

Kilimanjaro Centre for Community Ophthalmology

2017 ANNUAL REPORT



About KCCO

The Kilimanjaro Centre for Community Ophthalmology (KCCO) was established in 2001 in response to the VISION 2020 initiative, a global campaign aimed at eliminating avoidable blindness by the year 2020, the product of a series of consultations between the WHO and NGOs working toward blindness prevention.

VISION	MISSION	IMPACT
<p>Our vision for eye care in Africa is a continent where all Africans can access high quality, patient-centered eye care, provided by Africans in well-functioning systems.</p>	<p>Our mission is to strengthen African health systems and partnerships through the provision of eye health training, the conduct of research, the facilitation of planning, and change implementation to achieve the goals of VISION 2020 and GET 2020.</p>	<ul style="list-style-type: none">◇ Capacity Building◇ Facilitation of planning and change implementation at different levels of the health system◇ Epidemiological and operational research to inform practice, programme and policy.

Message from the Directors

Dr. Robert Geneau

Mr. Edson Eliah

KCCO continued in 2017 to assist governments, NGOs, hospitals, and communities to develop and manage organizationally sustainable eye care programmes serving the needs of their population. Our activities in 2017 served to achieve both short term and long term goals through direct support for programme delivery, research, and capacity building activities.

In 2017 our Memorandum of Understanding with the Division of Ophthalmology at the University of Cape Town (UCT) was renewed and we look forward to further collaborations with Faculty members and graduate students at UCT. This partnership with UCT enabled us this year to make progress on a key components of our 2017–2021 Strategic Plan—we have increased our research focus on diabetic retinopathy in 2017, with two UCT students working on this increasingly common cause of visual impairment in Africa. As part of programme expansion planning we have also made progress, to be concretized in 2018, in establishing partnership agreements with the aim of increasing KCCO’s presence and activities in Francophone West Africa.



Executive Director, KCCO International



Director, KCCO Tanzania

Reducing Gender Inequity

KCCO and Seva Canada continued their collaboration to improve gender equity in eye care. KCCO contributed to a project led by Seva Canada (USAID/PGRD grant) on strategies to improve cataract surgical services for girls. With support from Seva Canada, KCCO also continued to partner with microfinance groups in Northern Tanzania. The microfinance initiative is a community outreach strategy to increase overall use of services, and to reduce gender inequity. There were 15 new trainees in 2017 (all from Ngorongoro District). In 2017 we also saw this microfinance initiative being piloted in Bahir Dar (44 trainees), Ethiopia, paving the way for more girls and women to receive eye care in the future.

Microfinance and Gender

In Tanzania, microfinance groups continued to support outreach activities. In Ngorongoro District (Arusha Region), 2 cataract surgical outreach camps and 9 TT surgical outreach camps took place this year. In Mara Region, 3 non-surgical outreach visits were conducted in areas where KCCO has trained microfinance groups — and cataract patients were taken to, or were referred to, the base regional hospital for surgery.

In Ethiopia, one pilot training of a microfinance group (44 trainees) in 2017 was followed by a visit of the outreach team of the Felege Hiwot Hospital based in Bahir Dar. A monitoring/tracking system is now in place in 2018 to capture specific referrals by microfinance members.

Table 1 Support from microfinance groups for outreach activities in Northern Tanzania

Site	Nb of community members referred by MF*		Nb of cataract patients operated		Nb of trichomatous trichiasis (TT) patients operated	
	M	F	M	F	M	F
Mara (3 screening outreaches + direct referrals to hospital)	107	158	38	55	Not Applicable	
Ngorongoro (mix of cataract and TT surgical outreaches)	146	228	26	30	38	93
Total	253	386	64	85	38	93

*This refers to a direct referral where the role of the MF for the referral has been stated explicitly.

Supporting and Expanding VISION 2020 Programmes in Africa

KCCO continued to mentor Vision 2020 programmes in five countries in 2017 - Benin, Ethiopia, Madagascar, Uganda and Tanzania.

KCCO's newest and first Francophone West Africa programme site, Hôpital St-André de Tindr , in Benin, received additional funding from CBM to support implementing its activities, in addition to being a Global Sight Initiative (GSI) programme supported through funding from Seva Foundation.

Across all programmes, there was continued support for conducting outreach visits, improving management practices, as well as purchasing essential equipment and consumables.

In Madagascar, challenges like the presence of cyclones, power outages and a plague epidemic made outreach activities difficult to pursue. Nevertheless, a focus on walk-in patients still allowed a significant number of cataract surgeries to take place.

The different sites benefitted from continued mentorship, as well as participation in a cross-learning meeting which brought together in Uganda all KCCO-supported programmes.

We wish to thank Seva Canada and the Seva Foundation for the support provided for our Vision 2020 programmes.

