



## Vision Aid Overseas

(Incorporating OPTOMETRY GIVING SIGHT in the UK)

### Report on Vision Aid Overseas assignment to Nekemte, Ethiopia.

#### Introduction

Nekemte is a town of approx. 110,000 in the Oromia region of Ethiopia. It is an area that has very little in the way of eye health services. In August 2016, a team of Vision Aid Overseas volunteers visited Nekemte to assess the eyecare services available in the town and to provide some skills training, however due to an unexpected bout of civil unrest during the visit, the assignment was cut short. They were, however, able to provide useful information regarding areas of need for future support. Finally, in October 2017, a follow up team consisting of five Optometrists and one Dispensing Optician, set off from London on a two-week assignment hosted by Nekemte Eye Clinic. Funding had been assisted by Exeter-Ethiopia Link and IEP (Inclusive Education Project).

Their mission was to provide training and extra capacity to the staff at the Nekemte Eye Clinic which is run by DASSC - the Development and Social Service Commission of the Mekane Yesus Church (EECMY) Central Synod.

#### Objectives

The primary aims of this visit were to:

- provide eye examination and spectacles for local people at the eye clinic;
- conduct outreach clinics to test pre-screened schoolchildren in the surrounding rural areas (in collaboration with IEP);
- provide workshop training to the optical technicians and donate a stock of additional frames and lenses;
- deliver refraction training to the eye care workers and training on specialised optical instruments.



*Deselegn, an ophthalmic nurse at Nekemte eye clinic, examining a patient on the slit lamp*

## Results

Thanks to the support from Exeter Ethiopia link, we were able to donate over 1000 frames (including child frames), over 2000 uncut lenses, and 750 readymade glasses to Nekemte eye clinic to support their ongoing work.

### Clinics at Nekemte

The clinics were very busy as there is very little, if any, provision for affordable eye care in the region. Many patients required spectacles for both reading and for long distance vision. There were a significant number of patients who were very short sighted.

Although ready readers are dispensed at the clinic, testing for long distance glasses is not available and it became clear that people have to travel to Addis Ababa (6 hours' drive away) to be tested and purchase glasses. In total, 842 patients received a full eye examination at the clinic over the course of the two weeks. 579 received a pair of spectacles, of which 162 were glazed at the workshop, and 410 were readymade. 71 patients presented conditions that needed referral to specialists in Addis Ababa.

|                                   | Adult      |            | Children  |           | Total      |
|-----------------------------------|------------|------------|-----------|-----------|------------|
|                                   | Male       | Female     | Male      | Female    |            |
| <b>Patients Examined</b>          | 470        | 197        | 113       | 62        | <b>842</b> |
| <b>Referrals</b>                  | 29         | 12         | 20        | 10        | <b>71</b>  |
| <b>Total Spectacles Dispensed</b> | <b>373</b> | <b>167</b> | <b>22</b> | <b>17</b> | <b>579</b> |



*A young boy's vision being measured at the outreach clinic in Digga*

## Outreach clinics

The IEP had arranged for children who had previously been screened for vision problems or eye complaints to attend clinics at three rural health centres on specified days. The volunteer team travelled out to these clinics to conduct full eye examinations and prescribe glasses where necessary. Teachers were also tested. Due to a flare-up of local unrest, the first week's clinics were quiet and schools were closed. Things settled in the second week so attendance was much higher. In total, 516 patients received an eye examination on outreach, and 111 of these received a pair of glasses.

| Name of Health station    | Number of patients examined |            |            | Number of spectacles provided |
|---------------------------|-----------------------------|------------|------------|-------------------------------|
|                           | Male                        | Female     | Total      |                               |
| Gute Health Center        | 161                         | 95         | 256        | 33                            |
| Arjo Gudatu Health Center | 79                          | 55         | 134        | 41                            |
| Uke Health Center         | 108                         | 18         | 126        | 37                            |
| <b>TOTAL</b>              | <b>348</b>                  | <b>168</b> | <b>516</b> | <b>111</b>                    |

An interesting observation from this is the much larger number of boys than girls were presented for testing. It would make for an interesting piece of research to look into whether males in that region are more prone to eye problems, or if it is simply that males are more willing to get tested. Perhaps in future some work can be done to target women and girls, to ensure they are not excluded from accessing the services.

## Optical Workshop

One of the technicians is very skilled at cutting the lenses by hand, despite an automated process which makes it quicker and easier being available. The Vision Aid Overseas dispensing optician managed to get it up and running, however it will need a few refinements and lacks a manual. The optical workshop was found to be full of equipment but was disorganised with no proper systems in place for stock management. The dispensing optician worked very hard to reorganise the workshop to make it more effective, and also carried out some dispensing training with the technicians.



*Jo (foreground) and Fiona, VAO volunteers, helping the local community to see better at Nekemte eye clinic.*

## Training

Due to the high demand for eye examinations at the clinic in Nekemte, very little time was available for training in refraction with the five eye care workers. We feel that to achieve this it will be necessary to find a different location, possibly at the Ijoo Hotel where we were staying. They have a small room which would be ideal. Despite this, five of the optical staff received vital training (two Technicians and three nurses) to improve their skills and enable them to be more effective in their work in the meantime.



*Charlotte, VAO volunteer, examining one of the pre-screened schoolchildren in Gute*

## Conclusions

The team were able to observe how the eye clinic was run and were impressed with the level of patient care in terms of cataract surgery and identification of other ocular pathologies. What is lacking in Nekemte is the ability to prescribe spectacles accurately and comprehensively. Also, as in so many places in the developing world, the range of medications is very limited as is the ability of patients to afford and access more advanced medical interventions.

The visit to support Nekemte was considered by our team to be very worthwhile. There is definite need in this region of Ethiopia and the clinic staff have a real desire to build on their skills. The facility at the Eye Clinic could be of even greater benefit to the local community with additional services such as refraction. The teams with both DASSC and IEP were extremely kind and helpful and the Ijoo hotel, recommended by Mark Smith from IEP, was welcoming and comfortable.

## Case Record

Temesgen<sup>1</sup> is a 14 year old student who was born with cataracts in both eyes as well as nystagmus (wobbly eyes) which often occurs in people who suffer from low vision since birth, as Temesgen has. His parents are farmers and he has two sisters and a brother.

Despite his vision being very poor and only being able to read the top letter on the vision chart in the better eye, Temesgen does still attend school in Kolobo. Visual impairments are one of the main reasons children fall behind, or even drop out of school. Luckily for Temesgen, his school is aware of his disability and he is a member of the school's disability club.

He travelled 31kms to reach the outreach clinic at Digga hoping to get treatment for his condition.

Our Nekemte colleagues advised us that he would need to go to Addis for specialist treatment to remove his cataracts.



Report compiled by Caroline Clarke (Vision Aid Overseas volunteer Team Leader), and Anne Buglass (Vision Aid Overseas Director of Programmes).

4<sup>th</sup> January 2018

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<sup>1</sup> A false name has been used to protect his identity.