaboration between three parties, namely the technical and financial partner (Sightsavers), the commitment of disabled people to take up the fight (FSAPH), and before them, an attentive ear from the state through the DGE.”

Alioune Diallo, Director DGE, Ministry of the Interior

Interviewees pointed to a number of sources indicating evidence of Sightsavers' role in achieving the revision of the electoral code. These include:

- Minutes of meetings, including regular meetings held with the committee in charge at the National Assembly, to see all the proceedings and what was documented
- Reports on capacity-building activities
- The terms of reference for various meetings held (preparatory meetings, discussions with stakeholders, presence of Sightsavers during interventions)
- Photos of meetings and events
- Documentary film produced by Sightsavers about the revision of the electoral code, covering the story of a woman with disabilities, Madjiguene Gueye, who was elected as deputy mayor of Louga, and the role of the project.
<https://www.youtube.com/watch?v=SSqy9ebiPT4&t=155s>
- Following the accessibility audit, a report was produced containing 15 recommendations which were prioritised and led to the review of 2 articles.
- Minutes of meetings, including those between Sightsavers and FSAPH.
- Photos, speeches and media coverage of the launch of the revised electoral code which refer to the role of Sightsavers.

- Attendance lists showing the participation of women in awareness-raising and capacity-building activities organised by Sightsavers. Many of these women went on to stand as candidates in the local elections and some were elected as councillors

4.5 Which role did other stakeholders play in delivering this change (other international development organisations; government ministries; organisations for persons with disabilities and any other institution)?

Civil society

Several civil society actors were identified for the different strategic roles they played in achieving this outcome, including GRADEC, CONGAD, COSCE, Raddho; the Civil Forum; women's civil society organizations, opinion leaders including community leaders such as the Bajenu Gox, religious and traditional leaders, as well as the media.

GRADEC

The Group for the research and support for democratic participation and good governance (GRADEC), through its Secretary General, carried out the initial study on accessibility. It also facilitated contact with the leaders of the political parties, acted as a link between the FSAPH, Sightsavers and others, although CSOs have also played this role, and accompanied the federation as it invited the FSAPH to take part in its activities on governance. A partnership was established between GRADEC and the federation. It contributed to the technical support provided, including some training on the electoral code. Mr. Babacar Fall was a political actor before being in civil society and therefore he was able to facilitate with his relational network in addition to interpersonal and relations in the political environment. He contributed to the necessary steps and called on political leaders to facilitate the meetings, accompanying people with disabilities to explain the objectives. He also supported the FSAPH to coach them, especially during the presentation of the memorandum to be presented to party leaders so that they include disability in their manifestos.

CONGAD

The Council of NGOs for Development (CONGAD) was an important bridge between the FSAPH and civil society. The national dialogue enabled an effective engagement between the FSAPH, CONGAD and government stakeholders.

COSCE

The Collective of Civil Society Organizations for Elections (COSCE) invited the FSAPH to follow up on the 2019 presidential elections with the set-up of a 'situation room'. The situation room provided an opportunity to connect with civil society organizations on electoral matters and for persons with disabilities, an opportunity to follow live events during the elections and understand how to address any emerging issues. This opportunity allowed the

FSAPH to meet with the Ambassadors of Great Britain and the United States as well as representatives of the European Union. COSCE and the Stakeholders' Platform for Election Transparency contributed to the review of the electoral code and supported the process of this integration.

RADDHO

The African Group for the Defence of Human Rights (RADDHO) contributed to the revision of the electoral code through providing training to the FSAPH. In addition, the RADDHO joined a delegation from the FSAPH, DGE and CENA to Cameroon. Several working meetings were held with the technical advisers of the Chief Electoral Officer while important activities and trainings followed. Together with the Civil Forum, the RADDHO, provided training and technical assistance in understanding the reform of the electoral code as a matter of human rights.

The RADDHO participated in a visit to Cameroon to share experiences and best practices, part of a delegation made up of GRADEC, CENA, FSAPH and Sightsavers. This visit, facilitated by Sightsavers, was an opportunity to learn from the experience of Cameroon, to see how the needs of people with disabilities are addressed in the electoral system, in particular through the adaptation of voting materials. In Cameroon, polling stations are made accessible for people with different disabilities, with access for wheelchairs and lower tables for people of shorter stature. Observing the different approach and the impact on people with disabilities in a country with similar demographics and developmental indices was important in demonstrating for the whole delegation that progressive change to the electoral code was possible and practicable.

Community leaders

The Bajenu Gox

Bajenu Gox is a Wolof name which translates as 'community grandmothers'. This is a women's community group who promote community mediation and development, raising awareness at the community level to encourage people to enrol on the electoral register, collect voting cards and obtain birth certificates. While the Bajenu Gox was not involved in the revision of the electoral code per se, it played an important role in sharing information once the code had been changed, and in encouraging people with disabilities to vote in the local and parliamentary elections held in 2022.

Religious leaders

Religious leaders played an important role in shaping community attitudes, awareness and behaviours towards people with disabilities. Imams' sermons covered the theme of people with disabilities and the importance of their political participation. In Louga, Kaolack, Kaffrine and Pikine, Imams preached to review the perception of people with disabilities, referring to Sura 80 of the Qur'an which emphasises the importance of consideration for the blind.

The media

The media play a crucial role in disseminating information about the experiences of people with disabilities, thereby shaping community attitudes. Through highlighting a number of success stories, showing positive experiences of people with disabilities in spite of the challenges, they emphasised the importance of education and voting. Many journalists attended press briefings and echoed what had been shared, helping to influence decision-making by the authorities. Meetings were also held at the Maison de la Presse, where activities on disability were organized and then relayed in the media.

4.6 Which factors influenced the outcome of this success?

Several factors were identified as having influenced the process. These were classified into six distinct factors: (i) the favourable environment at the time, (ii) the solidarity and synergy created between the key players, (iii) the determination of people with disabilities through the FSAPH, (iv) the mobilisation and leadership of women, (v) the partnership established between Sightsavers and the FSAPH, and (vi) the credibility of Sightsavers and the FSAPH.

