

Activities Report 2nd quarter (April-June) 2009

DRS- Direct Referral Site services in the community in Kilimanjaro & Arusha

June 1 marked the arrival of an important milestone, when KCCO handed over the management of the DRS to the KCMC Eye Department. This has always been a long term goal but, until recently, the Eye Department did not have the administrative infrastructure to take on the DRS. KCCO will continue to help support the DRS but day to day running and supervision of DRS staff will occur through the KCMC Eye Department. In the 2nd quarter of 2009 2,800 patients were examined and treated on DRS, 124 patients were brought back for cataract surgery, and 114 people purchased presbyopic spectacles.

Rolling out VISION 2020 programmes in eastern Africa

Fort Portal, Uganda

Titus Nyange, KCCO Sustainability Planner and Dr Lewallen went to Fort Portal, Uganda in mid April. Mr Nyange and Dr Edward Nkurunziza organized and ran a very successful planning meeting for the Rwenzori (Tooro) Uganda Regional VISION 2020 programme. (This is a “District” VISION 2020 programme, serving 2.2 million people) Dr Nkurunziza gathered partners from the religious organizations, the MoH, Lions, and CBM. All participants stayed until the bitter end and it was hard work, but we emerged with plans for each sub-district, which includes specific activities, dates and responsible parties and realistic budgets. Planning (with all the partners involved) at a level of detail that makes the plans workable is what is so desperately needed. It’s nice that international and national groups talk about partnership, but the “rubber hits the road” at the administrative level of 1-2 million people where plans have to be implemented. In spite of the fact that there have been eye care activities in Tooro for many years, this was the first time that all potential partners met together to coordinate activities and learn what the other is doing. Imagine the surprise of one OCO to learn that there was an OA doing eye work a few kilometers from his hospital—and that they had not been aware of each other. Now, they have developed a plan to work together. Dr Nkurunziza, trained at the Nuffield course at KCCO 2 years ago, did a superb job in leading the sessions and we expect he will successfully lead the VISION 2020 programme, with some technical help from KCCO and funding from the Lions Ten by Ten Initiative and the Lavelle Fund for the Blind. By mid June, the Fort Portal plan was fleshed out with the budget and the team there is ready to start their activities.

Mbeya, Tanzania

Following Lavelle Fund- supported planning in Mbeya last quarter the outreach activities are underway there. Eight outreach visits have been made and 91 cataract patients provided surgery from these visits in this quarter. Eye Care Foundation (Netherlands) is supporting this work. Most pleasing is that regular reports, both financial and narrative, of the activities have been provided each month by the program. The habit of regular accurate reporting is a big part of developing sustainability in these programs.

North Shoa Zone, Ethiopia

In late June Titus Nyange and Dr. Courtright undertook a similar planning exercise with MoH and partners in North Shoa Zone of Ethiopia. The request to assist North Shao came from the Federal Ministry of Health last year and, after a preliminary visit in February, working with the team leader (Dr. Alemayehu Bayou) at the FHF supported management course in April, and negotiation with the Debre Berhan Hospital CEO, the three-day planning session was a great success. North Shoa is quite large (2.5 million people) and for the first year the plans that were developed cover approximately 900,000 people in 8 woredas. Their target, which is very do-able, is to increase the number of cataract surgeries from 326 (2008) to 1,000. Each Woreda has taken responsibility for setting its own target. We were very pleased to also have Dr. Mulu Lisanework, from CBM Ethiopia, a major partner with the MoH in Debre Berhan, join the planning session. Dr. Courtright met with Dr. Liknaw, VISION 2020 Coordinator, in Addis Ababa following the session. Bringing the planning down to the Woreda-level is a new approach in Ethiopia and everyone is keen to learn from both successes and challenges in this programme. Similar to Fort Portal and Mbeya, the North Shoa Zone plan is being supported by the Lions Ten by Ten Initiative and Lavelle Fund for the Blind.

Western Region, Burundi

In early June Dr. Courtright assisted the MoH and the various partners in Burundi to prepare a VISION 2020 implementation plan for the Western Region of Burundi. Burundi, although having only one surgical ophthalmologist, has in Dr. Levi Kandeke a great potential to achieve the goals of VISION 2020 in the Western Region of Burundi. Dr. Kandeke, a graduate of the KCCO Nuffield course in 2008, had already started making changes at the small hospital he is providing surgery. Besides district officers from the 3 districts that comprise the Western Region, there were representatives from other organizations working in the region. The Western Region plan, to be supported through the Lions Ten by Ten Initiative, will be finalized in early July.