Vision 2020 programmes	Screened and treated			Cataract surgeries		
	Male	Female	Total	Male	Female	Total
Vakinankaratra Region, Madagascar	6 912	9 478	16 390	297	289	586
Atsinanana Region, Madagascar	950	1 340	2 290	370	363	733
Sava Region, Madagascar	3 662	4 234	7 896	335	330	665
Mara Region, Tanzania	6 023	6 022	12 045	311	347	658
Singida Region, Tanzania	2 926	1 610	4 536	582	484	1 066
Lira Region, Uganda	6 554	5 527	12 081	1 056	1 028	2 084
Bahir Dar, Ethiopia	10 187	9 992	20 179	310	280	590
Mwanza Region, Tanzania	2 087	3 803	5 890	480	431	911
Bourgou Region, Benin	5 214	5 571	10 785	1 299	986	2 285
Dodoma Region, Tanzania*	273	226	499	26	21	47
All sites combined	44 788	47 803	92 591	5 066	4 559	9 625

* The data for the Dodoma Region is only for one outreach that was done in December 2017.



Left: Participants from Lira, Gulu, Mwanza, Dodoma and Benin, as well as KCCO staff at the cross-learning meeting in Kampala, Uganda.

The meeting provided an opportunity to discuss the challenges faced by each programme, and devising methods to solve them. The meeting also encouraged programmes to mentor each other, by sharing experiences and expertise.



Above: Staff from the eye department of the Felege Hiwot hospital in Bahir Dar, Ethiopia. Thanks to funding from Seva Canada, KCCO supports the eye department for the implementation of a comprehensive eye care programme in the Amhara region, with a focus on six districts. Dr. Hiwot Degineh (far left) stands beside her team of highly-motivated health professionals.



Above left: Patients line up to receive eye care services during the outreach in Parakou at Sinende districts, Benin, more than 100 kilometres away from the main hospital, HOSAT.



Above right: KCCO's Peter Kileo, here with doctors and the programme manager at HOSAT, gathered in front of the hospital after a productive meeting on the last day of a site visit where KCCO helped the team review the budget, the work plan and the outreach schedule for HOSAT in 2017.

Strengthening Health Systems and Building Capacity in Africa

From its inception, KCCO has focused on and been firmly committed to working with African staff so that the continent has the required human resources with the appropriate knowledge and skills for providing high quality eye care. KCCO helps develop critical skills in planning and management through a number of targeted workshops and one-on-one mentoring sessions. In 2017, with partners as noted, here is a sample of the work:

- The KCCO offered its annual Bridging Strategy and Management courses to a total of 14 participants this year. The following countries were represented: Uganda, Benin, Tanzania and Ethiopia.
- In support of trachoma programmes in Northern Tanzania, a total of 656 TT case finders were trained in 2017.
- KCCO facilitated national Trachoma Action Planning workshops in Guinea, Nigeria and Tanzania. In the three countries the workshops were updates of previous work, also facilitated by KCCO. Considerable progress has been achieved in these countries and the workshops focused on some of the steps needed to reach the thresholds for the elimination of trachoma as a public health problem. (With support from Sightsavers and ITI)
- KCCO conducted a workshop in Dakar on leadership and management for trachoma elimination in Africa. The 12 participants, who all lead efforts in their country for trachoma elimination, came from the following Francophone countries: Benin, Burkina Faso, Cameroon, Central African Republic, the Democratic Republic of Congo, Guinea, Mali and Senegal. The participants had the opportunity to learn more about different leadership styles, the strategies or activities that could help them maximize their existing leadership skills, how to build and maintain partnerships, and how to effectively and efficiently delegate so that they can spend more time on strategic planning and leadership roles. (Support from ITI)
- The KCCO was contracted by the Light for the World to assist with the establishment of a management system and building the capacity of the eye care team for the efficient use of a newly constructed eye department building at the Beira Central Hospital in Mozambique.
- Drs. Lewallen and Courtright, at the request of the Instituto Mexicano de Oftalmologia (IMO) in Queretaro, Mexico, organized a multi-day session with IMO staff to review findings from a recent RAAB and work with them to apply the findings for planning for eye care service delivery throughout the state.

Research and Evidence

KCCO continued to engage in research, evidence synthesis and knowledge translation initiatives in 2017.

