Global Base Knowledge Project

The Global Base Knowledge project was a six month project. It started in January, 2011 in three districts; Zomba, Mangochi and Balaka and will finally finish end of July 2011. So far data collection for the Global Base Knowledge project has been completed in the three districts that were eligible for the study thus in Zomba, Mangochi and Balaka districts respectively. This has been a very successful exercise despite some challenges, transport problems in particular due to the fuel scarcity which the country is currently experiencing. The quantitative data of the study has all been entered in Epidata and this data has been cleaned and stored/put in a master database which its analysis is to be conducted soon. The qualitative part of the data comprises FGDs and IDIs. The transcribing and translating of all the FGDs and IDIs has been completed and the transcripts have been given to Vincent and Francis for analysis.

On 28th June, a meeting was held at Lions Sight First Eye Hospital where Vincent and Francis presented the preliminary findings of the qualitative part of the Global Base Knowledge project basically on the FGDs that they analysed. After the preliminary report, a final report of the findings of the project will be produced.

The Global Base Knowledge project has been a success in that a number of children (non-doers) that were not able come to Lions Sight First Eye Hospital were able to come and have been assisted. Those that came were provided with transport to and from Lions Sight First Eye Hospital. Despite providing transport and having a majority of these coming and accessing services at Lions Sight First Eye Hospital, there are still some who have not come. One interesting example is of the Kaipa family in Zomba.

This is the family that is heavily affected by cataract. Three children and the father have got cataract. During the first phase of the Childhood Blindness project the family was advised to take the children to Lions Sight First Eye Hospital for surgery but they did not come. This time during the Global Base Knowledge data collection in Zomba, the family had an opportunity to be picked by the car that was used for fieldwork. The team went to the family and told them that they should get ready the car will come and pick them and they agreed but when the car came to pick them, Mr. Kaipa refused and said that he will never let his children go to the hospital. The team tried to reason with him but to no avail. After seeing that all the effort was not yielding results, the team decided to go and talk to the Village headman so that he could try to persuade Mr. Kaipa to let the children go to hospital and be treated.

The Village Headman summoned Mr. Kaipa and his wife and tried to talk to him about the goodness of letting the children go to the hospital and be assisted but his effort too did not move Mr. Kaipa and his wife. The HSA, other people in the village and the brother to Mr.
Kaipa also were present at Village headman’s house when the Village Headman was talking to Mr. Kaipa and his wife. These too tried to persuade the two to let their children go to hospital and be assisted but their effort as well did not move Mr. Kaipa and his wife. The two even threatened that if anyone takes their children to hospital then he/she will assume the responsibility for the children. After seeing that they tried and were not successful, the team left without picking the children.

Another example is of Caroline Shaibu of Zomba who has cataract. This child was identified by the HSA during the childhood blindness project. The parents of the child were told to go with her to Lions Sight First Eye Hospital for surgery but they did not come. During the data collection exercise for the Global Base Knowledge Project, the team told the family to be prepared the car will come to pick them to hospital and they agreed. When the team came to pick the mother and the child, the mother gave several excuses which showed that she was not willing to go with the child to the hospital. The team tried to persuade the mother but was not successful and left without picking them.

**Taskshifting Project**

There is an on-going supervision of the health workers in the health centres in Mulanje district. The supervision is being done by the District Eye Coordinator for Mulanje district (Mr. Likongwe). On these supervision trips to the health centres, the District Eye Coordinator collects data on two sets of forms that were design for supervision. The two forms assesses whether the health workers are able practice the skills that were imparted to them. The completed forms are sent to BICO where the data collected on the forms is entered in Epidata. So far a number of health workers in health centres have been supervised.

The District Eye Coordinator visited Lujeri health centre on the 31st of March. He supervised the health workers and collected data on the supervision form. The data on the completed form was entered on Epidata at BICO. On the 17th of March, 2011, the District Eye Coordinator visited two health centres; Thembe and Dzenje, and collected data on the two forms from both health centres. The forms from the two health centre were to BICO and the data was entered. Mr. Likongwe visited Mulomba health centre on the 24th of March, 2011 and collected data on the supervision form. The completed form was sent to BICO and the data was entered into Epidata. On the 31st of March, 2011, Mr. Likongwe made a supervision trip to two health centres; Lujeri and Mimosa, where he collected data on the supervision forms. The completed forms were sent to BICO and data was entered into Epidata.

Mr. Likongwe collected data on the 7th and 8th of April, 2011 from Thuchila and Milonde health centres respectively. The two completed forms were entered on Epidata at BICO. A supervision visit to Namasalima health centre was made by Mr. Likongwe on the 21st of June, 2011. He collected data on the form and the data was entered in Epidata. Mr.
Likongwe visited Namulenga and Thuchila health centres on the 7th of April, 2011. He collected data on the supervision forms and sent the two completed forms to BICO for data entry into Epidata. Another trip took place on the 8th of April, 2011 to Milonde health centre by Mr. Likongwe. He collected data on the supervision form and sent the completed form to BICO and the data was entered in Epidata. Mr. Likongwe had a supervision trip to Chambe and Kambenje health centres on the 28th of April, 2011. He collected data on the supervision forms and sent two completed forms those health centres to BICO for data entry into Epidata.

On the 5th of May, 2011, Mr Likongwe had a supervision trip to Namphungo health centres where he collected data on the supervision form and sent the completed form to BICO where the data was entered on Epidata. Mr. Likongwe made a supervision trip to Nkomaula health centre on the 20th of May, 2011. He collected data on the supervision form and sent the completed form to BICO for entry into Epidata. On the 21st of May, 2011, Mr. Likongwe supervised health workers at Namasalima health centre and collected data on the supervision form. He sent the completed form to BICO and the data was entered into Epidata. The supervision data was collected by Mr. Likongwe from Chisitu and Chonde health centres on the 7th of June, 2011. The two forms were sent to BICO and the data was entered in Epidata. He also collected supervision data from Mlomba health centre on the 9th of June, 2011. The completed form was entered in Epidata at BICO.

On the 20th of January, 2011, we (Dr. Kalua & Misheck) went to Mulanje to see how the supervision in the health centres was being carried out. We accompanied the District Eye Coordinator on his routine visits to the health centres. We visited Thuchila and Namulenga health centres and the data recorded on the two forms was entered.

**Children Eye Screening**

BICO has conducted eye screening sessions in Phalombe, Mulanje and Zomba districts. The recent screening was done in Zomba at Mulunguzi secondary school and Malosa secondary school. The screening in these two schools took place on the same day. On this day, 362 children were screened. The children that were screened were not only from the two schools but also from other secondary and primary schools in Zomba.

The screening activity in Zomba was done in collaboration with Rotary club of Limbe who provided the spectacles for the children that were examined and had visual problems requiring glasses. The glasses were made and on the 24th of June, 2011 some of the glasses were distributed to children in schools in Zomba. The children that have been provided glasses are from Chikamveka Primary school, Ndangopuma primary school, Masongola secondary school, Mulunguzi secondary school, Zomba Catholic secondary school and Malosa secondary school. However, on this day only children from Ndangopuma,
Chikamveka, Mulunuzi, Masongola and Zomba Catholic were given the glasses. We did not go to Malosa secondary school because it was scheduled for the main function by the Rotary club of Limbe which took place on Saturday 25th June. Though we went to Mulunguzi secondary school to give the glasses to children, we did not find the children because all of them had gone for holiday after sitting for their Junior Certificate of Education exams.