Other VISION 2020 programmes in Uganda

Titus Nyange spent several days in Masaka, Uganda, helping the project there to assess their rather low output. The government policy of free surgery has plagued the project's efforts to establish a consistent policy that will help them recover some of their costs. He also worked with the team in Lira, northern Uganda, to strengthen their approaches to service delivery. Both Masaka and Lira are supported from Wilde Ganzen (Netherlands).

What happens when NGO support ends?

Due to the current global economic crisis, many MoH or NGO eye care programmes have had either a reduction or cessation of support for eye care activities in their area, and Tanzania is no exception to the rule. With the abrupt cessation of support to the Mara Regional VISION 2020 programme by ORBIS International, Titus Nyange, with support from Seva Canada, helped the Mara team re-plan the remainder of 2009. KCCO's Edson Eliah, currently completing his Masters programme at the LSHTM, returned to KCCO in June to start his dissertation, which will focus on how programmes adapt to changing financial challenges.

How high does the CSR need to be in Africa?

For a number of years the VISION 2020 recommendation has been that the cataract surgical rate (CSR) needs to be at least 2000/million population per year. That means that for a population of one million people, there should be about 2000 cataract operations per year in order to eliminate blindness from cataract. This was an estimate. Now, with more data available we hope to revise this estimate and take account of many other factors that will influence the CSR needs from one "district" to another in Africa. Several ophthalmologists in Africa have contributed data to this effort and Dr. Lewallen met with mathematicians from Harvey Mudd College in California in May to finalize the methodology. We expect to have results in July.

Understanding glaucoma in a difficult setting

All interviews with patients blind in one of both eye from glaucoma have been completed. Several points emerged clearly from the interviews including (1) with this chronic disease with such a slow progression no patient could relate a story of how their blindness developed, (2) every patient had, sooner or later, been to a health worker to seek care for their eyes, and (3) everyone had been told somewhere that the disease was related to eye "pressure." We will be doing further analysis of the interviews in the coming months.

Childhood blindness and low vision

We recently completed the last data collection for the participant observation project (before and after surgery for congenital or developmental cataract) and analysis of findings is currently underway.

On June 8, KCCO organized a meeting of those involved in services for children with congenital and developmental cataract to review strategies best suited for the identification and referral of these children to tertiary paediatric facilities. The Academy for Educational Development (AED) has been supporting work in Singida and Mara (2006-8) and Karatu, Babati, and Lushoto (2008-2010) and the findings were reviewed. In this quarter the AED-supported work in Tanzania progressed well, however the challenges brought about by the unrest in Madagascar have put strains on the activities in that country. KCCO benefitted by having Dr. Henry Nkumbe (ophthalmologist in Madagascar) in Moshi for a couple of months.

On June 10-11, with facilitation by Ms Karin van dijk, and support from Dark & Light Blind Care and cbm, KCCO worked with the MoH and Tanzania Society for the Blind (TSB) to organize the Second Low Vision & Inclusive Education Stakeholders Meeting in Dar es Salaam. This lively session led to some extremely important steps forward for children with low vision in Tanzania. The report is on the KCCO website.

Ms Fortunate Shija organized another highly successful paediatric outreach clinic in Mwanza, with support from a new partner of KCCO: Heart to Heart. Heart to Heart is a Korean NGO and we had a team of 4 from Korea joining the outreach; one, an ophthalmologist, also came to Moshi to provide some lectures for the KCMC ophthalmology residents. In Mwanza, CCBRT provided surgical expertise and over 202 children were examined, 56 had cataract surgery in Mwanza, while 13 children with higher risk and complicated problems had to be referred to Dar. The collaboration between the MoH regional staff throughout northern Tanzania, the regional hospital in Mwanza, CCBRT, and KCCO has always yielded excellent results and, from our perspective, is a good example of strong partnership. A copy of Ms. Shija's report is found on the KCCO website.

With Karin van Dijk's visit to Tanzania, the KCCO team spent time mapping out the next three year programme to strengthen low vision care throughout Tanzania.

With support from Sensis a one day workshop was organized at KCCO for diploma students from Patandi Teacher Training College to help these students to understand the steps involved in a low vision assessment at hospital and how vision develops in a child. Recognizing the need for better counseling and education of parents of children with low vision or blindness, Fortunate Shija and Marianne Kooij organized an information meeting for parents of children enrolled at Mwereni Primary School Annex for Visually Impaired. Parents also shared their first impressions (often misunderstandings) after learning about their child's visual impairment. The session also helped parents to understand more about the problem of visual impairment in children, parental responsibilities when children are on holiday from school, ways to assist participation in daily living activities, and the need to assist their children to take good care of their glasses and low vision devices.

