



REPORT FOR FONDATION EAGLE REGARDING:

GRANT FOR EYE MISSION TO WAJIR RE-ALLOCATED TO

- 1) Kapsowar, Elgeyo-Marakwet County – Nov 2022**
- 2) Kikambala, Kilifi County – April 2023**
- 3) Kisii and Kimenya, Kisii County – May 2023**

Donor:

Fondation Eagle, Switzerland

Donor's Reference: FF0643

Date of acceptance: 26th September 2022

Project Name: MEAK WAJIR EYE MISSION

Date of Payment: October 2022

Amount of Donation: \$36,280 – KES 4,353,600

Actual Expenditure: \$42,271 – KES 5,072,520

Overspend: \$5,991 – 781,920

TOTAL BENEFICIARIES – SCREENED	OVER 5,500
CATARACTS	527
TRACHOMA	8
EVISCERATION AND REMOVAL OF FOREIGN BODIES	5
EYE DROPS DISPENSED	4,700
READING GLASSES ISSUED (INCL. PHOTOCHROMATIC)	1,023
SUNGLASSES ISSUED	475

Signed for MEAK:

Date: 16-08-2023



Medical Education

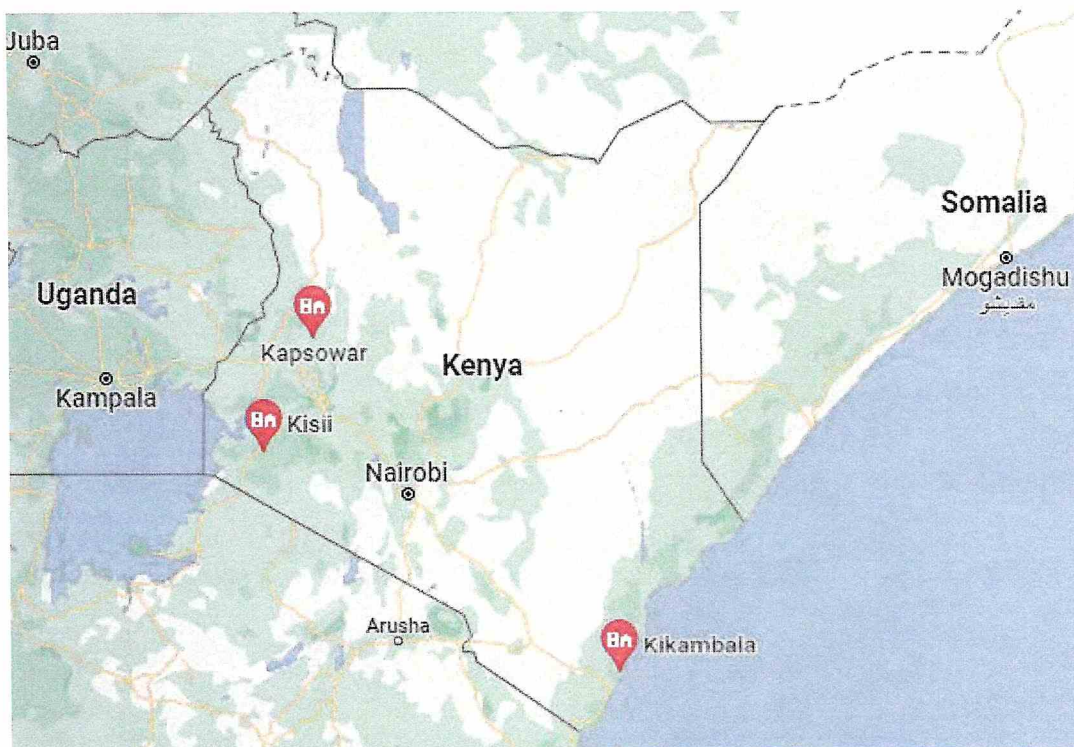


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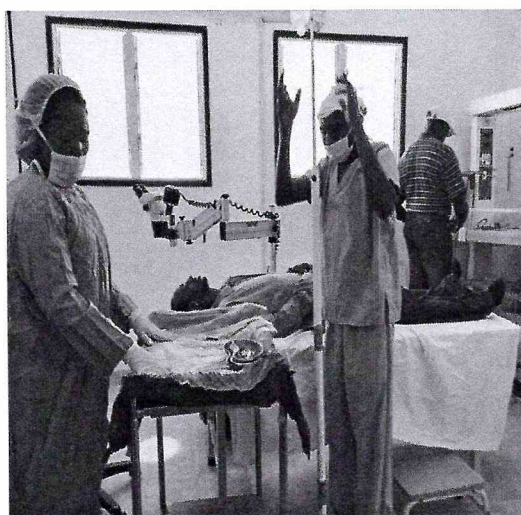


Kenya

2022/23



Location of missions within Kenya:



Number of beneficiaries:

The total number of beneficiaries is in the thousands, with hundreds of pairs of glasses and thousands of bottles of eye drops dispensed & 540 people in total having surgical procedures over the three mission sites.

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Registered Charity No 1093115

Trip Planning – change of mission site from Wajir & overview:

This mission was initially planned (and the file form submitted and accepted) for an eye mission to be carried out in Wajir, an arid, neglected area with approximately 180 people known to be awaiting cataract surgery. However, several factors contributed to a last minute cancellation of this mission. Notably, significant tribal unrest and the news that another eye team had visited the area whilst our funding was being secured and preparations being put into place. After discussion with Fondation Eagle, the mission was diverted to Kapsowar in western Kenya.