An environment conducive to dialogue and changing perceptions of people with disabilities

The implementation of this project coincided with the holding of the national dialogue, which was an opportunity taken by Sightsavers to support and strengthen the FSAPH. The work accomplished enabled the stakeholders involved to change their perception of disability and people with disabilities. One of the key moments that triggered the change, according to one of the state representatives, was the opportunity he was given to go out into the field in Kaffrine, Kaolack and Louga, where focus groups changed his perceptions. Mr Niane, from the electoral commission added: "It's all a question of catching up, of raising awareness".

The representatives of the state structures devoted a large part of their speeches to the challenge represented by the review of the electoral code, to help create a form of equity that had been lacking. According to them, at both international and national level, it was difficult to exclude such a large number of people may have a disability but are fully aware of the world around them and must be entitled to vote. The national dialogue and consultations with stakeholders helped to bring about a paradigm shift, cementing the realisation that a disability does not affect a person's potential.

The solidarity and synergy created between the key players

The change in perceptions of people with disabilities was enabled by the close collaboration with OPDs, and the increased level of knowledge of disability and the realities of people with disabilities on the ground. This was made possible through the political will within the state,

the participation of people with disabilities at grassroots level, with players such as Sightsavers playing a role in the background, including "all the players working with the FSAPH on political involvement, thus constituting a synergy of talents and actions", according to the women of the FSAPH. This meant that "for the first time we saw civil society players and government actors coming together".

The determination and commitment of people with disabilities

The solidarity shown by the players was motivated more by the determination of people with disabilities to see their rights recognised, increased awareness of the difficulties they face, particularly in the electoral process, and the concrete changes they were aiming for in the immediate future in this defined context. In addition to their determination, their commitment was noted by all those involved. According to Mr Diallo, representative of the DGE, "people with disabilities were driven by a desire to have their demands taken into account. They even made their voices heard at the level of the political committee of the national dialogue, thanks to the DGE. They were motivated by the desire to see their conditions reviewed. They also had international conventions that give them supra-legal authority, and these conditions treat them as full citizens, with universal voting rights."

According to Mr Diallo, as the focal point, this determination motivated the Chief Electoral Officer to work towards this change, in order to facilitate the review of certain provisions of the law with a view to enabling a high proportion of the population to vote, because, in his view, "voting is not a privilege but a universal right, and we finally had to make inclusion a reality".

Mobilisation and leadership of women

While the mobilisation of the members of the associations making up the FSAPH is noted as a strength, the mobilisation of women as a whole is another. In the context of this project, the mobilisation of women was not only at the level of the committee and its branches, but above all that of women from all the localities targeted by the project, including women without disabilities, those from civil society and leaders in the political sphere.

In addition to their ability to mobilise, their leadership was also a key factor. As Khady and Seynabou pointed out, "many influential friends were mobilised thanks to the women, including the political leaders who received the FSAPH".

Another important factor was the leadership shown by the non-disabled women who joined the cause. According to the representatives of the women's committee, the Mayor of Méwane (Thiès region), who is illiterate, was a good example of a role model because she motivated the women who identified with her, given that the group of women with disabilities, in general, is not highly educated.

The partnership established between Sightsavers and FSAPH

Some have noted that one of the factors contributing to this success is the partnership established between Sightsavers and the FSAPH, with the FSAPH recognising the technical contribution of Sightsavers, while Sightsavers, in its approach, leaves the leadership of the interventions to the FSAPH. This long-standing partnership, which began well before the implementation of this project, has contributed considerably to its success.

Credibility of Sightsavers and FSAPH

In addition to the partnership established between Sightsavers and the FSAPH, the credibility acquired on both sides by the various institutions is a significant added value that they brought to the implementation of the project. In fact, according to Mr Cheikh Seck, current interim country director of Sightsavers' Senegal office, the successful implementation of an ongoing project is often pre-determined in part by the experience and achievements prior to the implementation of that project. Sightsavers' experience in Senegal in previous years, as well as the unanimous recognition it has gained on the issue of political inclusion and participation, among others, was crucial in establishing its credibility in the process.

The FSAPH has also gained credibility because, although many stakeholders were not previously aware of its existence, its internal structure has convinced them of its ability to collaborate with key stakeholders. In addition, during the 2017 legislative elections, the FSAPH Project Manager, who became the new President, was part of the electoral observation missions and this helped to give the federation credibility in addressing electoral issues. The photos taken with the ambassadors we met in the monitoring room contributed to this credibility.

4.7 What are the best practices, challenges and lessons learnt through the advocacy and policy implementation which led to this success?

Best practices

The interviewees identified a number of cases of best practice. An analysis of these points enabled us to classify them into four key points, namely (i) the achievements prior to the project, (ii) the commitment of the State and political leaders, (iii) the consolidation of links and the strengthening of synergy, and (iv) the creation of frameworks for building the capacities of players, sharing experiences and pooling skills.

Status prior to the project

- A pilot phase, in which the FSAPH was an election observer, was helped to build its credibility in the eyes of policy makers.

- The FSAPH had engagement with the UK and US ambassadors to Senegal prior to the project. Photos from these events further bolstered the image of the FSAPH.

The commitment of the state and political leaders

- Political parties introduced provisions for people with disabilities in their manifestos. The level of interest in disability inclusion among political leaders was important.
- The engagement between political parties and civil society was crucial. According to M. Alioune Diallo, head of the Directorate on Elections in the Ministry of Interior, “if the FSAPH hadn't had an attentive ear in bodies such as political parties, it would have been difficult to bring about change”.

Consolidating links and strengthening synergies

- The strong relationship between Sightsavers and the FSAPH was fundamental to delivering the revision of the electoral code.
- The central role of the FSAPH was vital, to ensure that the voices of people with disabilities were heard, rather than Sightsavers leading conversations.

