

Monthly News Reports 2010

December 2010

We would like to thank all those who have supported our work throughout the year. Donations from individuals, friends, trusts and organisations have helped to restore people's sight and we, the staff, patients and their families, hugely appreciate your gifts.

The Greatest Gift

Here are some examples of children who were born blind, or injured while playing or herding goats and thanks to you their lives have been changed.

1st photo: Urema is amazed that she is able to see.

2nd: Saumu is able to see her toys.

3rd: Tsuma, while out playing, he was hit by a stick in his left eye. It filled immediately with blood, clearly a dangerous injury that could have led to permanent loss of vision. Luckily for him he reached us in time and surgery saved his sight. The photo shows Tsuma after surgery

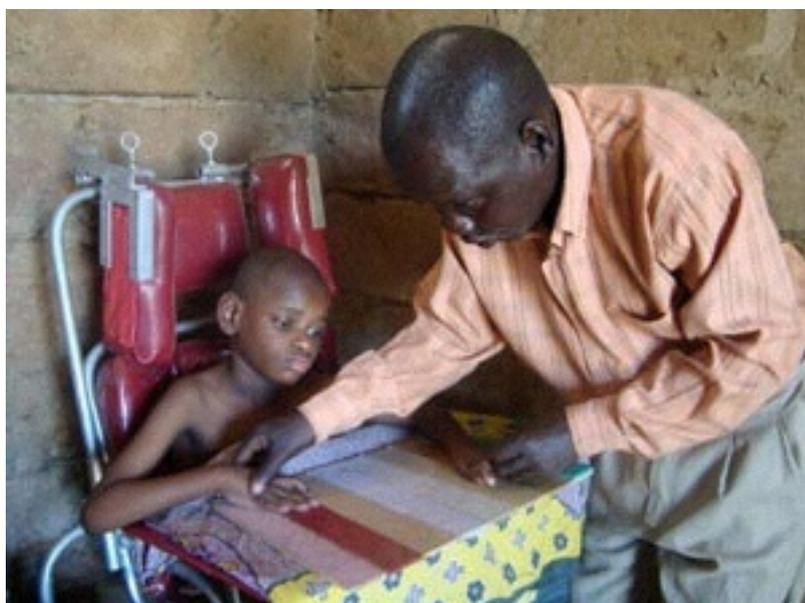




Update on young patient Daniel

In January 2010 we reported on this 7 year-old deaf blind boy who had been neglected by his family. His only consolation and constant companion was the tomato crate in which he had been placed. After months of communication training and follow-up, Daniel now has something to smile about.

He has made tremendous improvement; attends a special school but most of all he enjoys playing with other children. His family members now have a different attitude to Daniel. They are astonished at how much he has changed and they enjoy playing with him.



Above: Here we see Daniel in his new chair with the area Community Based Worker during a follow-up visit.

November 2010

Eye Go Fishing

Dawn on Sunday 21st November revealed 18 deep sea fishing boats setting out from the Kenyan coast near Mombasa to take part in our annual Eye Go Fishing Competition to raise funds to fight blindness. But why this support from fishing enthusiasts ? Well, many people on the Kenya coast earn a livelihood from the sea and those who work near the shoreline, particularly require good eyesight to be successful.

An astonishing seven people in every thousand Kenyans are blind. Most of them are needlessly so. They would never have become blind had they had access to quality eye care in the first place.

La Marina Restaurant, Mtwapa, near Mombasa, was a hive of activity before and after a hot and tiring day's fishing . The crews and their supporters auctioned their boats for the event and created an atmosphere of cheer, humour and generosity. Regular visitors to Kenya, Barrie and Cathy Hilton, won the competition fishing from 'Delta'.

By the end of the day Ksh366,520 (around \$ US 2000) had been raised, of which, Liaison Risk and Financial Services, the main sponsors, donated a generous Ksh150,000/- (approx \$ US 850) to the event.

Eye Go Fishing was backed by many other Kenyan companies. The local support was, as ever, overwhelming.

'Everyone loves coming to this event,' said one tired but happy fisherman, another said ' I fly in from wherever I am in the world for it because it is so much fun and for such a good cause'.

Delighted medical director Dr Helen Roberts said, 'Thanks to the generosity of all those who supported this event, we can carry out 105 cataract operations and help people become valuable members of their communities again.'



Above: Liaison's Judy Musewa presenting Dr Helen Roberts with their cheque, with them are Danson Kaba and Joyce Konde, also from Liaison



Above: Some of boats setting off for deep sea fishing with the mission of saving sight

Mission to northern Kenya to Save Sight

On request and with appropriate approvals we set up surgical eye camps in remote areas where eye services do not reach the local population. In response to a request from The Sayyid Abass Foundation, originating from the local community of Rhamu, a village in the horn of Kenya up near the border with Somalia , we travelled to this remote, hot and dusty area which had no electricity except for that generated by solar power.

