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**Africa East & South
Region Annual
Report 2022**



© CBM drought response reaches Northern Kenya

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Acronyms

ASCEND:	Accelerating Sustainable Control and Elimination of Neglected Diseases
ATCP:	Amhara Trachoma Control Programme
CBID:	Community Based Inclusive Development
CBR:	Community Based Rehabilitation
CHA:	Community Health Assistants
CRPD:	United Nation Convention on the Rights of Persons with Disabilities
DID:	Disability Inclusive Development
DIDRR:	Disability Inclusive Disaster Risk Reduction
DCDC:	Department of Child Development Centre
EHC:	Ear and Hearing Care
F&E:	Facial Cleanliness and Environmental Improvements
IDP:	Internally Displaced Persons
IEH:	Inclusive Eye Health
LF:	Lymphatic Filariasis
MDA:	Mass Drug Administration
NTD:	Neglected Tropical Diseases.
ONCHO:	Onchocerciasis
OPD:	Organisations of Persons with Disability
ORDA:	Organization for Rehabilitation and Development in Africa
PCT:	Preventive Chemotherapy
PPE:	Personal Protective Equipment
S&A:	Surgery and Antibiotics
SAFE:	Surgery, Antibiotics, Facial Cleanliness and Environmental Improvements
SDGs:	Sustainable Development Goals
TEO:	Tetracycline Eye Ointment
TT:	Trichomatous Trichiasis
TVET:	Technical and Vocational Education and Training
VSLA:	Village Savings and Loans Association.
WASH:	Water, Sanitation and Hygiene
WHO:	World Health Organisation

Foreward



The year 2022 presented opportunities and challenges for CBM Africa East and South Region. The resilience of our partners and persons with disabilities was tested as the world slowly adjusted to the new normal after the

pandemic and after the start of the Ukraine war. The effects of the war were felt as the region grappled and still does with increased food prices, soaring fuel costs, insecurity and generally increased cost of living, which is worse for persons with disabilities. Additionally, unprecedented climate shocks were experienced, with severe droughts recorded in Kenya and Ethiopia.

Despite the challenging environment, CBM reached 9 million people who received services from our core activities working with 98 partners in Burundi, Ethiopia, Kenya, South Sudan, Tanzania, Uganda, Rwanda, Malawi, Zambia and Zimbabwe.

Our Inclusive Eye Health Initiative embraced peek technology, an innovative approach targeting the most vulnerable communities who are resource constrained and unable to easily access services. Door-to-door services using the technology are changing lives in communities. PEEK technology has been adopted in Ethiopia, Kenya, Uganda, Tanzania, Zambia, and Zimbabwe. Through mobile phones for screening eye conditions and referrals for specialized treatment, services are brought closer to the people who already have challenges accessing hospitals.

In our continuous effort to prevent and treat Neglected Tropical Diseases, CBM interventions in Africa East and South reached 7 Million people with mass drug administration in South Sudan, Burundi and Ethiopia. Through collaborations with the government, South Sudan embarked on a campaign to prevent trachoma through Surgeries and Antibiotic Administration.