The creation of frameworks for building the capacity of players, sharing experience and pooling skills

- The opportunity to learn from the experiences of other countries was invaluable. The learning visit to Cameroon provided a useful example, to understand how people with disabilities can effectively be included in the electoral process.
- A residential seminar with the political party representatives was useful in sharing understanding and building consensus around the revision to the electoral code.
- Awareness raising through frequent meetings and exchanges with the principal players in the process was key to changing minds.
- Accessibility audits of polling stations were important to build a corpus of evidence to document the challenges faced by people with disabilities in going to vote, and the need for additional provisions to ensure that polling stations are accessible.
- Involvement in election observation by people with disabilities ensured that the needs for accessibility were fully understood. Investment into the training of additional people with disabilities to become election observers will be important.

Challenges

“We started out on the losing side, with resistance at every level.” Aissata Ndiaye, Senior Policy Advisor for Inclusion and Disability, Sightsavers

Three main challenges were noted in the implementation of this project, namely (i) the context at the start of its implementation, (ii) coordinating the busy schedules of the stakeholders involved, (iii) implementation of the electoral law on the ground during elections.

The context

According to Aissata Ndiaye, Sightsavers' Global Advocacy Adviser for West and Central Africa during IAPGII, the first difficulty that posed both a challenge and an obstacle to the project was the context, which was unfavourable to any prospect of reviewing the electoral code, given the political context marked by heated debates on the probable third term of office of the President of the Republic. "Any mention of the electoral code gave rise to political tensions. There was a lot of resistance because they didn't want to create one change that could lead to another. We started out on the losing side, with resistance at every level". The situation has been made more favourable by the introduction of political dialogue at the highest level, in this case by the President of the Republic. "The context can make or break everything", she added.

Coordinating busy schedules

Implementing this project required the participation of several players with busy agendas. Coordinating the busy schedules of each party was a difficulty noted in the process. Nevertheless, the determination of all the stakeholders to achieve a result was noted and they always did what was necessary to travel and take part in the actions.

The implementation of the electoral law on the ground during elections

While the review of the electoral law was a major achievement, a number of difficulties were noted in putting it into practice on the ground during the electoral processes that followed. These difficulties included insufficient awareness among those working in the polling stations: it was noted that staff at the polling stations were not always aware of the measures to be taken to facilitate access for people with disabilities. In addition, the provision of voting materials in Senegal is not fully inclusive as information is not available in braille for people who are blind.

In view of the project's achievements and the difficulties encountered, five major challenges need to be addressed in order to maintain the gains made: (i) Ensuring that legal frameworks are harmonised with the Social Orientation Act; (ii) Improving the electoral code to cover other key points; (iii) Making financial resources available for advocacy; (iv) Ensuring that decision-makers have a better grasp of disability issues; (v) Improving the training of people with disabilities on the changes that need to be made and the challenges that these changes represent for sustainable human development and peace.

Monitoring the harmonisation of legal frameworks with the Social Orientation Act.

Before the implementation of this project, the electoral code was not adapted. There was a lack of consistency between the Social Orientation Act and the electoral code. The fact that this strategic document on the public life of citizens did not cover inclusion was a major challenge that was met. It is therefore important to ensure that the same approach is used to review other essential texts and laws.

Improving the electoral code to address other key issues

The visit to Cameroon showed the availability of candidate ballot papers in braille. This does not exist in Senegal. Blind people in Senegal need to be educated in Braille, so that they can

benefit from resources made available in braille, and in the process, we need to make blind people more independent.

With regard to the law, certain parameters need to be incorporated to make voting easier: braille as learnt in Cameroon so that blind people no longer need to be accompanied. If changes are not made in this direction, blind people would be able to vote but the process would not be confidential because he or she would still need to be accompanied, which is a violation of the privacy of voting.

The availability of financial resources for advocacy work

Fatoumata Diouf, the Regional Director for West Africa at Sightsavers, among others, raised the issue of the importance of financial resources for successful advocacy on this scale, which is an extensive and lengthy process. According to Diouf, this has to be included in the planning and budgeting from the start. A shortage of budget for advocacy is often a problem. The revision of the electoral code was not planned at the outset of IAPGII, and there was no allocation of funding in the budget. This meant that Sightsavers had to divert funds from other sources to make the advocacy initiatives possible to deliver. Availability of funding from the start would have been an advantage. Long-term funding is key to achieving greater impact.

Better understanding of disability issues by decision-makers

Decision-makers as a whole are often not familiar with the issue of disability, and there is a great deal of work to be done at all levels, macro-meso-micro, to raise awareness. There is therefore a real need to go further: at all levels of decision-making, the National Assembly, decision-making bodies in local authorities, to ensure that the political participation of people with disabilities becomes a reality.

Better guidance for people with disabilities on the changes that need to be made and the challenges that these changes represent for human development and sustainable peace

One of the real challenges is to make disabled people more aware of the changes that need to be made. The two changes in the articles of the code are important, but not enough, according to the representative of CENA. We need to revisit the texts to address sign language and enable people who are deaf-mute to understand candidates' messages during debates in the assembly or in candidates' speeches.

Raising awareness also involves encouraging people with disabilities to register to vote, as they will not register to vote if they know that the polling stations are not accessible. In addition, the aim is to boost the self-confidence of people with disabilities so that they can stand as candidates, including in legislative elections, and to train other people in electoral bridge-building. People with albinism must also be taken into account, as they are highly sensitive to ultra-violet rays and do not benefit from any protection, especially in the heat when it comes to voting.

Lessons learned

The importance of a pilot phase: Having a pilot phase and pre-positioning ourselves is important to build credibility.

A good working relationship with partners is a key factor in the success of our initiatives, maintaining good working relationships with partners and listening to them.

