

KCCO



Kilimanjaro Centre for
Community Ophthalmology

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Annual Report 2003

The Kilimanjaro Centre for Community Ophthalmology (KCCO), established in October 2001, exists within Tumaini University/KCM College and serves in a consultative role to the Eye Department at KCMC Hospital under a Memorandum of Understanding with these bodies. KCCO activities in 2003 were supported by specific grants from agencies listed within and at the end of this report.

KCMC Hospital/Tumaini University based activities

Karibuni Macho- Sustainability Planning for KCMC Eye Department

The major activity in this programme in 2003 was the implementation of a computerized registration and comprehensive accounting system in the Eye Department. The registration system was designed at the Lions Aravind Institute for Community Ophthalmology (LAICO) and LAICO faculty assisted with implementation of this system at KCMC. This is the only computerized registration and record keeping system at KCMC and was showcased on Tanzanian TV and in the print media. The registration and accounting system are critical to developing a high volume, efficient, financially sustainable Eye Department. We are continuing to improve reporting from these.

In addition, most of the physical renovations we planned to permit more streamlined, patient friendly multi-tiered accommodation services have been completed. An assessment of nursing staff needs has been completed and draft plans made for reallocating, training, and hiring necessary staff in the Eye Department. Dr Lewallen has served this year as the supervisor and coach for the Eye Department administrator, who

is now taking on more responsibilities. The International Eye Foundation (IEF) is the principal donor for this work.

Training and capacity building for the KCMC Hospital and Tumaini University

The KCCO continued to provide training within the Eye Department in several ways.

- Regular weekly sessions in community ophthalmology topics are provided for the MMed (residents). The focus of the first half of the 2003-4 academic year has been on management strategies for prevention of blindness.
- Weekly sessions on community ophthalmology are given to the AMO-O students. The focus of the first half of the 2003-4 academic year has been on the principles of Vision 2020 with the 2nd year AMO-O students responsible for some of the teaching.
- Teaching in information technology has been stressed so that all students are in the habit of self-learning and continuing education as well as improving information exchange.
- KCCO also continued to supervise or prepare about 25% of the weekly Eye Department academic teaching sessions for faculty, staff, and students.

KCCO supervised the successful completion in 2003 of an MMed thesis on childhood cataract and started supervising two more theses for the Eye Department. We supervised the preparation and presentation of 8 of the 9 KCMC Eye Department faculty and MMed contributions at the annual Ophthalmic Society of East Africa meeting in Nairobi in August. KCCO/KCMC had the most presentations among all academic institutions in eastern Africa.

KCCO staff provided training sessions for MPH, medical, occupational therapy, and degree nursing students at Tumaini University, and provided lectures for the general KCMC Hospital clinical conferences and the newly established hospital wide research presentations. Dr Courtright helped plan and present a hospital wide workshop on general principles of research.

KCCO spearheaded an initiative to re-design the AMO-O training programme in order for the programme to meet the eye care needs in Tanzania. This will also allow a more sustainable and academic training to be offered. CBM helps to support these activities.

Kilimanjaro Region based activities

Increasing uptake of cataract surgery in Kilimanjaro Region

The KCCO-organized and supervised Direct Referral Site (DRS) Programme, running since October 2002, has resulted in a large increase in the number of cataract patients

operated at KCMC. All districts in Kilimanjaro Region are now served. The programme is the heart of the Kilimanjaro Regional Vision 2020 plan, which is a partnership with KCMC Hospital, Lions Clubs, regional and district Ministry of Health, and the local Community Based Rehabilitation (CBR) Programme. Developing this successful partnership among groups who have been working separately for a number of years in the Region has required a tremendous effort and persistence, but we are all working together now. The increasing number of cataracts operated speaks for itself. The Seva Foundation and Seva Canada are the principal supporters of this work.