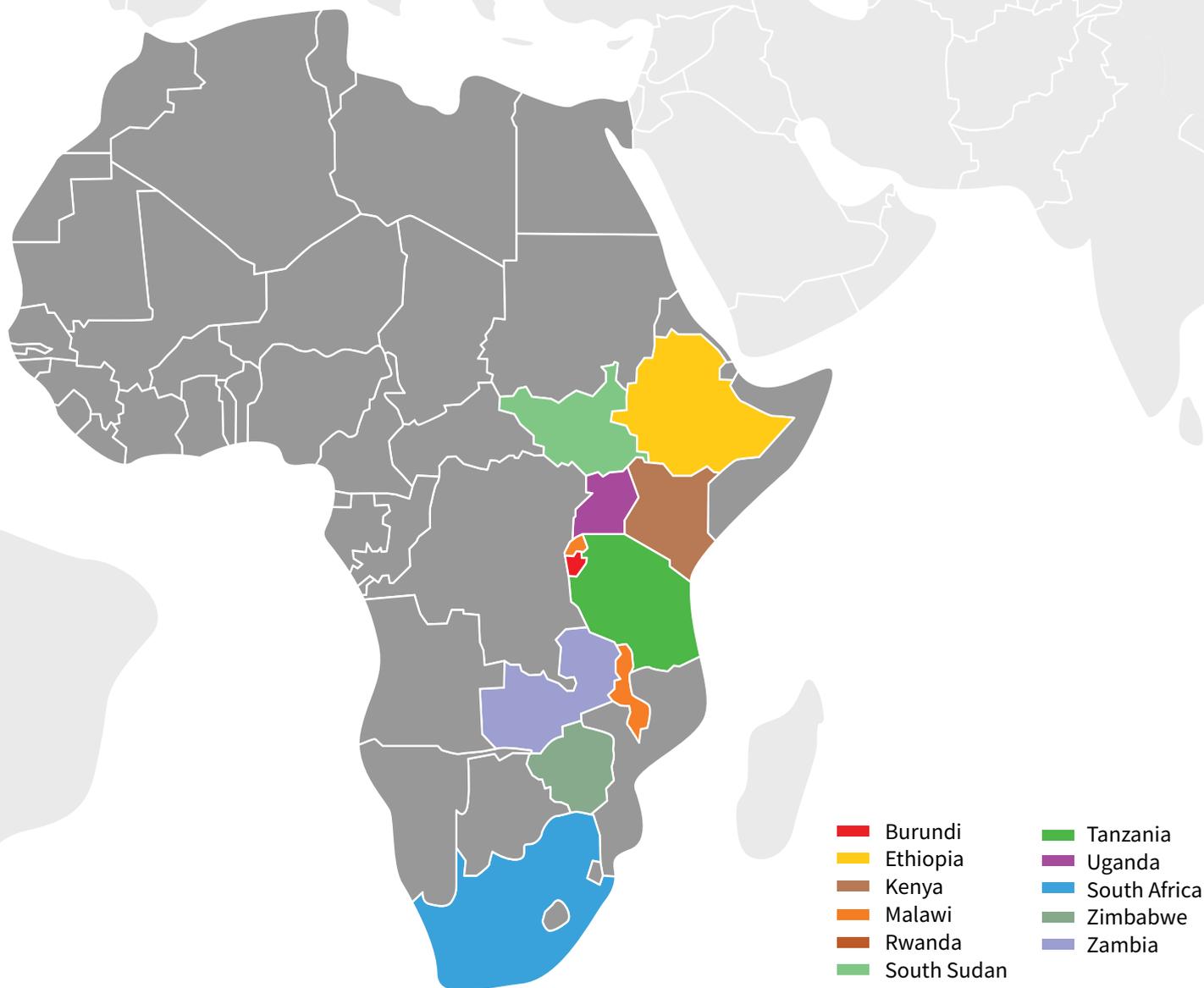
CBM's community-based inclusive development projects reached persons with disabilities with services in health, education, livelihood, social and empowerment activities. The services were offered in health, education, livelihood, social and empowerment activities. In 2022, apart from service provision, activities that focused on the rights of persons with disabilities enabled families to understand their rights. As a result, community members were empowered to engage in their community and governance issues.

Moving forward we will continue to focus on a systems- oriented approach to Community Support Services and Systems (CSS), ensuring that our interventions are viable, maximize impact, and stay true to our brand.