The process is just as important as the end result: Winning a battle requires a whole process. Advocacy has to be carried out at different levels, with different people, different targets and in different places. There is also an element of luck, for example in terms of the timing and political context.

4.8 Recommendations

The list below consists of recommendations based on our analysis of the findings:

The state

- Provide training to staff at polling stations, to ensure that they understand the revised electoral code and its provisions for people with disabilities.
- Provide ballot papers which are accessible for people who are blind, learning from the practices in other countries.
- Produce a glossary of election terms in sign language to facilitate understanding.
- The electoral code is not perfect and other aspects should be investigated going forward. For example, the electoral code needs further development to provide resources in braille.
- The state needs to provide sufficient resources in terms of training and staffing at polling stations to ensure that the electoral code is enforced.

FSAPH

- Conduct a mapping study to assess how many more people with disabilities have newly registered after the review and the number of people with disabilities elected to office, so as to show the extent of participation of people with disabilities in local elections.
- Consider financing female candidates who want to enter politics.
- Continue training and awareness-raising, including sign language training and monitoring work.
- Take forward actions to ensure that deaf-mute people have access to information during election campaigns.
- Continue to engage with government stakeholders and maintain relationships so that the FSAPH has access to key decision makers.

Sightsavers

- Ensure that there is sufficient budgetary allocation for advocacy in future projects.
- Ensure that partners are always kept informed of project developments. We will ensure that the contribution analysis piece is shared with all partners and all who took part in the interviews.
- Continue to maintain good relations with partners at country level and support them to lead advocacy initiatives.
- Continue to strengthen our positioning as an organisation and brand at national level: ensure that the project advocacy successes are promoted to further build credibility.
- Continue to invest in election observation to build the capacity of partners and ensure that the electoral code is effectively implemented.

5. Introduction of an eye health policy in Sierra Leone

5.1 Coverage in the end-term evaluation report

The development of the eye health (EH) policy in Sierra Leone is mentioned in the end-term evaluation report. On page 29, it notes that ‘policy development was achieved in Sierra Leone’, with no further details given. In a table on page 55 the report lists that ‘EH policy was validated in 2020 with Sightsavers’ support’ under examples of strengthening national EH policy. Lastly, in a table on page 81, it notes the EH policy status for each country, noting for the same details as on page 55, and adding that ‘the policy was reviewed in 2021 to reflect the current situation and is currently undergoing MoH final reviews before launch.’

As such, while the End Term Evaluation (ETE) report briefly notes that a new eye health policy was introduced, there is no detail given as to the significance of the achievement and what it means for eye health in Sierra Leone, the specific role played by Sightsavers in delivering this result, or the input of any other stakeholders in bringing this about.

5.2 Significance of the eye health policy

The absence of an eye health policy had been a gap in Sierra Leone’s health infrastructure identified as an issue for the National Eye Health Programme (NEHP) for many years. The NEHP is under the directorate of primary health care at the Ministry of Health. It coordinates and manages eye health programmes, partners and deliverables. With no formal eye health policy in place, there was no clear mechanism to articulate the needs in resources, staffing and funding in terms of eye health. Eye health was implicitly deemed a lower priority without a policy to communicate the government’s commitments as to the eye health services that it would set out to deliver. In consequence, the formulation of an eye health policy was recognised as a high priority by the NEHP as early as 2015.

The introduction of a policy has been transformational for eye health in Sierra Leone. Even before its formal launch in 2022, the process of drafting the policy and bringing together different stakeholders to discuss the content had a significant impact in raising the profile of eye health at a senior government level. The political will and interest in engaging in this process sent an important signal that the government was committed to investing in eye health.

It is no coincidence that the development of the eye health policy coincided with the formulation of a Human Resources for Eye Health (HREH) plan, setting out a roadmap to deliver the recruitment, training and deployment of personnel to eye health facilities across the country. The policy development process built the necessary political momentum to make this possible, and the formulation of an HREH plan was a necessary step as part of the policy development process.

Similarly, the addition of cataract kits to the list of essential medicines in 2019 would not have happened without the eye health policy development process, another crucial milestone which bolstered the provision of equipment and consumables for eye health. In addition, the development of eye health indicators to be used in the DHIS2, and the training of monitoring and evaluation staff at primary health facilities to record and report eye health data using the new registers were inextricably linked to the formulation of the eye health policy. In this way, the introduction of an eye health policy has underpinned numerous important steps forward in the strengthening of the system for the delivery of eye health services, and it lays the foundations for further development in eye care services in the future.

5.3 Which stakeholders contributed to the advocacy success and what role did each of them play?

The interviews conducted as part of the contribution analysis piece confirmed that the introduction of the eye health policy was made possible through the input of and collaboration between multiple stakeholders.

Government actors

Alhaji Koroma, project manager for the Western Area in the NEHP, noted that,

“The government, through NEHP and Ministry of Health, provided the enabling environment, and it is the principal body for all health care management and service delivery. Working through the NEHP, it coordinated the entire process and technical inputs from various directorates.”

Dr Matthew Vandi, director of hospital operations and ambulances at the Ministry of Health and former manager at the NEHP, identified key individuals within the health service who played an important role. These included eye health workers, the Chief Medical Officer, Director Primary Health Care, Director of Policy Planning and Information, Chief Nursing Officer (CNO), and Permanent Secretary at the Ministry of Health. He explained,

“The Ministry of Health provided the framework for the provision of drugs and consumables and other resources, the creation of a budget and the integration of eye health into primary health care, as well as technical input.”

Emerika King, Country Director for Vision Aid Overseas and formerly a Programme Manager at Sightsavers, provided a useful analysis of the role played by the NEHP: “it served as the intermediary between eye health NGOs and the government, and it also provided supervisory roles in putting together draft copies of the policy and sharing of same with other stakeholders.” Eric Musa, Deputy Technical Lead for Social Inclusion at Sightsavers, added that “the NEHP led the review of the eye health policy, and ensured the government’s buy-in.”