- The completion of the development of a **preferred practices manual** for the implementation of effective childhood blindness programmes. A copy can be found on the KCCO website or by request.
- KCCO continued to partner with WHO on trachoma elimination by organizing periodic reviews of recent articles of interest to the global trachoma community through the **Trachoma Information Service (TIS)**. The members of the TIS group include: Dr. Amir Bedri (Light for the World), Dr. Paul Courtright (KCCO), Robert Geneau (KCCO), Dr. Caleb Mpyet (Sightsavers) and Dr. Anthony Solomon (WHO). Administrative and technical support is provided by Ms. Petra Adams (KCCO). This service is available to any and all interested. As some countries start to compile information for their elimination dossier KCCO continues to provide, on request a list and copy of all articles on trachoma country by country.
- KCCO was mandated by the Fred Hollows Foundation (FHF) to evaluate their programmatic activities in **Burundi**. Dr. Robert Geneau conducted the evaluation (desk review and field work) between October and December 2017.
- KCCO continued as a partner for the publication of findings from **Global Trachoma Mapping Project** work.
- KCCO also continued to support academic efforts in the Division of Ophthalmology at the **University of Cape Town**. Two students successfully submitted their dissertations, while one student published his findings.

Childhood Blindness and Low Vision

The Childhood and Eye Health Programmes supported by KCCO in Burundi, Madagascar, Malawi and Uganda have continued to make progress in identifying and serving children in need of eye care. KCCO remains grateful to Seva Canada and Novartis for the support. Thank you also to Wilde Ganzen/Lions Netherlands for additional support for the programme in Uganda.

The activities conducted by all programmes include the training of community volunteers and health workers to identify children with visual impairment and the provision of screening and referral services for the children identified for surgery. While the projects focus mainly on children with cataract, children with other eye care diseases are also receiving services.

Below is a summary of the numbers of screenings and surgeries performed across the four countries. Out of the 1129 surgeries reporting in the table below, 405 were cataract surgeries (36%).



Above: One of the children treated at KCCO's new CEHTF in Burundi.

Summary of Work from Child Eye Health Tertiary Facilities

Site	Total Screened			Total Surgeries		
	Boys	Girls	Total	Boys	Girls	Total
Tororo, Uganda	1298	1128	2426	192	118	310
Blantyre, Malawi	3454	3015	6469	305	159	464
Burundi	93	46	139	127	116	243
Madagascar	3978	5224	9202	68	44	112
CEHTF combined	8823	9413	18236	692	437	1129

Evidence for action

After completion of KCCO and Seva Canada's completed collaborative complementary projects funded by USAID/PGRD, the knowledge outputs were shared with the eye health community in 2017 through the preferred practice manual, as well as an article published on key informants.

KCCO also hosted a meeting of the USAID Childhood Blindness Program (CBP) in Cape Town. KCCO worked with the Partners for Global Research and Development to bring together 23 awardees from 20 countries representing 22 CBP projects. The meeting provided opportunities to discuss not only project-level activities and lessons learned, but also system-level changes.



Above: The Preferred Practice manual; cover photo by Ellen Crystal Photography.



Above: Participants in the USAID/PGRD Child Blindness Programme hosted by KCCO in Cape Town, October 2017.



Above: A member of the outreach team in Blantyre, Malawi assisting a mother with information.

Addressing Trachoma Globally

KCCO supports trichiasis elimination in Tanzania

With support from the UK Department for International Development, the END Fund and the Queen Elizabeth Diamond Jubilee Trust, the KCCO is supporting trichiasis elimination programmes in Tanzania in the regions of Arusha and Manyara.

In both regions, these programmes continued with community mobilization, training of case finders and the delivery of surgical interventions.

Site	Number of patients managed — Trichomatous trichiasis surgery	
	Men	Women
Manyara Region Kiteto and Simanjero Districts <i>DFID programme</i>	128	369
Arusha – Monduli and Longido Districts <i>Queen Elizabeth Diamond Jubilee Trust Programme</i>	74	231
Arusha – Ngorongoro District <i>The End Fund Programme</i>	28	81
All sites	230	681



Above: Surgeon Glory (left) and KCCO Programme Officer, Tumsifu (right) counselling a patient about TT surgery.



Above: The geography of these areas in Ngorongoro district is of more isolated ‘bomas’ with unpassable roads and unreliable transportation modes, which means more challenges to find cases, and for patients to get to the surgical sites.

Strengthening organizational capacity for the implementation and evaluation of trachoma elimination programmes

KCCO, through a new grant from the International Trachoma Initiative, continued to support trachoma elimination programmes through a series of capacity building initiatives.

- KCCO facilitated technical meetings to update Trachoma Action Plans in Guinea, Nigeria, Pakistan and Tanzania.
- KCCO conducted in Dakar a workshop on leadership and management for trachoma elimination in Africa. The participants came from the following countries: Benin, Burkina Faso, Cameroon, Central African Republic, the Democratic Republic of Congo, Guinea, Mali and Senegal.
- At the request of the Ministry of Health, Drs. Geneau and Courtright worked with the **MoH in Myanmar** in June to figure out the most practical steps to put them on the pathway for submitting a dossier for validation of elimination of trachoma as a public health problem. Interestingly, they were the first visitors to Myanmar to discuss trachoma since the 1970s. (International Trachoma Initiative—ITI)



Left: Dakar – Three national coordinators — Dr. Awaca Uvin Naomie (left, DRC), Dr. Marie-Madeleine Kouakou Ilunga (center, Ivory Coast) and Dr. Émilienne Épée (right, Cameroon) worked together to discuss strategies to improve their respective trachoma programmes. Dr. Amir Bedri (back) was one of the workshop co-facilitators, along with Mr. Chad MacArthur and Dr. Robert Geneau from KCCO.