District	Start date	# DRS held	# people examined & treated	# cataract patients brought to KCMC for surgery* (% women)
Hai	16-10-02	12	2,982	146 (50.0%)
Same	26-01-03	12	2,440	148 (46.6%)
Moshi Rural	04-04-03	12	1,974	82 (42.7%)
Mwanga	12-08-03	5	1,182	40 (35.0%)
Rombo	30-10-03	3	1,060	23 (54.8%)
Moshi Urban	(not yet)	0	0	0
Total		45	9,638	458 (46.7%)

* Some of these patients had surgery in both eyes.

The success in the growth of cataract surgeries being carried out at KCMC cannot be attributed to only one activity; besides the DRS and other community efforts, the successful negotiation with KCMC Hospital to reduce the price charged to the patients, the improved flow of patients through the clinic and theatre, and improved skills of staff have all contributed to the changes.

	2003	2002	2001
Adult cataract operations at KCMC	1604	1023	598
Cataract surgical rate (Kilimanjaro region)	929	556	325
% of cataracts from Kilimanjaro region	80	75	75

Tanzania based activities

Improving management and activities of surgical outreach
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Sight Savers International supported the KCCO to organize and run a one-week workshop for the 8 sites receiving surgical outreach services from the Eye Department. The goal of the workshop was to assist in making these sites more efficient and productive. Training covered assessment of current output and gap analysis, improved efficiency, better patient selection and pre-operative management, financial

sustainability, improved administration of outreach activities, follow up, and reporting. The workshop was well-received and the participants have adopted strategies to improve their programmes.

Vision 2020 planning in Tanzania

Dr. Courtright and Dr D Etyaale (WHO), with assistance from Dr. D Haddad (HKI), organized and ran the National Vision 2020 planning workshop for Tanzania in May. During the workshop the Tanzania government officially endorsed the Vision 2020 initiative. Pre workshop efforts by KCCO pulled together, for the first time, comprehensive baseline cataract service delivery data for Tanzania, which was then used by representatives of each region to set future targets and start making plans to achieve these. At the request of the National Prevention of Blindness coordinator, KCCO agreed to lead northern regions in Tanzania to develop region outlines in 2004. The workshop was supported by a grant from the IAPB/Vision 2020 through the London School of Hygiene & Tropical Medicine.

Childhood cataract: Research & programme activities

With support from Seva Canada, research on childhood cataract was carried out at KCMC Hospital and CCBRT Hospital, Dar es Salaam. The primary focus of this research has been on aspects of delay in presentation to hospital for surgery. Findings indicated that there were excessive delays, most commonly with children with developmental cataract, prior to a child being brought for surgery. In addition, girls were half as likely to have surgery compared to boys. Ms. Annie Bronsard has been supervising much of this work.

With a grant from Dark & Light, Ms. Mary Moshia was hired late in 2003 to manage a programme (both service and research) in childhood blindness for the northern regions of Tanzania. The grant aims to establish a “whole child” approach to service delivery, starting from early detection to surgery to proper refraction, to low vision care.

In the calendar year 2003 the number of children having congenital or developmental cataract surgery was 99, up from only 60 in the year before.

Trachoma research, training, and programmes

KCCO was involved in a number of trachoma research, training and programme activities in Tanzania in 2003. These included:

- The International Trachoma Initiative (ITI) supported two year research project “Strategies for Increasing Uptake of Trichiasis Surgeries” came to a successful completion at the end of 2003. Mr. Michael Mahande, project director, presented preliminary findings at the 2003 Tanzania Public Health Association meeting. Findings are still being compiled and a report will be completed in early 2004.

- Two Masters students in anthropology from Brunel University, UK spent 3 months in the field with KCCO staff on research related to water use and trachoma and perceptions of trichiasis surgery. They completed their dissertations on return to the UK.
- Research in Rombo district, in collaboration with the London School of Hygiene & Tropical Medicine and supported by ITI continued throughout 2003. Data from this work is being entered at the KCCO and findings analyzed in Tanzania and at the LSHTM.
- Educational sessions on trachoma were provided to ophthalmic nursing students and MD students at Tumaini University, as well as to MMed (ophthalmology residents) and AMO-O students.