Our team saw over 1,200 patients many suffering from cataracts as a result of trauma and ageing, and performed 234 cataract operations in 6 days.



21 year old Sowda had been blind since she was 15 years. Sowda had to be led to the camp because she was totally blind. After surgery she described how it was to see again after six years of darkness. Now she can marry and lead a normal life. No one had wanted her when she was blind. The two photographs show Sowda before surgery and then after surgery – looking forward to a brighter future.



Above left: Sowda before surgery, Above right: Sowda after surgery

Basco Paints and Team Spirit

The paint on the wall around the eye centre had become in a poor state and did not reflect the excellent work being done within the Centre. Armed with 240 litres of quality paint very generously donated by Basco Products (K) Ltd, the staff set-to and displayed their 'Do it Yourself' skills by painting the 340 metre perimeter wall a radiant white. The exercise was a fine example of team work and the delighted staff vowed never to hire a painter again.



Above: The wall before painting
Below: Staff putting their painting skills to work



Below: The clean and radiant wall



October 2010

Support from Thomas Cook Children's Charity

We are very grateful to Thomas Cook Children's Charity UK who recently donated £5,000 to the Eye Centre to help children with visual challenges. We started our Low Vision and Education programme 17 years ago when we realised that children who were blind or partially sighted were being hidden away at home because they were considered a curse on their family. Since then, the impact of creating and improving awareness in this poor rural community means that these children are now more accepted and brought to KDEC so that we can help them see so that they can go to school. In doing

this we work hand in hand with the Ministry of Education, schools and teachers and, of course, the children's families.

Manny Fontenla-Novoa, Group CEO of Thomas Cook Group Plc and Chairman of Thomas Cook Children's Charity commented; " Kwale District Eye Centre is an amazing organisation and we're delighted that our donation will help to improve the lives of so many children. We send hundreds of British holidaymakers to the Mombasa area every year and are thrilled that we can help give something back to the community."



Above: The Thomas Cook UK Team in Kenya, represented by the Gateway Supervisor Ms Leila Smith (third from left) with her team give a cheque for £5,000 to Dr. Helen Roberts (front right with some of the patients).

The new 'Bus Driver'

Dr. Stefan Vogel has visited Kwale District Eye Centre each September for the past eleven years and is very much one of the home team. He taught us the technique of modern phacoemulsification cataract surgery, but he is not afraid to leave the air conditioning of the operating theatre to work in the field with visually impaired children or to screen patients. On his recent visit, yet another of his talents came to the fore. For the four weeks which he spent at the Eye Centre Dr. Stefan became the staff bus driver ferrying our staff to and from work each day. He said how happy he was to be the 'bus driver' and hoped to be given the opportunity to act in this capacity on his next visit!



Above: Dr. Vogel drives the staff home after a hard day restoring sight.

Update on the new satellite clinic at Taita.

The word has gone round the local community since we officially opened in July that we are 'in business' and the number of patients of all ages increases weekly. Eyes for East Africa UK trustee Jim Crow visited recently and took note how we had settled in, sharing a building with a honey refinery.