Koroma added that other ministries such as the Ministry of Social Welfare and Ministry of Education played important roles in providing input and critical review of the eye health policy development process. Emerika King included the Ministry of Finance among government players, referring to its contribution of funding to the eye care programme. Dr Vandi also noted the role of these two ministries, in particular emphasising the contribution made by the social service desk and department for inclusive education within the Ministry of Education. In addition, Vandi said,

“The Ministry of Local Government is also important as we are dealing with communities and the community leaders are the entry point.”

Sujandha Juneja, Country Director for Helen Keller International (HKI) in Sierra Leone, gave a useful account of the Ministry of Social Welfare, in providing an oversight role to ensure that the eye health policy reflected the demands of disability inclusion.

Eric Musa noted that the Law Officer’s Department worked together with the consultants drafting the eye health policy to ensure that the policy was in compliance with national laws. This was essential in ensuring the credibility and legitimacy of the eye health policy and securing its support among other government stakeholders.

Non-governmental actors

Tiangay Gondoe, Senior Programme Manager for Sightsavers in Sierra Leone, noted the important role played by the Sierra Leone Association of the Blind (SLAB), saying that it ‘provided first-hand information of the lived experience of people suffering blindness’, which was crucial in ensuring that the eye health policy reflects the needs of the people it is intended to benefit.

Mohamed Kamara, Programme Officer for eye health at Sightsavers in Sierra Leone, explained:

“SLAB played a critical role in providing technical input with regard to the provision of services and the continuum of care, specifically recommendations on rehabilitation and reintegration.”

Jusu Squire, Programme Officer for NTDs at Sightsavers added that the SLAB “provided relevant information on the context and lived experiences of blind and visually impaired

people, and also contributed to policy write-ups.” This confirms the prominent role that OPDs played in the policy development, highlighting the extent to which the process of drafting the eye health policy was democratic and consultative.

Sightsavers

According to Alhaji Koroma, programme manager for the Western Area in the NEHP,

“Sightsavers and NEHP were crucial as they provided leadership, coordination financial and top-level influencing, including strategic and technical support.”

He added,

“Sightsavers was a lead partner and played a crucial role in the development of the eye health policy, not only in funding but also through technical inputs and oversight, Sightsavers identified and covered the costs of a consultant to draft the policy, and played a leading role in the engagement and advocacy with high level government stakeholders.”

Dr Vandi’s view was that “Sightsavers was the lead in terms of technical, financial, and other resources, for example Sightsavers incurred the costs related to the lead consultants.”

Sujandha Juneja noted that “Sightsavers provided a coordinating role in ensuring funds were put together, organised meetings and followed up on the progress of the development of the policy. Financial facilitation and programme management were other key roles that Sightsavers played.”

Mohamed Kamara added that “Sightsavers provided funds and technical input in the identification and recruitment of a consultant to draft the eye health policy and provided oversight and monitoring functions. It also supported in the review and finalization of the draft policy.”

The usage of consultants to draft policies is not typically a model promoted by Sightsavers as there can be a lack of sustainability in this approach. However, in this case, there was a lack of capacity at the government level to perform this function, and through providing on-going training and technical assistance, Sightsavers has strengthened the ability of government stakeholders to develop policy.

5.4 What evidence and documentation do you have to show the importance of Sightsavers’ role?

Tiangay Gondoe, pointed to a number of sources indicating the importance of Sightsavers’ role in the policy development process:

- The Terms of Reference for the consultant who led the development of the policy.
 - Sightsavers’ organisational eye health strategy, which was shared with the National Eye Health Programme to provide technical guidance.
 - Financial transfers made to partner organisations.
-

- Financial, organisational and logistical support from Sightsavers around events such as key meetings as well as the launch of the eye health policy, for which Sightsavers provided or covered the costs of venue hire, transportation, printing of documents etc.
- Draft versions of the eye health policy document and minutes from meetings, which show the input and contributions made by Sightsavers as well as other partners.

Sujandha Juneja noted a number of additional sources evidence including:

- Meeting minutes of the technical working group, which served as the coordinating group for the policy development process.
- Reports from consultations on draft versions of the policy
- Minutes from meetings at the Ministry of Health to discuss the policy.

Mohamed Kamara added two final pieces of evidence:

- The eye health policy itself recognises the role of Sightsavers in the acknowledgments section.
- The Minister for Health listed Sightsavers among the key contributors at the launch of the eye health policy.

5.5 Which role did other stakeholders play in delivering this change (other international development organisations; government ministries; organisations for persons with disabilities and any other institution)?

A range of additional stakeholders were mentioned by the interview respondents as having played a role in developing and launching the new eye health policy:

- Sujandha Juneja explained that HKI had provided technical support, participating in the review of drafts and the validation of the policy.
- Dr Vandi noted the role of the West African Health Organisation, which played a role in providing training, guidelines and the development of strategic plans for eye health.
- Emerika King added that Comic Relief, Standard Chartered Bank and the EU provided funds which were utilised in mobilising and facilitating participants' movement to meetings and other activities.
- Jusu Squire mentioned CBM as an additional player in the eye care sector, particularly in the northern part of Sierra Leone, which provided important contextual information regarding the eye care needs in the regions in which they operate.
- Mohamed Kamara added that CBM provided funding to the NEHP and supported the coordination process. Vision Aid Overseas and the Baptist Convention also provided financial support to the NEHP.

5.6 Which factors have influenced the outcome of this success?

Political context

The favourable political context was fundamental for the development of the eye health policy. Among the key factors enabling its introduction, Dr Vandi notes ‘the political will, peaceful environment and political stability’. President Bio came to power in 2018 and presided over five years of relative peace and stability until the next election in 2023. This overlapped with the majority of IAPGII, running from 2017 to 2022, with the consequence that once Bio’s government was established, there was no change of government until the end of the programme. This was instrumental in enabling Sightsavers and its partners to maintain long-term engagement and build relationships with government partners.