Eastern Africa & International activities

Ophthalmologic Resource Centre for Eastern Africa (ORCEA)

The capacity of ORCEA improved considerably in 2003. The number of books, journals, and other materials increased; three computers were in place for use by the end of the year. Mr. Allen Shembilu became the ORCEA Coordinator in August, ably managing the lending library and basic information technology (IT). All students in training programmes at the KCMC Eye Department now receive training in IT and are expected to use the internet extensively for education. Support from Sight Savers International and CBM through ICEH/London assisted the growth of the centre. ORCEA started a "Trachoma Information Service (TIS)" in 2003, providing information to eye care workers and others throughout Africa. There are over 200 people on the TIS email list and over 100 receiving this service via post in Tanzania. In addition, WHO trachoma materials are now distributed, as requested, to health care providers in the region. Helen Keller International has been the primary supporter of these programmes.

Dr. Courtright attended a meeting in London in July for all of the resource centers initiated under the SightSavers International and CBM supported ICEH project. This has led to a re-structuring of ORCEA activities to be more pro-active in providing information throughout the region.

Trachoma and prevention of blindness activities in Egypt

The KCCO continued to collaborate with various partners on trachoma and prevention of blindness activities in Egypt. These can be summarized as follows:

- Collaboration with the Al Noor Foundation to carry out the "Long-term Outcome of Routine Trichiasis Surgery" research study. The study has enrolled 604

patients (889 eyes), monitoring their clinical and visual function outcomes. The research is supported by the ITI.

- With support from IAPB through the London School of Tropical Medicine & Hygiene, the KCCO co-organized (with the Al Noor Foundation) the October Egypt National Vision 2020 meeting. The First Lady, Madame Mubarak, opened the workshop. The workshop set targets and strategies to facilitate the development of a national Vision 2020 plan.
- Research was carried out with colleagues from the Al Noor Foundation and American University Cairo to identify the individual, family, and community characteristics associated with changing behaviours for improved trachoma control. Dr. Robert Geneau provided the training and supervision for this project.
- The KCCO provided technical assistance to the Al Noor Foundation to carry out a survey of trachoma and blindness in Menia governorate. The findings from this survey are being compiled.
- The KCCO assisted the Al Noor Foundation in its successful submission to the Canada Fund to undertake a gender-sensitive programme on increasing eye care services
- Dr. Courtright served as the external supervisor for Mr. Ahmed Mousa's successful Masters defense and thesis. Findings from his work will be published in the *British Journal of Ophthalmology* in 2004.

Vision 2020/IAPB Activities in eastern Africa

Dr Courtright served as a facilitator for National Vision 2020 planning workshop in Malawi in January. The workshop brought together all eye care providers in the country and participants left with a sense of their mission in bringing high quality eye care to all Malawians.

As noted above, the KCCO was a lead agency in the planning and implementation of the Egypt Vision 2020 workshop in October. This workshop ended with a clear set of goals and tasks to be carried out to set up a national Vision 2020 programme.

Dr. Courtright participated in the Hyderabad IAPB meeting in mid-September. KCCO is a member of the Partnership Committee.

Gender and eye care

There was considerable progress on a variety of issues related to gender and blindness. The WHO (Gender and Women's Health Unit) supported research project in Tanzania entered its second year. This project, using a gender-sensitive approach to awareness, access, and acceptance of eye care services, has been instrumental in achieving the higher rates of service utilization shown in the KCMC cataract data presented earlier in this report. Field activities have included anthropologic assessment

of factors associated with a failure to use services as well as quantitative assessment of uptake according to specific pre-project indicators.