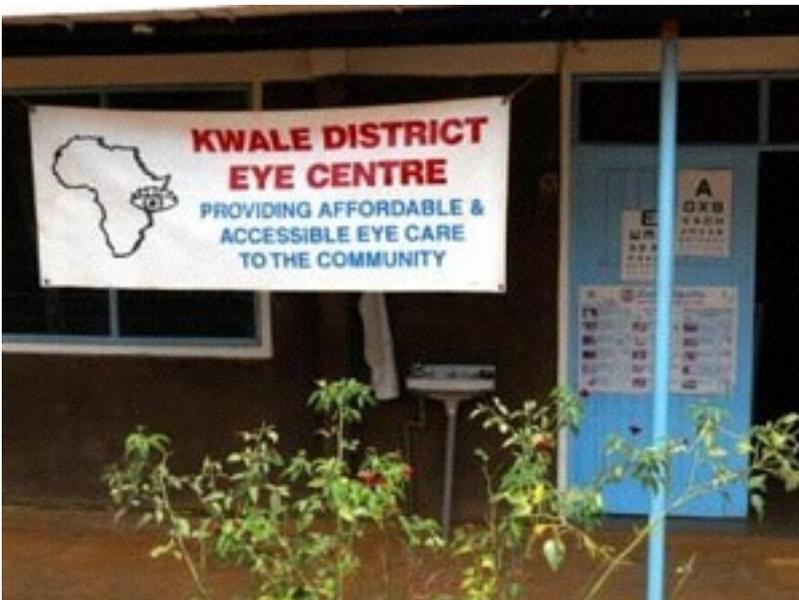
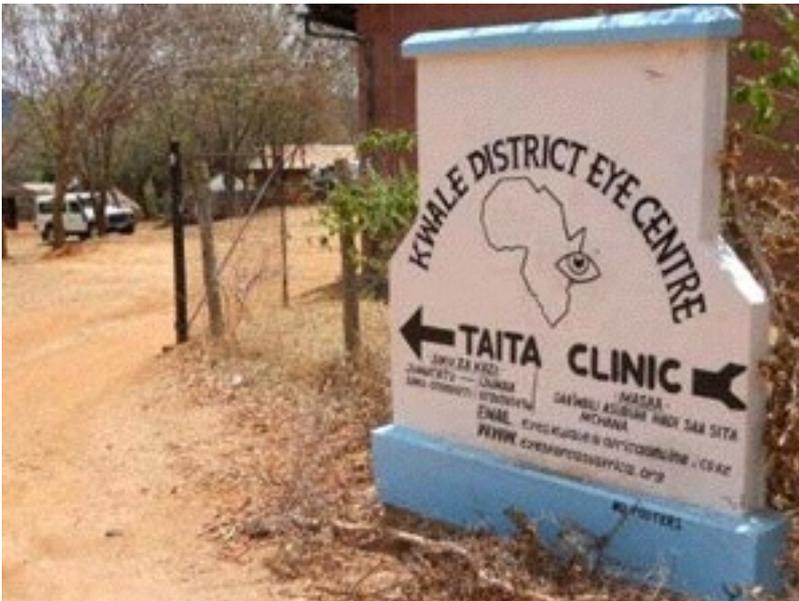
The accompanying photographs give an idea of what our place looks like.

1st: Dr Helen checking up on a young patient.

2nd: This way for the Taita eye clinic

3rd: No mistaking who we are.





September 2010

Boost for Children with Albinism

Of the 450 children in our low vision and education programme, 130 suffer with Albinism. These children, who lack pigment in their skin and eyes, come to our attention because they are visually challenged. But they are faced with even larger challenges. Children who look so different to everyone else are often treated very badly by a community, who do not understand the condition.

We create awareness in an attempt to gain understanding and dispel some deeply held prejudices. We encourage the community to accept them and

recognize that these children have just as much right as anyone else to a normal life and, specifically, an education.

The Verkaart Development Team from The Netherlands have recognized these children's challenges and supported them for many years. Mr. and Mrs. Verkaart have generously pledged Ksh1million, (around \$US 12,500), to support a second vision therapist at Kwale District Eye Centre for three years. Our therapists help by explaining to the community, the child's parents and teachers how to best help this child and by following up the child and their family to ensure that they receive support.

Mr. Verkaart expressed his wish to continue to support children with Albinism and thanked KDEC for the work which we do to optimise these children's sight and to help them to access and succeed in school.



Above: Mr. Verkaart and Ms. Mbogo of the Verkaart Development Team in Kenya present the cheque to Dr. Roberts

Lady from nearby sees again

It is our greatest joy to enable people to see again, sometimes it is difficult to understand why people don't come for such help earlier.

We were amazed to find that Mkasi, aged 45, lives only 5km from the Centre. She had been blind for two years.

Our Community Based Worker had been trying hard but without results to persuade her to have surgery to restore her sight for over a year.

One day, she decided enough was enough and agreed for her son and daughter-in-law to bring her to the Centre, but refused to explain why it took her so long to come to us.

When she could see again, Mkasi relaxed a little and told us how much of a bother she had become to her family. Her eldest son had had to drop out of school to look for a job in order to fend for his brothers and sisters.

The series of photographs tell the story in pictures.

1st: Mkasi on arrival at KDEC flanked by her relatives

2nd: Mkasi after her surgery

3rd: Mkasi a week after surgery on both eyes – she looks happy.. and younger!



Destination for tourists?

KDEC hosted 40 tour leaders who were eager to know what KDEC does and see whether their tourists may be interested in visiting us as part of their Kenyan experience. They promised to send them to us and to help support our work.

We are fortunate in that Kenya is a beautiful country and many visitors come to enjoy it. They often want to see a little of the 'Real Kenya' and we welcome them to do so by including KDEC on their travels. We have made many friends and supporters of the Centre in this way. The photo shows the recent group of tour leaders who came to see us.