Beyond this, Emerika King observed that the political climate was favourable, having recently enacted the 2011 Disability Act. This meant that health and disability issues were already on the agenda, advocacy coalitions between governmental and non-governmental actors were in place, there was political momentum at the state level and a sense of optimism and the possibility of change in the disability community.

Input from people with disabilities

According to Jusu Squire, ‘the policy development process was very inclusive, which created room for more ideas, views and participation from partner organisations.’ It is clear from the testimonies of the interviewees that Organisations for Persons with Disabilities such as the Sierra Leone Association of the Blind were involved throughout the process, not only in advocating for the prioritisation of eye health through the launching of a policy, but also through reviewing draft versions of the policy. This was crucial in providing policy makers with first-hand accounts of the experiences of people who are blind and visually impaired, ensuring that the eye health policy addressed the needs which they articulated. Conversely, the ability to participate in the policy development process gives the eye health policy itself as well as the Sierra Leonean government more credibility among the OPDs.

Long-term investment and collaboration

Ultimately, the launch of an eye health policy was only possible through sustained investment and collaboration between a multitude of governmental and non-governmental actors. As Mohamed Kamara pointed out, there are numerous cases of policies being developed but not being launched, stuck in an unfinished state and never receiving full governmental approval. The introduction of the eye health policy was enabled through the commitment, in particular by government stakeholders such as the National Eye Health Programme and Ministry of Health, organisations for persons with disabilities including the Sierra Leonean Association for the Blind, and international non-governmental organisations such as Sightsavers, over a period of many years.

Amid an evolving political environment and a new government coming to power and the COVID-19 pandemic, it took a sustained campaign of advocacy to build understanding of the need for an eye health policy among new MPs, ministers and committee members. Trust and engagement had to be built with government stakeholders, to secure its acceptance of input from Sightsavers and other players into the policy development process. Technical and financial support helped to produce a high-quality eye health policy in line with the standards of the World Health Organisation and obtain its endorsement by the Ministry of Health. But without the long-term relationships built up with senior government stakeholders, the policy may never have reached the final stage of formal launching.

5.7 What are the best practices, challenges and lessons learnt through the advocacy and policy implementation which led to this success?

Best practices

Dr Vandí noted the usage of standards and best practices from the West African Health Organisation, the International Agency for the Prevention of Blindness, and the usage of WHO resolutions on eye health, which provided useful guidelines to follow in the policy development process.

Tiangay Gondoe identified the regular updates and communication on progress between stakeholders as a key aspect of best practice which was crucial to maintaining the momentum towards the development of an eye health policy. Dr Wurie served as the liaison between the Ministry of Health and Sightsavers, ensuring that all stakeholders were kept abreast of any developments, allowing the key partners to identify any blockages in a timely manner, and sustaining the campaign for the introduction of an eye health policy.

Jusu Squire added that ‘allowing [Sierra Leonean] nationals to lead the process of developing the policy gave them first-hand information, thereby enhancing ownership.’ It is essential that the Sierra Leonean government was driving the process, and no sense of the policy being imposed from external players.

Consultation and input from a wide range of stakeholders, including people with disabilities, was an essential part of the process.

Mohamed Kamara said:

“The use of an open and transparent approach created the opportunity for diverse opinions, inputs, reviews and insights.”

Challenges

Several interviewees, as well as the original ETE noted the impact of the COVID-19 pandemic in delaying the introduction of the eye health policy. Lockdowns and social distancing measures restricted the key stakeholders from holding meetings together, and the

pandemic diverted government attention and resources away from all other policy areas in order to deal with the emergency.

Sierra Leone held a parliamentary election in 2018, in which Julius Maada Bio's Sierra Leone People's Party (SLPP) came to power, replacing the former government led by Samura Kamara's All People's Congress (APC). Initially, this caused some delays to the development of an eye health policy. According to Tiangay Gondoe, 'the change of government derailed the progress made and slowed the process down'. The contacts and trust developed with the previous government over many years were no longer in place. Relationships had to be forged with the new ministers and relevant parliamentary committees, which takes time.

Sujandha Juneja and Victoria Turay of HKI noted that the development of an eye health policy raised expectations among some stakeholders, that the new policy would transform eye care services. It was important to manage expectations, explain that the policy doesn't automatically come with funding, and that further long-term advocacy would be needed to ensure that the eye health policy is implemented.

Beyond this, Juneja and Turay observed that it was sometimes challenging to have so many organisations and individuals contributing and reviewing the process. Consultation and input from a wide range of stakeholders is very valuable, but reaching a consensus on a final wording of the eye health policy and accommodating differing views, was a challenge.

Lessons learned

One lesson learned identified by Dr Vandi was the scope of international frameworks to provide a structure underpinning new policies. In the case of the eye health policy, alignment with the Sustainable Development Goals and Universal Health Coverage was a useful way to establish the outlines of the content and provide the legitimacy and credibility in advocating for the policy to conform to international standards.

Tiangay Gondoe noted the importance maintaining a long-term campaign, delivering a clear and consistent message to pursue a specific goal, in this case for an eye health policy. It was crucial to persist with a unified message with the project partners, articulating a strong voice in bringing multiple organisations together, rather than dwell on any minor differences in view regarding specific aspects of the eye health policy content or the policy development process.

Finally, Gondoe reflected on a key lesson learned for an international NGO involved in development of a new policy. Ultimately, the role of Sightsavers was to provide technical and financial assistance to the NEHP and other partners. While Sightsavers was heavily involved, it was always in a supporting role, with the NEHP taking the lead, ensuring that the MoH took ownership of the eye health policy.

5.8 Recommendations

The list below consists of recommendations for the key stakeholders:

NEHP and Ministry of Health

- Explore the possibilities for developing an eye health strategic plan.
- Continue the demand for sufficient government funding to fully implement the eye health policy.
- Invest in the recruitment, training and deployment of staff at eye care facilities.
- Collect and document data through the DHIS2 and surveys to demonstrate the impact of the eye health policy and the on-going need for investment.