This will be achieved through ongoing initiative areas of Inclusive Eye Health (IEH), Inclusive Humanitarian Action (IHA) and Community-Based Inclusive Development (CBID)

Albert Kombo

Albert Kombo
Regional Director, Africa East and South



Our Reach in Numbers Africa East South Region 2022

8 million people reached with CBM and partner activities

Inclusive Eye Health

- **1.18 million** persons who received eye health services
- **7,961,310** persons receiving treatment for eye health-related MDA/NTD

Assistive Devices

- **75,163** spectacles provided
- **3,916** low-vision devices provided
- **1,073** hearing aids & amplification devices provided
- **18,135** orthopedic appliances provided

Community Based Inclusive Education (CBID)

- **92,909** persons receiving services for orthopedic conditions
- **119,261** EHC persons reached with medical services for ear conditions
- **243,287** persons with disabilities enrolled in inclusive education services
- **106,797** persons with disabilities accessing livelihood services

Inclusive Humanitarian Action

62,127 People reached by humanitarian assistance

1. Inclusive Eye Health

CBM Inclusive Eye Health services are inclusive, sustainable and locally owned. Our approaches are anchored in two main priority areas, which include strengthened national health systems focusing on eye health and neglected tropical diseases; improved access to inclusive, comprehensive eye care and Neglected Tropical Diseases (NTD) services. Through strategic partnerships, we have increased our reach and brought services closer to the people through various accomplishments leading to the prevention of blindness. Such initiatives include surgeries, conducting drug campaigns against NTDs, training medical staff and community volunteers, performing eye screenings, participating in educational ventures and using new technology to improve our reach. Referral networks were also established so those needing services could easily access affordable services.

Eye operations conducted 102,747
Cataract operations conducted 53,943
Spectacles provided 75,163

In Africa East and South Region in 2022, CBM reached 1,188,206 people in Inclusive Eye Health activities through 75 projects implemented by 50 partners. The region has widely adopted peek technology and other innovations for eye health services. The technology is transforming eye health screening, especially in remote areas where services are not accessible.

Systems Strengthening in Kenya

In Kenya, CBM launched a flagship project dubbed Vision Impact Project (VIP). It was launched in 2022, and the goal is to reduce the prevalence of visual impairments and avoidable blindness through systems strengthening approach. With the support of partners, the project supports the training of eye health workers on primary eye care and the use of Peek technology. Through one of the partners, Kenya Society for the Blind, 85 Community Rehabilitation Assistants (CRAs) were trained. The trained rehabilitation officers support community rehabilitation in rural communities, thus decentralizing rehabilitation services to the communities.

Vision Impact Project Contributes Towards Kenya Eye Health Strategic Plan 2021-2025

As a contribution towards the Inclusive Eye Health strategic plan 2021-2025, Kenya Country Office, through Vision Impact Project, advocated for the

national government's support and recognition of eye health in Kenya. The launch was presided over by Kenya's top Ministry of Health (MOH) officials, who reiterated the ministry's commitment to supporting eye health initiatives and recognized the Vision Impact Project as one of the pillars accelerating the achievement of the National Eye Health strategic plan 2020-2025.

Facilities equipped

As part of the health system strengthening, CBM supported seven counties in Kenya (group of districts) with eye health equipment, including a Carl Zeiss Lumera operating microscope, slit lamps, Yag III lasers, biometry machines, and auto lensometers, among others. The set of equipment, most of which will be delivered in 2023, will go a long way in ensuring quality eye care service delivery in both public and tertiary facilities to the over 8M people from the targeted counties.



↑ Equipment Handover Vihiga County

Leadership Development Program for County Eye Health Coordinators

CBM partnered with Strathmore University to offer a senior leadership development program for county eye health coordinators to improve the governance of eye services in VIP-supported counties. This program is meant to equip the coordinators with leadership and management skills in preparation for leading newly established county eye health technical working teams, engagement with county leadership, advocacy and program management skills.

In addition, CBM Kenya Country Office also signed a Memorandum of Understanding with seven county governments to guide effective engagement between the county government and VIP partners.

Peek Technology Saves Joseph's Vision

Joseph is 12 years old and was born with good vision but developed eye problems when he was 10 years old. Joseph's mother became aware of the condition but could not afford treatment. Joseph's mother remained hopeful that his condition would improve with time since she resorted to using herbal remedies, but there was no improvement.