Above: Visitors to Kenya commemorated their time at KDEC with a photo including the Medical Director

Fundraising in the UK

We are grateful to the many individuals and organizations who contribute to the work of the eye centre. While it is not possible to mention on the website all those who make donations we would like to give the following a special mention.

Wheldrake with Thorganby C.E. (Aided) Primary School in Yorkshire

Earlier this year pupils from the school took a part in a sponsored walk in the beautiful Yorkshire Dales and raised almost £300 in the process.

The photograph shows pupils and accompanying helpers preparing for their sponsored walk before they set off.



The Sylvia Adams Trust

We are grateful to the Trust for their recent donation of £ 14,400 which will allow the work of restoring sight to continue. We will be reporting on the outcome of their contribution in due course.

Monni does it again!

Many of you will remember the News Report of September 2009 reporting the fundraising efforts of Dr Monika in a UK half marathon. Since then Monni, supported again by Stiftung pro Afrika in Germany, has raised a further £2,750 for us by taking part in the Edinburgh half-marathon during the summer. Many thanks for all your running on our behalf. We hope you can come and see us soon - but not by running from Europe to Kenya.

August 2010

Sight Restoration Re-unites Family

When our team set out to visit little Saumu, now aged five, they were astonished to be directed to her paternal home. They had not met her father and knew only that the strain of having a disabled child had finally caused the breakup of this particular family. As they approached the homestead they were astonished to see Saumu was playing with her father. Her mother, who had heard the motorbike's approach, rushed to explain to the visitors what had happened. The parents had made up when the father heard that his daughter could see after her cataract surgery. Wanting to see for himself, he asked his wife to come back home.

Our Therapist and Community Based Worker left the home very happy. To witness people seeing again is always a great joy, but a family reunited by this, exemplary.

Sadly Saumu remains deaf, but with her new found sight she stands to gain so much more from life. Saumu's mother still remembers with nostalgia how it all started.

Saumu was 3 years old, deaf and blind when we first met her. She was tiny and very weak. When she was diagnosed with cataract it was decided that an operation in her condition would be fatal. Her mother had explained that she was struggling to feed her children as her husband had left her when Saumu was only a year old and she was already pregnant again. Saumu was fed fortified porridge from the Government nutritionist for six months until she was strong enough for surgery.

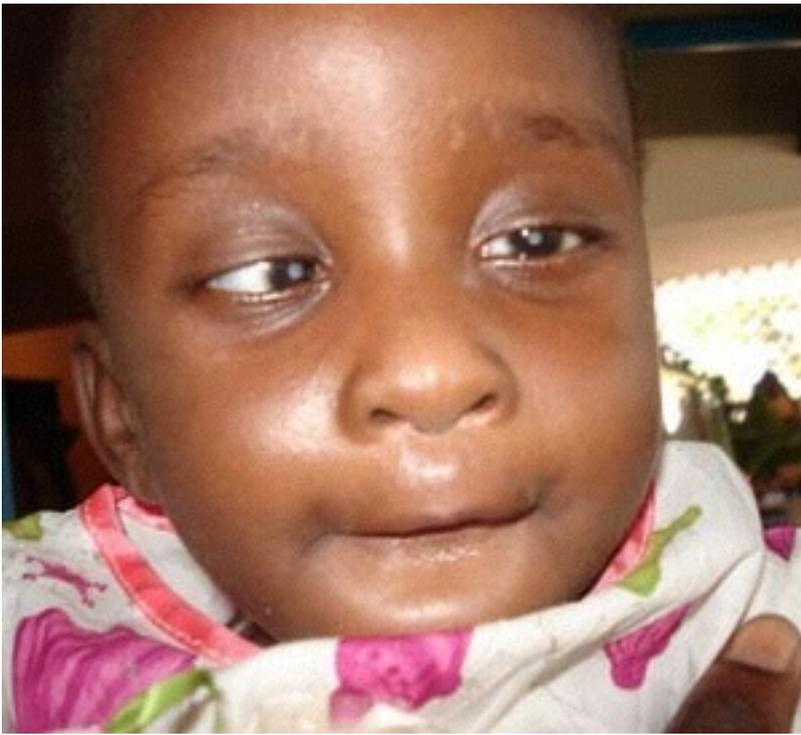
Photographs:

1st: Saumu with her happy reunited family

2nd: Saumu before surgery

3rd: Saumu after her surgery





Eye Give sponsorship takes care to the needy

A donation through our Eye Give scheme enabled us to hold a remote field screening in a deprived rural area where the main barrier to people reaching help is poverty. We saw over 400 patients and were able to offer them sponsored surgery. 58 operations, of which 54 were sight restoring cataract operations, were performed. The patients and all at the eye centre are all very grateful to Sylvie Richards.