Kapsowar was chosen due to the high burden of blindness. It was decided to establish two diagnostic centres, at Chesoi and Chesongoch, both in the Cherangany Escarpment and approximately 1 hours driving apart. This area is over 2000 metres above sea level with a cool and windy climate. The Kapsowar mission was very successful (see box above), including proving to be very cost effective for several reasons: the pre and post screening was carried out by a local ophthalmic officer and the logistics were simplified due to the reduced travelling time. This left a significant underspend (see budget section, below) which was reported back to Fondation Eagle.

The resulting underspend was used to fund a further mission (Kikambala), which was being jointly supported by the Lions Club of Bahari, who were supplying the medication and food for the trip. This was a very cost-effective mission, which facilitated the partial funding of a third mission which was carried out in Kisii and Kimenya. The resultant small overspend on this mission will be met by MEAK reserves.

Mission logistics:

Preparations for the missions were based upon those for previous MEAK eye missions. Two vehicles were hired for each mission. The large truck was used to carry all the camping equipment, tents, sleeping bags, mobile showers and toilets, catering equipment, food, medical supplies and medical equipment. The second vehicle was a Land Cruiser that was used to shuttle patients and provide transport for the purchase of additional supplies whilst on site. Both vehicles came with drivers. A cook and kitchen helper were also included.

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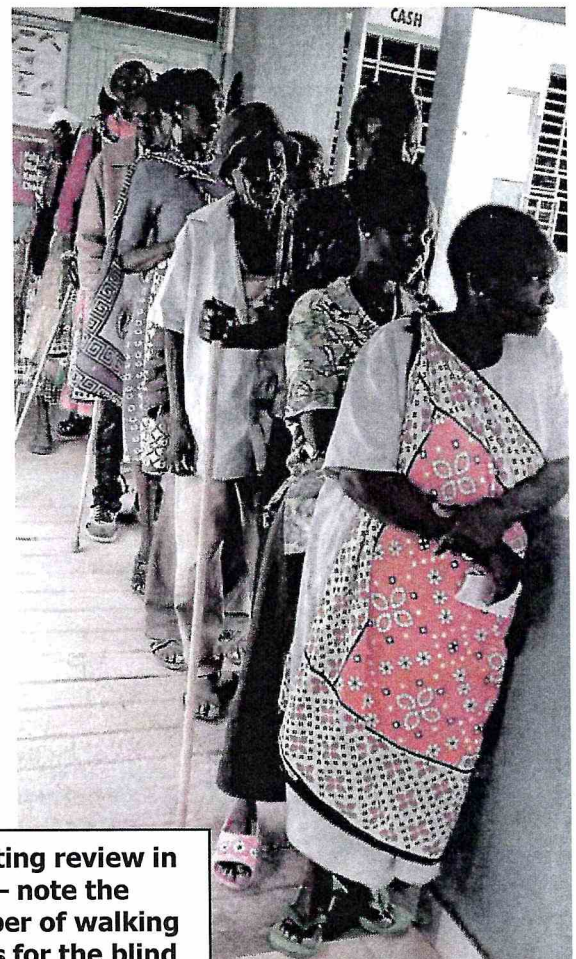
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Prior to the missions beginning the medical team was appointed and instructed and communication with the mission destinations increased. All the food and medical supplies were purchased and collected approximately 10 days prior to the start of the mission. In the case of Kapsowar, MEAKs mission coordinator visited the area on two occasions to liaise with the local ophthalmologist.