Trachoma capacity building

Dr. Courtright, as part of his role as the Technical Lead for trachoma for Sightsavers, conducted a capacity building session in Addis Ababa with all trachoma elimination partners in Ethiopia. He also helped facilitate sessions with the Nigerian Ministry of Health and trachoma partners in the Trust trachoma project to strengthen trachomatous trichiasis elimination efforts in that country.



Above: Drs. Courtright and Geneau with Ministry of Health staff in Myanmar.

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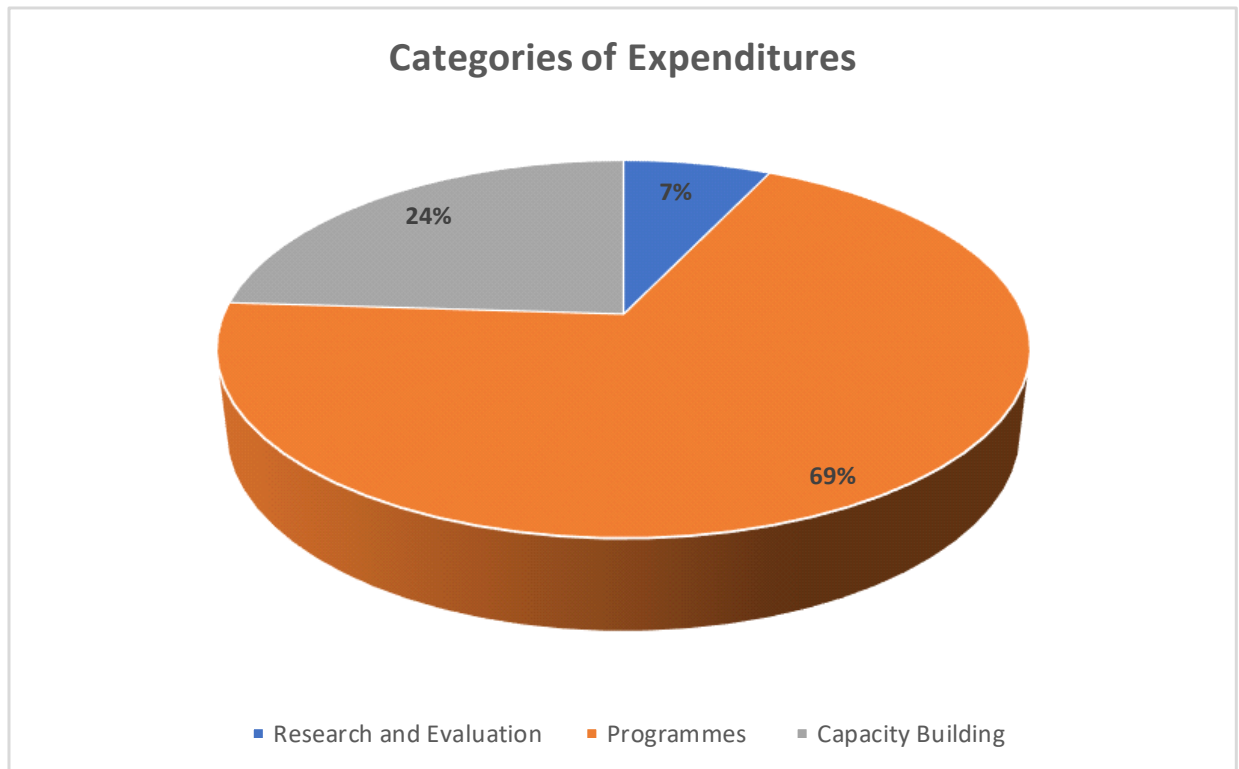
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Financial Overview

Donor	US\$
Sightsavers International	\$ 517 266,93
Seva Foundation	\$ 375 322,43
Seva Canada	\$ 347 118,10
International Trachoma Initiative	\$ 194 004,62
Partners for Global Research and Development	\$ 95 447,92
University of British Columbia	\$ 47 617,00
The End Fund	\$ 41 568,63
Fred Hollows Foundation	\$ 23 087,69
Wilde Ganzen	\$ 24 557,65
Champalimaud Foundation	\$ 21 595,40
Xova	\$ 140,00
Total	\$ 1 687 726,37



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