Note: The [Eye Give](#) Scheme encourages people to give the Gift of Sight , particularly as they can be advised as to who has benefitted from their donation.



Above: Some happy patients who were helped by the donation

Fundraising in the UK

We are grateful to all those who supported Drs Richard and Sarah Sidebottom and Emily Boardman in raising over £3,000 for the eye centre at an 'Eye Dine' Dinner Dance held on 20th August at Lady Margaret Hall, Oxford. The photograph on the right shows one of the supporters enjoying the event.



July 2010

In this edition we cover in more detail the opening of our new branch clinic in Taita District, the important role of traditional healers in assisting KDEC plus details of financial support from the National Bank of Kenya.

Official opening of the Taita branch clinic

In the May news report we highlighted the opening of our branch clinic at Mwatate in Taita District. The clinic was officially opened in July by Mrs Shufaa Omar, the District Commissioner who, in front of other guests and members of the public, thanked Kwale District Eye Centre for bringing eye care to the people of Taita.

The event was combined with an Awareness Day at the clinic, an important step in overcoming any reservations the local community might have about seeking treatment for eye problems.

In her speech, the District Commissioner urged the area chiefs, all of whom were present, to stress to their community the need to seek early treatment of eye problems at the newly opened Clinic.

She went on to promise that through the District Development Committee, she and other government bodies would ensure that information about the work of the eye clinic would reach all grass roots levels.

Many Rural Health Workers (the nurses who run the dispensaries in the area) attended and were keen to know more about the eye centre and how we could work together.



Above: Mrs Shufaa Omar signing the visitors' book



Above: Members of the public listening to the DCs address to the chiefs present (standing)

Doctors' meeting strengthens link with community

We always work with existing community structures to create awareness on eye health and to help break down the barriers which prevent patients from seeking help. This month, local traditional healers gathered at KDEC to learn about our work.

Traditional Healers are normally the first people the community will turn to for help with health issues. They are very respected and trusted, and what they say normally carries the day. Forging links between KDEC and the healers helps to break down barriers of fear and suspicion which prevent people from coming for eye treatment.

The gathering was aimed at demystifying the work of KDEC, especially the surgical aspects of treatment and encouraging the community to seek conventional treatment.

The traditional healers learnt about the comprehensive aspects of eye care available at KDEC. They pledged to ensure that no blind patients would be left in their houses, that children with low vision be sent for help and those with Albinism attend school.

They agreed support the rehabilitation of the irreversibly blind and those who are both deaf and blind. With help from these trusted people we can reach more of those who need us. The photograph on the right shows the healers taking notes on what they need to refer to KDEC.



Support from local bank enables people to see

In January, we explained how global financial problems have impacted on our work and how we seek support, particularly from local corporate organisations. The National Bank of Kenya came to our aid by sponsoring an eye camp in the area. With their help, over 200 patients were seen and treated and 8 sight-restoring cataract surgeries performed.

We hope that many more local corporate organizations will follow their example and help us to restore sight. (Photographs below)



NBK representatives present the sponsorship cheque to Rehema Suleiman, HR & Administration Manager



Some of the patients who benefited from the sponsorship

June 2010

See one of the wonders of the world

The visit by our eye team to the Masai Mara Game Reserve was just in time to enable the locals to see the famous spectacle of the wildebeest migration. Over 300 patients were tested and 111 sight-restoring operations performed.



Above: Patients struggle to the camp in line for help.

Naisenya

Naisenya was one of the patients treated at the camp. She was born blind with cataracts nine years ago. She had never been to school, let alone seen the migration. She had successful cataract surgery by our team in both eyes and gave all those involved such joy as she exclaimed with delight when she could see for the first time in her life!

She is desperate to see the migration for the first time and to go to school with her brothers and sisters.



Above: Naisenya before surgery with her mum.



Above: Naisenya telling Lillian, our cataract surgeon, what she will do now that she can see.

Myth about eyes disproven

Alfani was an energetic palm tapper who spent most of his working day climbing up to the very top of tall coconut palms to collect their sap. Each tree needs to be climbed three times each day and the fluid collected can be drunk within two days or distilled to make a strong spirit. But the shadow of darkness fell onto Alfani's doorstep. He developed blinding cataract. His only wish was to get back to his lofty profession and keep his successful business operational.

He sought help from all angles but none brought back his sight. Many of the people he asked suggested he went to KDEC, but Alfani was suspicious. He had heard that his eyes would be gouged out and a goat's eye implanted. That was if he survived the surgery. After 9 months of 'baby-sitting' her helpless husband, Alfani's wife had had enough. She decided that it was better to take the risk of goat's eyes or death on the operating table than to put up with the frustrated difficult husband Alfani had become. Her persistence saw the couple come to a nearby screening and to KDEC for surgery. His mature cataracts meant that he had been blind for over a year. Neither Alfani, nor his wife could believe it when he was able to see to walk on his own.