KCCO's Elizabeth Kishiki, currently undertaking her Masters at KIT in Amsterdam, returned in late June to start work on her dissertation related to understanding the knowledge of dispensary health workers related to childhood eye conditions.

KCCO and the Seva Foundation are undertaking a project to document the successes and challenges of implementing eye care programmes for childhood blindness supported over the past 5 years by AED. Data collection and interviews (to provide texture to the data) during this quarter.

Craig Baden, University of North Carolina medical student, finished his three month internship with the KCCO, assisting in the compilation of records on the incidence of secondary glaucoma following surgery for congenital or developmental cataract.

During the first half of 2009 there were 209 children who had surgery in the new paediatric theatre at KCMC; 44 surgeries for congenital or developmental cataract, and 15 for traumatic cataract. Transport and other support for children and parents were provided by Light for the World.

Getting gender and blindness on the global (and local) agenda

KCCO has been collecting documentation from around the world to prepare the World Sight Day 2009 report, the theme being "Gender & Eye Health". The draft report was completed in late June. Collecting reports from around the world has

been a daunting task. Separately, Dr. Courtright served as the editor for the issue of Journal for Community Eye Health on "Gender and Eye Health". The Oman Journal of Ophthalmology also published a KCCO editorial on gender and blindness.

KCCO, along with colleagues from Helen Keller International, International Eye Foundation, and Seva Foundation organized a press briefing at the National Press Club in Washington DC on April 30 to highlight the burden of blindness among women and girls. For those interested, all of the material from the press briefing is available from the VISION 2020 website. Dr. Courtright, at the invitation of ARVO, presented evidence of the excess burden of vision loss among women as well as strategies shown to be successful in increasing utilization of services by women and girls. These are found on the KCCO website.

Unfortunately, Ms Margaret Festo Kessy, the KCCO Gender & Blindness Coordinator, is away on medical leave for an indeterminate period. We're very fortunate in having 2 volunteers, Ms Priyam Chibber and Ms Marcelline Finda who will spend 2-3 months with us and take on the work. Both are Tanzanians, graduates of International School Moshi, and currently university students in the US. Ms Finda spent a year with KCCO before she started university studies in the US. They will continue the data collection and interaction with the "sentinel" ladies in intervention villages. Dr. Robert Geneau visited to assist with training and re-planning of activities in the CIHR and Dark and Light Blind Care project.

Ms Chibber, Ms Massue (new KCCO administrator) and Dr Lewallen were privileged to spend a day in Mwika, hearing stories from women who are part of a wonderful local microfinance project there. The extra money the women have been able to make has allowed them to provide better food for their families and pay for several health interventions. We will be exploring possibilities for expanding on this work with an eye to improving use of eye care services by women and girls.

Teaching and training

Fred Hollows Foundation course

The popular course entitled "Management for ophthalmologists; working with a manager to achieve VISION 2020 goals" was held April 20-24. Seven ophthalmologists from Uganda, Rwanda, Kenya, Madagascar and Ethiopia attended and Dr. Amir Bedri came from Ethiopia to help with teaching this year. The group was especially lively. Among the sessions especially appreciated again this year was one on organizational charts and job descriptions. Most doctors had not previously considered how these tools could help their hospitals run more smoothly. As usual they spent several hours designing these charts and discussing them with each other. Several listed as "most important" the discussions on staff performance evaluations. It surprised one participant to learn that "staff evaluation ... is aimed at improving performance!" Another said, "most important thing I learnt is that evaluation needs to be done by both the [employee] and his supervisor." Participatory staff appraisal has been accepted for years in well-run organizations, but it and other basic concepts of good management are still new for the vast majority of ophthalmologists who are expected to head departments.

Many basic concepts of marketing cataract services had not been considered. In spite of numerous research studies which have demonstrated that turning away

patients with “immature” cataract delays needed surgery for many patients, one doctor commented that he had not realized how enforcing a visual acuity cut off for cataract surgery could pose a barrier to patients who want service.

National Eye Coordinators workshop

With Drs Daniel Etyaale and Amir Bedri, KCCO ran a 4-day course for national eye coordinators (NEC) from Tanzania, Kenya, Burundi, Rwanda, and Uganda. The purpose of the IAPB supported course was to start to reach a common understanding of what a NEC can and should do in his/her country, starting with discussion of job descriptions and moving on to issues of coordination, partnership, supervision, other human resource issues and advocacy. The range of ideas was wide and served as a basis for a similar course in central African countries in late May.

CBM supported training activities

The main activities during this quarter were in support of 3 residents to complete their dissertations and 2 to develop proposals for theirs.