Meanwhile, Joseph's performance at school began to deteriorate, and the previously playful Joseph kept to himself often. Due to his poor vision, Joseph also suffered ridicule and stigma from fellow learners and became a target for bullying at school, making him resent school.

In early December 2022, during the household screening, a Community Health Assistant noticed that Joseph was struggling with vision. After going through the Peek Acuity test, Joseph was referred for further treatment at Ipali Health Centre. At Ipali Health Centre, Joseph's condition was diagnosed by an Ophthalmic Clinical Officer as a bilateral cataract.

Joseph being a child, was referred to Sabatia Eye Hospital, a tertiary institution with better facilities and expertise, for cataract surgery. Joseph's diagnosis was confirmed at Sabatia Eye Hospital, and he was further diagnosed with squint in his left eye. Due to his prolonged use of herbal remedies, his vision had deteriorated to counting fingers at 5 meters (CF5M) in both eyes. He was then booked for surgery in his left eye on 21 December 2022.

After his surgery and bandage removal, his vision in the left eye improved from CF5M to 6/36. Shortly before discharge, Joseph resumed enjoying children's programs on the television and playing on the hospital's grounds.

Lessons Learnt:

Joseph's story highlights the health risks children are exposed to when parents cannot afford treatment. There is, therefore, a need to sensitize teachers, parents and community health workers to help identify such cases. With early detection, Joseph's condition would have been treated earlier to reduce his prolonged suffering. Vision Impact Project community and school screening will help identify such cases in Vihiga County and other VIP counties.



Above: Joseph's journey towards recovery.

CBM Supports the Elimination of Neglected Tropical Diseases in South Sudan

CBM's approach to Neglected Tropical Diseases (NTD) is built on experience and existing strengths. In combating NTDs, CBM aims to achieve sustainable and effective community-owned NTD programmes that are comprehensive, integrated and inclusive.

For more than 20 years, CBM has been successfully involved in the prevention of blindness from onchocerciasis and trachoma. The key outcome of the NTD projects supported by CBM is the prevention and treatment as a public health problem through preventive chemotherapy (PCT) using Mass Drug Administration (MDA).

In Africa East and South region in 2022, 7,961,310 persons were treated through mass drug administration for all NTDs in South Sudan, Ethiopia, and Burundi. 7,725,585 were treated for onchocerciasis, 4,904,853 were treated for Lymphatic Filariasis (LF), and 923,293 were treated for trachoma.

Bringing Services Closer to the People in Bentiu and Mayom Counties (South Sudan)

Trachoma disease is endemic in South Sudan's Unity State, and efforts have been made with CBM funds through its partner, the State Ministry of Health, to implement two components of the SAFE strategy, namely Surgeries and Antibiotic Administration. In

2022, **1264 (307 Male, 957 Female)** people were operated on with TT diseases and their sight was restored. So far, **6,950,136** have been reached with treatment for Onchocerciasis (ONCHO) and Lymphatic Filariasis (LF) in 2022, compared to 6,010,409 people treated in 2021. This increase represents a significant achievement for the programme and community acceptance on the road to elimination.

Onchocerciasis, also known as river disease, can cause permanent blindness and neglect among many affected by the disease, while LF causes enlargement of limbs and genitals, causing discomfort and affecting the quality of life. People who suffer as a result of the infection attest that early treatment should be prioritized as a measure to prevent the disease. Patients who benefited from the services were filled with joy and expressed their gratitude to CBM as the services were brought closer to them. The ministry of health and other stakeholders were at the forefront of the program's success in the state.

Furthermore, with the prevalence of the disease, CBM supported the implementation of static eye units in Bentiu and Mayom counties, where patients can access eye services at any time. 57 counties were reached compared to 44 counties in 2021.