On their return to the village, they kept phoning the clinic to express their appreciation. Such is field work in Africa!

Pictures:

1st: Alfani, blind, at the Centre with his persistent wife.

2nd: Alfani, where he likes being most of the time, up a coconut tree.





Heavy downpour and bad terrain would not deny children services

Field work is much easier when the sun is shining and the roads smooth. Our Vision Therapist, Almasi, was all geared up to ensure that children receive our much-needed services; little did he know that the journey on this day would be challenging.

Armed with all his equipment strapped onto his trusty motorbike, he was caught in a heavy downpour which instantly turned the roads muddy and slippery. Determined to continue his mission of improving the life of the visually impaired, he skillfully manoeuvred his bike to get his destination. He did not think about how he was going to get home as he feels that what he is doing is so important.



Above: Almasi determined to get to his destination.

May 2010

Kwale District Eye Centre opens satellite clinic in Taita District 160km NW of Kwale

In late May we expanded our horizons by opening a satellite clinic in the small town of Mwatate, west of Voi in Taita District. This was in response to constant requests from the population and an appeal by the government ophthalmic clinical officer for help in this area.

The clinic provides preventive, curative and rehabilitative services using the comprehensive eye care service model, just as we have been doing at the Coast for seventeen years.

The local community is delighted to have a new eye clinic on their doorstep. Dr. Roberts, our Medical Director, said; " The opening of the satellite clinic in Taita is part of a focused growth plan in KDEC's strategy to expand the Centre's services to other rural communities."

Photographs:

1st shows the new Kwale District Eye Centre – Taita branch

2nd: The first patient at the Taita branch clinic being examined by Ophthalmic Sister Rose Atsiaya.



A few of the recent donations from supporters through Eyes for East Africa UK

We are grateful to The Elizabeth Frankland Moore and Star Foundation for their continuing help with a £ 5000 donation and to the Canning Trust in London for their donation of £ 4000 to fund our work helping glaucoma patients in the coming year.

£1,000 from St. Mary and St. Peter Wilmington Parochial Church Council to our poor patients fund enabled us to carry out cataract operations on 32 eyes. The fortunate people who can see again have asked us to thank those involved.

London Power Associates continue to support us with a donation of £ 1000. A big thank you also to the many others not mentioned for your donations.

Challenges of field work – The case of Bekabato, aged 3

Bekabato (Beka to his siblings) was born blind from cataract in a tiny village 180km from KDEC. Reaching help is one of the biggest challenges, especially if you are poor. But, with a programme strongly enmeshed in the community, we can overcome this sometimes.

Beka's parents would not believe us when, at a field screening, we explained that their son would not see unless he had surgery... and fast. It took many hours of talking to convince them that we were giving the best advice and, with great trepidation, they agreed to let us do surgery. He did well but then we did not see him again.

Our Community Based Worker for Bekabato's area begged the mother to bring him back to the main Centre so that we could test his vision, prescribe and fit spectacles, check the eye was recovering, check that he had not developing complications. Her response was "But it's 180 kms away..and our son can see. Why did he have to go all that way? "

Our Community Based Workers are endlessly patient. They explained why we needed to monitor their son at base as well as at home. Eventually, the parents agreed to bring him. It was just as well that they did because one eye was becoming lazy. Beka continues to need patching of his good eye in order to develop fine vision in his other eye. The real challenge will begin when he starts school next year.



Above: Bekabato aged 8 months before surgery



Above: Bekabato, aged 3, undergoing vision assessment in the low vision clinic

April 2010

Life Must Go On

Story compiled by Rehabilitation Officer
M Mwachepha

Barka Otieno has become irreversibly blind. A typical mother, her main concern is her ten year old son and how she will educate him.

She was desperate not to be a burden but, when we met her, she depended on him for everything; he even had to help her in the bathroom. He refused to go to school and leave her alone in the house. "It is not dignified" she said; "I am supposed to help my son in this way, not the other way around".

But Barka was a fast learner. It took only a few visits by our rehab officer and the community based worker to teach her how to get around on her own, to visit the bathroom alone, wash clothes, clean the house and even cook.

She is an unusual woman. It was not enough to be independent with her son free to go to school now that she could manage alone. She wanted to do more. She joined the Red Cross as a volunteer. She now counsels people to cope with their lives and gives them hope.

"I survived and am now thriving despite one of the worst afflictions - total blindness, if I can overcome that, then you too can overcome this difficulty if it faces you."