OPDs

- Collect testimonies from OPD members to articulate any positive developments following the launch of the eye health policy.
- Continue advocacy efforts to demand the full implementation of the eye health policy in terms of training of sufficient human resources and provision of services nationwide.
- Maintain relationships with government stakeholders to obtain access to decision makers in on-going discussions in the implementation of the eye health policy.

Sightsavers

- Shared the lessons learned from the development of an eye health policy in Sierra Leone to inform similar initiatives in other countries.
- Ensure that there is sufficient budgetary allocation for advocacy going forward.
- Sustain long-term investment and relationships with governmental and non-governmental stakeholders for future advocacy work.

6. Conclusions

In conclusion, we have established that Sightsavers was among the most important drivers of policy change to bring about the revision of the electoral code and the introduction of a new eye health policy in Sierra Leone. Many interviewees confirmed the significant role played by Sightsavers, but more importantly, the process allowed us to obtain an understanding of the dynamics between the multiple stakeholders involved. The evidence gathered shows the contribution made by Sightsavers, but crucially, as envisioned in the contribution analysis methodology, it is not possible to definitively distinguish the extent to which we can attribute either success to Sightsavers. Given the complexity of the political contexts and the number of players involved, this is entirely to be expected, and attempting to attribute policy change to any single actor would be to misunderstand the nature of the process. In both cases, policy changes were a product of good timing, good partnerships and clear strategy.

In the case of Senegal, the close collaboration between the Directorate for Elections (DGE), the Senegalese Federation of Organisations for People with Disabilities (FSAPH) was instrumental in enabling the review and launch of a revised electoral code with new provisions for people with disabilities. The FSAPH was the key advocacy lead, bringing together a broad coalition across civil society and the disability community, waging a sustained campaign to articulate the need for reform to the electoral code to meet the needs of people with disabilities.

The FSAPH built relationships with government actors, and made a convincing case over many years, highlighting the difficulties faced by people with disabilities who were unable to vote, either due to polling stations being inaccessible, or the need for a person to accompany them. The FSAPH engaged in the national dialogue process and used the opportunity to emphasise the contradiction between a government which wanted to demonstrate its openness to all marginalised groups, and the reality on the ground faced by people with disabilities who were unable to exercise their right to vote.

The DGE was the key actor within the Ministry of Interior with responsibility for elections, sharing information on the electoral code, engaging with the FSAPH, and maintaining momentum at the government level. Meanwhile, Sightsavers was the key external partner, providing tools, technical and financial assistance to the FSAPH, and building trust with all partners involved over many years. Sightsavers conducted accessibility audits of polling stations, documented the difficulties and exclusion encountered by people with disabilities in the voting process, provided training to the FSAPH in advocacy and political rights for people with disabilities, and facilitated engagement with the DGE. This explains and justifies the statement made by the Director of the DGE, that ‘without Sightsavers and its presence, this project would never have succeeded’.

The long-term partnership between the FSAPH, DGE and Sightsavers established the necessary effectiveness and credibility to secure the support of the disability community and the presidential approval to add the additional provisions to the electoral code for people with

disabilities. However, it is important to take the external factors into account which enabled this policy change, most significantly the political context and timing of the national dialogue.

In the case of Sierra Leone, it was the combined effort of the National Eye Health Programme (NEHP), the Sierra Leone Association of the Blind (SLAB) and Sightsavers which was the central driving force behind the development of an eye health policy. While there were many additional stakeholders involved who played varying roles, these were the three central organisations involved.

The need for a policy had been identified as a priority among professionals involved in eye health service delivery and management across Sierra Leone for many years. The NEHP articulated the need for an eye health policy at a senior government level and coordinated the policy development process primarily with the Ministry of Health, as well as others in the review process such as the Ministry of Education and the Ministry for Social Welfare. Beyond this, the NEHP facilitated the engagement with the SLAB, bringing the input of the disability community into the policy development process.

The SLAB provided valuable input to the development of the eye health policy, reviewing draft versions and ensuring that it reflected the lived experience of blind and visually impaired people to adequately meet their needs. For its part, Sightsavers provided a consultant to draft the policy, facilitated the review and finalisation of the eye health policy, convened meetings between the NEHP, SLAB and other partners, and provided training in advocacy and policy development to organisations for persons with disabilities. In consequence, the claim made by Mr Vandj at the NEHP, that “Sightsavers was the lead in terms of technical, financial, and other resources” is valid.

It was the cohesive collaboration between government, civil society and the international development sector, embodied most importantly by the NEHP, SLAB and Sightsavers, which achieved the launch of the new eye health policy. Beyond the input of individual stakeholders, it was this confluence of forces which ensured a policy was drafted which spoke to the needs of those involved in the delivery and management of eye health services, as well as its patients, and that the policy was not only drafted but completed and launched. Nevertheless, exogenous factors must also be acknowledged, first and foremost the favourable political climate following the launch of the disability act, as well as the timing of the elections in 2018 and 2023 coinciding with the IAPGII project and providing a time of sufficient length and stability for the policy to be enacted.

This shows some common factors between the advocacy achievements in Senegal and Sierra Leone. While one country saw the revision of its electoral code and the other the launch of a new eye health policy, in both cases the convergence of governmental and non-governmental actors was a common theme. In the case of Senegal, the driving force was from civil society through the FSAPH with the DGE as a government partner, while in Sierra Leone the initiative was spear-headed at the government level through the NEHP, with SLAB as a valued contributor. In both cases, Sightsavers played a crucial supporting role through the provision of technical and financial assistance, made impactful through sustained long-term investment and relationships with both partners in government and civil society.

Sightsavers' role in bringing government and civil society actors together was critical to our contribution.