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Neglected Tropical Diseases projects in CBM support prevention and encourage treatment through preventive Mass Drug Administration (MDA).



2. Community Based Inclusive Development (CBID)

CBM's Community-Based Inclusive Development projects are people-centred, community-driven and human rights-based. Persons with disabilities are included in all areas of life and are encouraged to participate in their communities meaningfully. Their challenges are anticipated to be addressed through self-help groups and livelihood activities to improve their economic status.

Families and communities are included in the overall approach. CBM's CBID initiative encompasses five initiative areas, namely

- i. **Ear and Hearing Care (EHC)**
- ii. **Physical Rehabilitation (PR)**
- iii. **Inclusive Education (IE)**
- iv. **Disability Inclusive Disaster Risk Reduction (DiDRR)**
- v. **Livelihood.**

In 2022, Africa East and South, through 95 CBID projects and 53 implementing partners, reached 92,909 persons in orthopedic conditions.

- **19,467 orthopedic operations conducted**
- **3,783 EHC operations conducted**
- **98,287 assistive devices distributed**
- **106,797 livelihood services initiated**
- **47,908 persons obtained employment**
- **119,261 EHC persons reached with medical services for ear conditions**
- **92,909 orthopedic conditions diagnosed/treated**

Grace Kumtola:

Story of a widow championing the rights of persons with disabilities



↑ Grace Kumtola disability inclusion advocate

Grace Kumtola is a 51-year-old widow. She lives in Ndevu Village, Traditional Authority Makanjira, in Salima District, along Lake Malawi. She has a Leg Length Discrepancy (LLD). Her highest level of education is grade 8. She belongs to the Baptist Church. Grace is a beneficiary of P3946, the MACOHA CBID Project.

Grace is a peasant farmer who depends on farming and casual labour for her livelihood. Through the MACOHA CBID Project, in 2018, she was trained in vocation skills (tailoring) by one of the local Organisations of Persons with Disabilities (OPD) called Kuthandiza Osayenda Disability Organisation (KODO). After successfully completing the training, she was provided with resettlement tools to start a tailoring business.

Below are the responsibilities Grace has taken on.

Community Roles

MACOHA CBID volunteer:

She is a volunteer for Malawi Council for the Handicapped (MACOHA) in her community. As a volunteer, she is responsible for identifying clients to be assessed by the Community Rehabilitation Assistant (CRA). She is also responsible for community mobilization, advocating for the rights of persons with disabilities and initiating the formation of self-help groups and parent support groups with support from the CRA.

VDC member:

As a member of the Village Development Committee (VDC) of her area, Grace represents the interests of persons with disabilities. One of her major roles is to advocate for the mainstreaming of disability issues in the planning, implementation, and monitoring of community-based development projects. She advances the concerns and issues of persons with disabilities to rights holders.

Caregiver:

She is a caregiver for one of the Community Based Child Care Centers in her area. This is a noble duty to help children of her community to access early childhood development. Member of Takumana Women

Secretary of Village Afforestation Committee:

Despite her disability, Grace is also a secretary for the afforestation committee within her area. This committee is responsible for the restoration of community-based forests.

Member of Takumana Women Support Group:

Grace was responsible for mobilizing mothers of children with disabilities and other women with disabilities to form a support group called Takumana Women Support Group. The group aims to share experiences, engage in income-generating activities, and improve the living conditions of children with disabilities. To promote their cause, MACOHA supported them with a pass-on livestock program.

Member of Village Savings and Loan Association (VSLA) and other women's groups:

Grace is a member of a VSLA, where she puts in some little savings. In addition, she is also a member of other women's groups within her community, just like many other women in the area.

Lesson Learnt: Grace Kumtola is one of the few women with disabilities who does not look down upon herself. She is a champion in her area in promoting the rights of persons with disabilities and other related issues. She encourages parents of children with disabilities to always be positive and to look for early interventions such as physiotherapy and other medical interventions.