Other activities carried out in the region included:

- Ms. Ida Paul (KCCO anthropologist) and Dr. Courtright joined colleagues from India, Nepal, Canada, and the US in Madurai (LAICO) in India to discuss methods and progress. This meeting, supported by the Canadian government, facilitated sharing of ideas and approaches by project staff.
- *Ocular Surgery News* published a detailed article [“Prevalence of women’s blindness similar worldwide despite causes”] in its November issue with pictures from Tanzania. The issue highlighted the variety of activities being carried out around the world.
- Dr. Lewallen gave presentations on gender issues in blindness and eye diseases to CBM partners in Uganda and Kenya in April and May.
- Dr. Courtright was the lead-off speaker at a Harvard University organized seminar on gender and blindness in November. Following this seminar a number of newspapers ran articles on the topic. Additional reports are expected.
- At the request of WHO Dr. Courtright gave a presentation at the 4th International Conference on Women and Health. The meeting, held in Dar es Salaam, led to two front-page articles in local newspapers on KCCO’s work on gender and blindness.

Management training for Eye Care in Africa

In December the KCCO and the Lions Aravind Institute for Community Ophthalmology (LAICO) jointly ran the first course on management specifically for eye care programme managers in Africa. This course, supported by IAPB through a grant to the London School of Hygiene & Tropical Medicine and specific NGOs, had eleven participants from 6 African countries. The one-week course covered the topics of programme planning, human resource development and management, management information systems (monitoring and evaluation), financial and materials management, leading change, developing and strengthening partnerships, and organizational and financial sustainability. The KCCO and LAICO hope to hold this course on an annual basis.

Separately, Dr. Lewallen provided training to CBM partners and staff in Kenya and Uganda on decreasing donor dependency and sustainable eye care delivery.

Cerebral malaria research in Malawi

Dr Lewallen continued to work on cerebral malaria with the Blantyre Malaria Research Project, under an NIH grant, investigating what we can learn about this devastating disease from studying the eye. An important new finding (due to be published in *Nature Medicine* in 2004) is that about 25% of children who die with a diagnosis of cerebral malaria actually have other causes of coma and death; these children can be

identified by their eye findings on admission to hospital. Recognizing other causes of coma earlier could save the lives of some of these children.

KCCO Organizational Information

Staffing

Staff	Position
Paul Courtright, DrPH	Co-Director
Susan Lewallen, MD	Co-Director
Annie Bronsard, MSc	Research Assistant (Anthropology)
Robert Geneau, MSc, PhD	Research Assistant (Anthropology)
Joseph Banzi	Community Coordinator
Michael Mahande	Trachoma Research Coordinator
Ida Pauli	Anthropology Research Coordinator
Allen Shembilu	ORCEA Coordinator
Mary Moshia	Childhood Cataract Coordinator
Ishikande Ndossi	Counseling Coordinator
Baltazar Mosoi	Assistant Community Coordinator
Jenny LaSwai	Data entry clerk
Alex Pallangyo	Field assistant
Rose Laizer	Field assistant
Peter Paul	Field assistant
Fred Ngomba	Driver

Financing

The following organizations and individuals (listed in alphabetical order) supported specific projects or donated time or money to allow KCCO activities to occur in 2003.

Al Noor Foundation	Christoffel Blindenmission
Good Samaritan Foundation	Helen Keller International
International Eye Foundation	International Trachoma Initiative
JoAn and Michel Maurer	Nadine and Jerry Popham
Larry Schwab	Dark and Light Foundation
Seva Canada	Seva Foundation
SightSavers International	Nancy Smith
World Health Organization (GWH)	

In addition we would like to recognize collaborating partners at
 London School Hygiene and Tropical Medicine
 Lions Aravind Institute for Community Ophthalmology

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Publications by KCCO staff in 2003

Courtright P, Hoeshmann A, Metcalfe N, Chirambo M, Noertjojo K, Barrows J, Katz J. Changes in blindness prevalence over 16 years in Malawi: reduced prevalence but increased numbers of blind. *British Journal of Ophthalmology* 2003;87:1079-1082.

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