Appendix 1: Sierra Leone 2017 Advocacy Plan

Advocacy Plan

Sierra Leone Sightsavers Country Office

2017-2022

Summary

Project name: Towards universal Eye Health in Sierra Leone

Change objective: Improve information about and access to health care for people with disabilities

Outcome 1: Implementation of the Free Health Care provisions of the Disability Act 2011 by the government.

Outcome 2: District Health Management Information System (DHMIS) includes indicators on eye health.

Plan

Change objective:

Outcome 1: Implementation of the Free Health Care provisions of the Disability Act 2011 by the government

- Output 1: Clarify exact provisions of the Free health Care Act (e.g. is free health care applicable to the Basic package of Healthcare Services at primary level only?).
- Engage with the Office of the Director of Drugs to help costs, plan, procure and distribute the drugs required.
- Engage with the Office of the Director of Drugs to ensure that eye drops (Erythromycin) are added to the essential drug list - and therefore available for newborns.
- Working with partners, raise awareness of the opportunity for free health care for people with disabilities amongst service users. Targeting DPOs and civil society groups; media engagement (local and national and social media). Education of the Act through schools. (demand side)
- Working with partners raise awareness amongst health workers, MoHS staff and Parliamentarians of the free health provision through a range of activities (e.g. existing MoHS planned activities; request DFID to raise the issue with the President; parliamentary engagement). (supply side)

Outcome 2: District Health Management Information System (DHMIS) includes indicators on eye health

- Output 1: Engaging with Research Division (within the Department of Planning and Policy – who are the HMIS team) on developing eye health indicators and data

collection methods. (Note Global indicators are available in the WHO Action Plan on Avoidable Blindness)

- Ensuring the National Eye health Programme Manager engages with the Policy and planning stakeholder meetings and reviews processes.
- Ensuring that the findings of the pilot studies on data disaggregation in Tanzania and India are shared with the Research and Publication Specialists, Dr Edward Foday.
- Share the Washington Group Short Set of Questions on Disability with the Director and Research and Publication Specialist.
- Share Sightsavers operational research plans with Research and Publication Specialists, Dr Edward Foday. (ethics approval also). Request further information about the Directorate own research calendar.
- Sightsavers seeks requisite funding for MHealth support to Director of Policy and Planning.

Appendix 2: Senegal 2017 Advocacy Plan

Advocacy Plan

Sightsavers Senegal Country Office

2016-20

1. Summary

This advocacy plan will be achieved through the under listed Irish Aid projects as well as other priorities of the country office.

1. Senegal eye health strengthening project
2. Senegal inclusive education
3. The effective participation of men and women with disabilities in political life

Change objective: The Government has an effective, costed and integrated Eye Health Plan which includes Government funding allocation

- Outcome 1: A new and improved Eye Health Plan based on the EHSA results
- Outcome 2: Ensure that cataract kits are placed on the essential drug list by the Ministry of Health
- Outcome 3: Ensure increased budgetary allocation in 5 districts for eye health to the recommended WHO level (5%?!) and that district health committees in 5 districts commit 30% of the eye health budget to eye health consumables
- Outcome 4: effective policy coordination between NTD funding and implementing organisations, leading to government budget allocation to NTDs
- Outcome 5: the WASH sector, in particular PEPAM, take NTD prevalence rates into consideration when deciding on WASH policy and programme focus
- Outcome 6: annual vision screening, as part of a wider school health module, is included in the revised national education policy

Change objective: The Government has an integrated SDG implementation plan, and CSOs are able to participate in planning

- Outcome 1: Development of an effective coordination mechanism within CONGAD on SDG implementation
- Outcome 2: the Government of Senegal develops a SDG Implementation Plan
- Outcome 3: Integration of effective indicators to measure progress towards SDGs and targets, including on disability

Change Objective: Implementation of the Marrakesh Law on the rights to information, political participation and inclusive education

- Outcome 1: ratification of the Marrakesh Treaty by the Government of Senegal
- Outcome 2: the Electoral Commission outlines a clear action plan to address implementation gaps in the inclusive Electoral Code
- Outcome 3: All children with disabilities included within Government schools, supported by an effective policy and a sufficient budget

- Outcome 4: use research findings to support the development of an effective education information management system for inclusive education

Appendix 3: Interview questions:

Below are the evaluation questions. Interviews will be conducted either face-to-face or virtually including meetings with Sightsavers UK teams. Interviewers may also expand beyond the list of questions as appropriate and according to the thematic area.

1. Which stakeholders contributed to the advocacy success and what role did each of them play?
2. What evidence and documentation do you have to show the importance of Sightsavers' role?
3. Which role did other stakeholders play in delivering this change (other international development organisations; government ministries; organisations for persons with disabilities and any other institution)?
4. Which factors have influenced the outcome of this success?
5. What are the best practices, challenges and lessons learnt through the advocacy and policy implementation which led to this success?

Appendix 4: List of Interviewees in Senegal

Institutions	People interviewed
Directorate for Elections	1. Mr Alioune Diallo
National Electoral Commission	2. Mr Niane
Sightsavers (Country office)	3. Cheikh Seck
	4. Khady Bâ
Sightsavers (Regional Office)	5. Fatoumata Diouf
	6. Aissata Ndiaye
FSAPH (Presidents)	7. Yatma Fall
	8. Moussa Thiaré
FSAPH (Women's Committee)	9. Khady Bâ
	10. Seynabou Ndiaye
GRADEC	11. Babacar Fall

Appendix 5: List of Interviewees in Sierra Leone

Institutions	People interviewed
Ministry of Health	1. Matthew Vandí
National Eye Health Programme	2. Alhaji Koroma
Sightsavers Sierra Leone Country Office	3. Eric Musa
	4. Tiangay Gondoe
	5. Jusu Squire
	6. Mohamed Kamara
Helen Keller International	7. Victoria Turay
	8. Sujandha Juneja
Vision Aid Overseas	9. Emerika King