Dr Godfrey Furahini completed his research work on HIV- associated tumor of the conjunctiva in Tanzania. This included supervised upgrade training of RECs and some DECs from 21 regions of Tanzania, plus collecting and analyzing data over one year to estimate the incidence of the condition in Tanzania. One result of his work is that the number of patients with this condition who now get HIV testing in the rural areas has increased dramatically.

Dr Jason Pithwa, demonstrated that even in AIDS patients with very low CD4 counts, retinitis is very rare. This has been speculated upon for many years and is in stark contrast to findings from the West.

Dr Emmanuel Byamukama demonstrated a number of large gaps in the current primary eye care services offered in Mwanza District. This is the first step in improving the services and he will be organizing a meeting with all stakeholders in the next quarter. Sight Savers International supported his research.

Dr Amadou Alfa-Bio prepared a proposal to study the increased quality of vision provided by presbyopic spectacles among elderly rural Tanzanians.

Dr. Marvice Okwen prepared a proposal, which will fit into a larger study (supported by the African Health Systems Initiative) in Tanzania, Kenya, and Malawi, to study the impact of enhanced supervision on the primary eye care skills of health workers at dispensaries in Kilimanjaro region.

At Tumaini University, KCCO organized lectures for occupational therapy students on blindness prevention and for medical students on trachoma.

Assessing the impact of Primary Eye Care in Rwanda

A full report of the evaluation of the primary eye care programme in Rubavu District in Rwanda has been prepared by Dr. Andreas Mueller and is now on the FHF website. A manuscript based upon this work is under preparation.

Trachoma control efforts

The final report for the IDRC supported trachoma research project was submitted in early June. In late April Dr. Courtright met with Dr. Danny Haddad, the director of ITI, now housed at the Task Force for Child Survival and Development to explore possibilities of KCCO support to global trachoma control efforts.

KCCO helped facilitate a trip for National Public Radio (NPR) journalist Odette Yousef to cover trachoma control efforts in Ethiopia. The compelling stories that Odette has compiled can be found on NPR (<http://www.pba.org/blogs/>) as well as the VISION 2020 website. There is one story on gender and trachoma.

Human resource development in Africa

In late June KCCO was informed that it was awarded a grant from the Canadian African Health Systems Initiative (AHSI) to conduct collaborative research in Kenya, Malawi, and Tanzania to better understand how “task shifting” has been implemented and how skills can be strengthened. This three-year project will start in the next quarter and the international team is keen to start.

Other activities

Dr Lewallen spoke at National Eye Institute (part of the National Institutes of Health) in Bethesda on “Challenges to eye research in sub Saharan Africa” and at USAID in late May. She spent one week in Ghana in April working with team at Kumasi to introduce examination of children with cerebral malaria.

Miranda Buckle, a medical student from Oxford University, started her two-month internship with KCCO. She will be assisting our colleagues at the Kwale District Eye Programme (Kenya) and KCMC to assess the impact of biometry on cataract surgery outcomes.

Dr. Courtright, at the request of IAPB-EMR, joined the MEACO congress in Bahrain to discuss approaches to improved support from EMR to capacity building in Africa.

Ophthalmic Resource Centre for Eastern Africa

With funding cuts by Sight Savers International, ORCEA has had to reduce services provided. With support from Light for the World, material on childhood cataract and low vision was disseminated throughout Tanzania with the final issue of the Journal of Community Eye Health. We are also grateful for support from the CCO network, under the Seva Foundation, which will provide bridging support for the remaining months of 2009.

KCCO visitors

Mr Daniel Blaesi from the Swiss Lions and Dr. Suzanne Gilbert (Seva Foundation) spent 10 days with KCCO, during which time Mr. Blaesi and Dr. Courtright visited Burundi to meet partners and review the upcoming planning session.

Ms Rochelle Payes, from AED (Washington D.C.) spent a few days in Moshi to see KCCO activities first hand and to join the June session on childhood cataract and low vision in Dar es Salaam.

Dr Robert Geneau spent several days with KCCO supporting the CIHR gender work.

KCCO Development News

Mr Elangwa Mcharo, KCCO administrator left in June to pursue further studies. KCCO was fortunate indeed to recruit Ms Giselle Massue to fill the gap.

Ms. Sylvia Shirima, AED project coordinator, left KCCO to take a position in Dar. Everyone at KCCO will sorely miss Sylvia, who had done a stellar job with all of the AED supported work. She recently had a paper accepted in the British Journal of Ophthalmology on her study of childhood blindness in Kilimanjaro Region (supported by Simavi and cbm).