The photograph below shows Barka.



Recognition of Rotary Support

The Rotary Club of Diani, a near neighbour of ours, sponsored the original building of Kwale District Eye Centre nearly 18 years ago and many Rotary clubs elsewhere have given a great deal of support over the years. Nobody is quite sure why it took us so long to get round to recognising this important event.

The Centre has grown unrecognisably into a large, Comprehensive Eye Care Centre.

Over 47,000 people have been seen at the Centre and over 14,000 have had sight saving surgery.

The photograph top right shows Dr Helen with some of the Rotarians, who have been with Diani Rotary for more than 18 years, visiting the Centre to unveil a plaque.

The lower photograph shows the plaque in close-up.



This was the original building funded by the Rotary Club of Diani in 1993.



March 2010

Sad News

In August 2009, we told you about Mnyazi who was too weak to have surgery to restore his sight. Mnyazi died, still blind, 4 months later. Such is poverty in Africa. This month we bring you story of a child with similar challenges.

Abdul's Story - A report by Hassan Mwachimako, Field Supervisor.

Abdul's twin died a few minutes after birth at Coast Provincial General Hospital. Lucky to have survived, Abdul was blind. He was a poor feeder and fast became weak and malnourished. His vision worsened and almost all his childhood activities were delayed. But Abdul's mother had two other children to care for and no husband. She did not have any money for medical services.

The mother took Abdul to a screening organized by Kwale District Eye Centre where Abdul was diagnosed to have bilateral congenital cataracts.

Photo: Little Abdul, blind from cataract and malnourished at 4 months old.



Even more important than restoring his sight, Abdul really needed proper nutrition and physiotherapy. We referred Abdul and his single mother of three to our nearby District Hospital for care where Hassan personally ensured that they received a supply of nourishing porridge for him. Eventually we decided that Abdul was strong enough. He had surgery and, for the first time in his young life, he could see.

Photos below 1st: Eye Centre Field Supervisor Hassan Mwachimako with Abdul.

“This is a true miracle” Abdul’s mother cried when she saw that, at last, her blind child could see. A few weeks later, Abdul has started crawling, and joyfully playing with other children. Now he needs lifelong follow up.

2nd photo: Abdul attending vision therapy services at the Eye Centre Hassan commented on seeing how jovial Abdul had become; “Surely the greatest gift is to put a smile on someone’s face”.

Abdul’s smile is a perfect example.



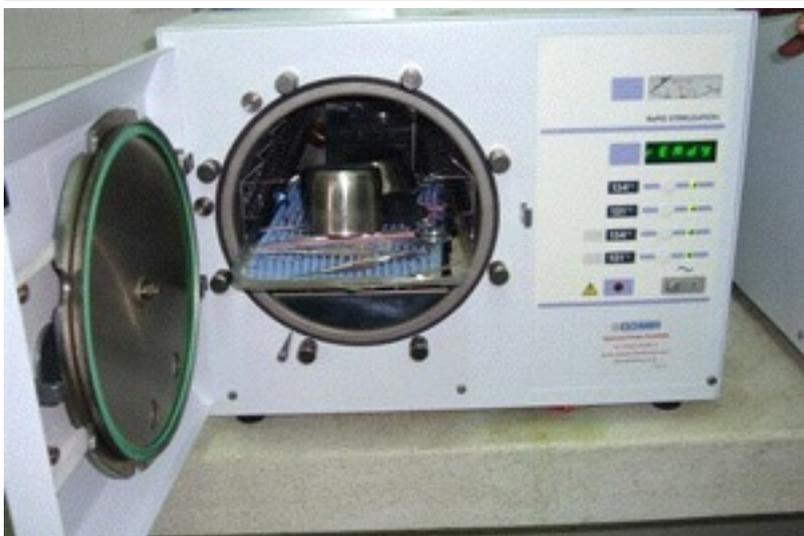
Joint donation ensures safe eye operations

As we mentioned last month, we were awaiting the arrival of a replacement non-vacuum steriliser for Kwale District Eye Centre's operating theatre. Now we are pleased to be able to show you what this important piece of equipment looks like. The equipment was jointly funded by the Rotary Clubs of Fleet and North Wirral in UK, together with Mr Harry Acland.

Microsurgery requires fine, delicate instruments and these need to be absolutely free of anything that may cause infection. An infection inside the eye acquired at surgery is devastating. The patient rarely regains sight and may be left with a painful blind eye. Dr Helen Roberts says; 'This steriliser is vital to ensure that we can continue to offer safe sight restoring surgery'.