As with all MEAK eye missions, patients were reviewed to assess their eyesight and the health of their eyes. Depending upon the outcome of the medical examination, patients benefitted from:

- The distribution of medication to treat eye infections;
- Eye tests to diagnose presbyopia for which nearly 1000 pairs of reading glasses were dispensed over the 3 sites;
- Sun and photochromic glasses were distributed to post-operative patients and those who showed signs of eye damage that were directly related to exposure to bright sunlight. The wearing of sunglasses also has the added benefit of protecting the eyes from dust and flies, all potential causes of eye infections and early cataract formation in rural populations;
- Primary school children in Kikambala were taught about how to look after their eyes and given screening eye checks



Awaiting review in Kisii – note the number of walking sticks for the blind

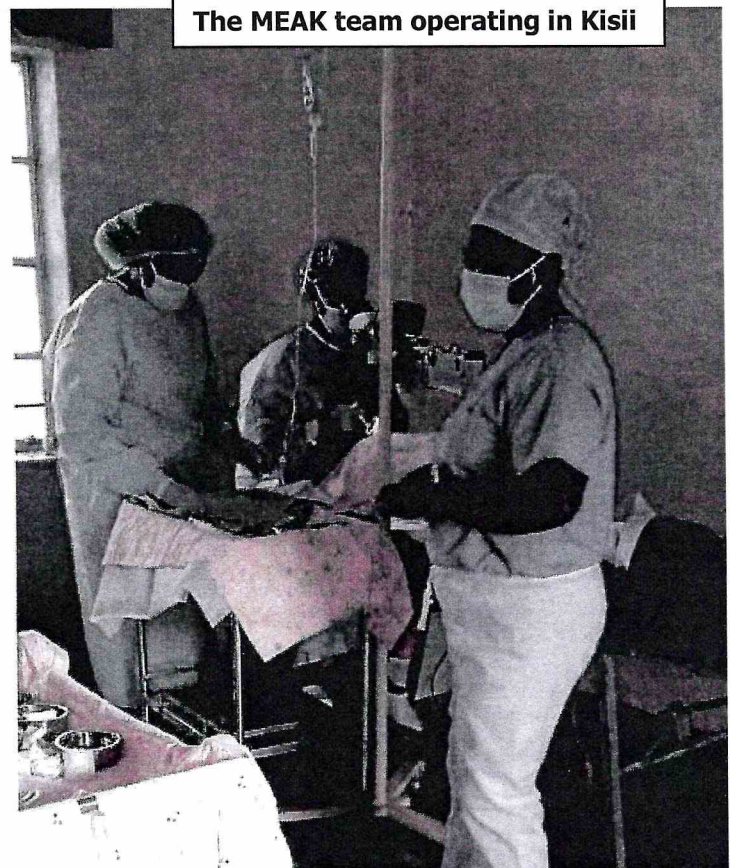
Patient recruitment was excellent for the missions with over 4500 patients reviewed thanks to the local government officials and tribal chiefs supporting and publicising the missions. Patients for surgery made their own way or were transported to and from the designated dispensary or medical clinic where the sites were transformed into waiting

rooms, operating theatres and a recovery area. Following eye surgery patients were accommodated in a dedicated camp area. The camp cooks produce nutritious and filling food for the patients during their stay. After the removal of the dressing over the operated eye(s) the next day, vision checks are performed and a talk is given to the patient group on how best to care for their eyes post-operatively. In addition, they are given sunglasses to protect their eyes from the elements while they heal. Following this, they are transported back to their homes in the Land Cruiser.

Challenges:

All outreach missions are not without their challenges and these were no exception. In addition to the safety issues which caused the postponement of the mission and the subsequent re-siting of the missions, there were several other challenges that the team met. They were:

- Using the one Land Cruiser for the transportation and seeking blind or partially blind people of people from their local shambas to the screening and operating sites was at times slow going due to having only one vehicle, plus:
- The poor, unsealed roads made travelling very arduous and added to patient transport time
- For the Kapsowar mission, it was not appreciated how difficult the journey would be from Nairobi to Chenoï, taking 8 hours of hard going on extremely poor and hilly terrain.



The MEAK team operating in Kisii

Budget & Budget summary:

The grant donated for the cancelled mission to Wajir was \$36,280. This was re-purposed to the Kapsowar mission in western Kenya instead. This trip cost a very economical \$17,745.00, leaving a balance of \$18,535.00 of underspend.

A portion of this underspend was used to co-fund the Lions Club of Bahari mission to Kikambala, which only cost \$2,307.00, leaving a balance of \$16,228.00 of underspend from the original donation.

This remaining amount was put towards the third mission, to Kisii and Kimenya. This mission cost \$22,219.00, which resulted in an overspend from the original donation by \$5,991.00, which has been subsidised by MEAK reserves.

We are in receipt of many pages of invoices and small receipts for each individual component that makes up the total for each category on the tables below. We would be more than happy to supply these if the Fondation Eagle board desires.

Kapsowar budget:

Item – expended upon:	Cost (Ksh)	Total
Medical supplies	394,061	
Fuel	108,206	
Food for team and patients	129,990	
Allowances for medical team & support staff	757,000	
Miscellaneous purchases	12,610	
TOTAL (Ksh)	1,401,867	
In US dollars:	\$12,300	Total
Lorry, tents, sleeping bags, kitchen equipment, drivers, support staff	\$4,050.00	
Hire of Land Cruiser & driver	\$1,395.00	
TOTAL (US dollars)	\$17,745.00	\$17,745.00
TOTAL UNDERSPEND		\$18,535.00

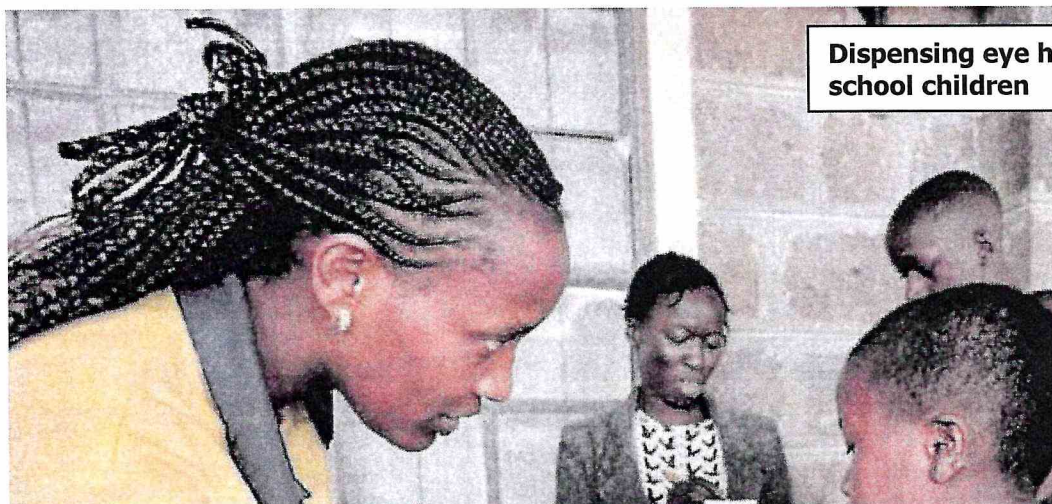
Kikambala budget:

The cost of the medicines, food provision, accommodation and miscellaneous expenses was borne by the Lions Club of Bahari.