Photograph 1: Unpacking the steriliser

Photograph 2: The steriliser in use



February 2010

Having started on a serious note about reduction in funding last month, we thought a more upbeat first item would be good start this month.

Wedding of our visiting orthoptist

Our gorgeous orthoptist married in a traditional church ceremony in Ireland in December. Geraldine has spent almost three months working at Kwale District Eye Centre, primarily training the staff on the examination and treatment of children with eye problems. She is a great source of support and encouragement, especially to our low vision team.



It's never too late to seek treatment

Mary's husband was fed up with having to do everything for his wife. He even had to lead her to the bathroom and help her with her clothes. He had left her at home alone and was on his way to market to catch up on the local gossip and sell some avocados when he heard a loud hailer announcing that there was to be an eye team in the area later that month. Could they help him he wondered? He thought it unlikely, after all, going blind was just another burden of old age wasn't it? And goodness knows he had a few burdens, but it was being held just up the road and what did he have to lose really? He already had a blind wife.

Here we see his wife Mary just as she has the eye bandage removed after her cataract surgery. Within minutes she was berating him for having taken so long to get her to this sort of care.

At last now she could do the cooking again, complaining he always used too much salt!



Above: Mary after surgery



Above: Mary (left) with a friend also recovering from surgery

Patients from a distant part of our area

The photograph below shows two ladies resting after surgery at an eye clinic we set up in a remote village in our area.



More funding from Rotarians in UK

Regular contributions from Rotary Clubs in Kenya and UK are always most welcome and display confidence not only in the work of the eye centre but also how their donations are always used for the benefit of the patients. We are very grateful for another donation from the Rotary Club of North Wirral Cheshire, enabling us to purchase a replacement non vacuum steriliser. It's been ordered but delivery has been delayed so we can't include a photograph in this edition! Other regular supporters not far away in the Rotary Club of Northwich Vale Royal have recently funded a phacoemulsifier handpiece, a vital and expensive piece of ophthalmic surgical equipment.

January 2010

The impact of global financial problems – a perspective by our Medical Director

We have all heard of the problems on the global financial scene and the reduction in charity donations around the world which have followed as a consequence. Our news report of August 2009 highlighted our concerns this could have on patient care at the eye centre and in the community. I can now reveal the harsh realities we face in 2010.

Our anticipated income for 2010 compared with 2009 will be reduced by over Ksh8mill, approx USD 100,000, a considerable percentage of the annual running cost of the eye centre. This means that we have had to focus on our core activities in 2010; that is eye treatment at the centre.

Last year we laid off the lady rehabilitation officer, this year the remaining rehab officer will be laid off at the end of March when he has handed over completely to our community based workers. We have reduced the number of screenings in the field from 4 each week to 3. We have laid off a driver and a nurse and plan to sell a 4x4 Landcruiser and 4 motorbikes. We have postponed all training both in the field and at base until the financial situation improves.

All this will mean that we are able to reach less people. Sadly, it is usually those who need our services most who are the most difficult and expensive to reach. The challenge is to react to this downturn in funding quickly and with as little long term damage as possible.

Thank you for your support.

Dr Helen Roberts MBE, Medical Director.

The following are examples of the kind of marginalised patients we will be unable to treat in 2010 due to lack of funds.

Daniel - deaf and blind

When we found Daniel he was seven. His parents were in despair and Daniel was left in corner, hardly moving, let alone interacting with his family. Our specialist encouraged his parents to include him in family life and explained how best to communicate with a child who can neither see or hear. This was what they needed, some expertise, understanding and support . They were delighted to see the changes in Daniel, now they could enjoy their child and instead of his frustration and bewilderment was more like other children.

The family have joined a group of other parents with deaf blind children and have learnt to be receptive to change. Daniel has been assessed by a teacher from the deaf blind unit who has concluded that he is clever and capable. He now goes to a special school in Kwale and will be able to learn just like his brothers and sisters.



Above: Daniel, when we found him in a vegetable crate



Above: Daniel's mother watches in amazement as he opens up after specialist teaching

Shalet- deaf, blind and with cerebral palsy

Shalet has been in and out of hospital since birth. Her parents are primary school teachers living in a nice house and they even have electricity. Shalet is like a two month old baby. She cannot even hold her head up and needs constant care.

However what her mother struggles with most is the attitude of her relatives, neighbours and people in the community who consider her child to be the result of a curse. They believe that the parent's success in life and modest wealth has been achieved through witchcraft which damaged the child in the process.

Shalet and her mother feel isolated as some relations seem afraid to come close to either mother or child. Health workers at the hospital were no exception.

We explained to the mother that she was not alone and that such degrading beliefs are common in the community. She was relieved to know that there were people who care.

That's KDEC !