Item – expended upon:	Cost (Ksh)	Total
Medical supplies	Nil	
Fuel	45,000	
Food for team and patients	Nil	
Allowances for medical team & support staff	218,000	
Miscellaneous purchases	Nil	
TOTAL (Ksh)	263,000	
In US dollars:	\$2,307	Total
TOTAL (US dollars)	\$2,307	\$2,307
TOTAL UNDERSPEND		\$16,228.00

Kisii & Kemenya budget:

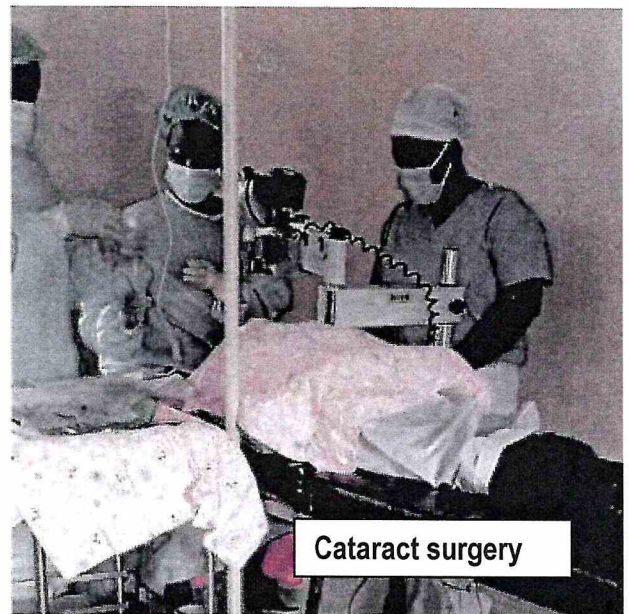
Item – expended upon:	Cost (Ksh)	Total
Pre-screening labour	75,200	
Medical supplies	653,659	
Fuel	106,356	
Food for MEAK team	128,169	
Food for patients	30,700	
Allowances for medical team & support staff	629,700	
Miscellaneous purchases	112,370	
TOTAL (Ksh)	1,736,154	
In US dollars	\$15,229.00	Total
Lorry, tents, sleeping bags, kitchen equipment, drivers, support staff & transport hire	\$6990.00	
TOTAL (US dollars)	\$22,219.00	\$22,219.00
TOTAL OVERSPEND		-\$5,991.00



Dispensing eye health advice to school children

Trip summary & learning points:

Despite the change of location and the challenges described above, all three missions were very successful. The team managed to operate upon 540 patients in total to restore sight and to relieve painful trachoma and embedded foreign bodies. This is a wonderful effort and life changing for these patients. In addition, the team were able to screen & give eye health advice to thousands of people, including many school children, focussing on preventative eye health, which is also extremely important.



Cataract surgery

Thank you:

MEAK would be unable to have completed these missions without the generous donation from Fondation Eagle, to whom we are extremely grateful. We would also like to thank our eye team for all their hard work.

We would like to take this opportunity to thank all our collaborators in the field, including the:

- Local Ministries of Health in Kisii, Kilifi and the Elgeyo-Marakwet counties
- The local ophthalmic officer in Kapsowar
- The Lions club of Bahari
- MEAK's Nargis Kasmani, who coordinated all the logistics for the mission.

Fondation Eagle can feel justifiably proud that they have made an immeasurable difference to a lot of people's lives & wellbeing. We look forward to further similar collaborative efforts in the future.