Ear and Hearing Care in Zambia

CBM-funded Ear and Hearing Care project in Central Province, Zambia, primarily focuses on establishing primary and secondary ear and hearing care infrastructure, strengthening ear, nose, and throat and audiology Services. The project trained nurses and clinical officers in primary ear and hearing care courses. 13 nurses and clinical officers have been selected to be trained as “Audiology technicians” so as to provide Audiology services across 3 districts. They will be stationed at the established Audiometric Booths set up by the project in main hospitals in Zambia.

Alexandria’s late diagnosis and Intervention

Alexandria or Alex is a beneficiary of the ear and hearing care services. It took the intervention of a keen teacher to identify that she had a problem after being in school for four years. Alex is now 12 years and lives with her mother and father in Kabwe District, Nakoli Township, in the Central Province of Zambia. When she was born, she had good hearing and lived a normal life playing and interacting with her family and friends within her community.

At the age of 4 years, Alex began to experience problems with her hearing but never informed her parents about her problem. She began to struggle to interact with family members. She struggled to listen to instructions and follow conversations at home and with friends. Her academic performance was also adversely affected. Her parents believed that her lack of communication and challenges with her academic performance was because she was playful and not concentrating enough to improve.

Some of her friends at school began to make fun of her and called her “dull” and “slow” because her academic performance dropped, and she constantly held the last position in class ranking (class of 36 pupils). She became the laughing stock of her friends. Her grades 3 and 4 teachers stereotyped her as being “dull” and “playful” and considered her academic performance a lost cause that could not be salvaged.



© CBM

↑ Alexandria was supported by CBM to receive ear and hearing care services in Zambia

Mr Chiliboyi, a teacher who took over teaching the grade 5 class at her school, became Alex’s teacher. He enjoyed interacting with pupils daily, and he quickly took a keen interest in discovering what was causing Alex’s poor academic performance and why she was anti-social. Mr Chiliboyi later discovered that if Alex couldn’t talk, then she might have had a problem with her hearing; he said, “*She’s been in school from Grade 1 to Grade 5 and ngatalanda, ngatomfwa (English Translation: “if she doesn’t talk, she can’t hear”).* Mr Chiliboyi became interested in Alex’s problem and inquired from the school authorities about how they had been communicating with her so that he, too, would know how to communicate with her.

The Intervention

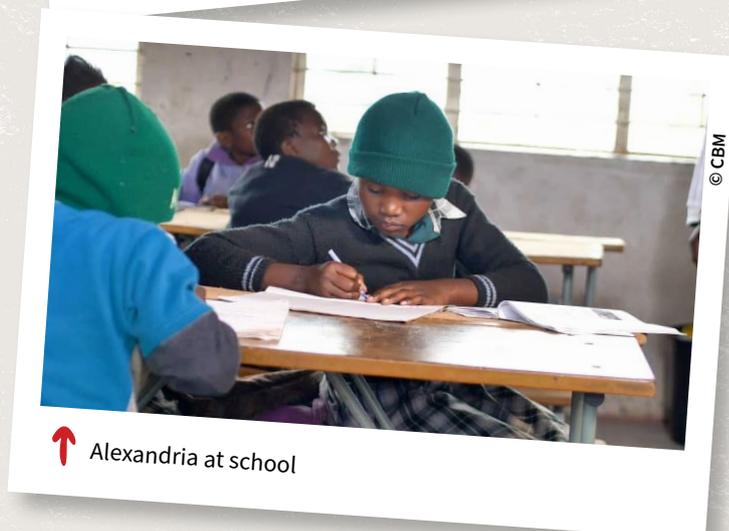
Mr Chilibozi contacted Alex's parents and informed them that he believed she had a hearing problem. Alex was taken to Kabwe Central Hospital ENT and Audiology Clinic, where her hearing was tested. The audiology technician found that she had some form of hearing loss in one of her ears and fitted her with a hearing aid. Alex instantly noticed a significant improvement in her hearing, and this improved her academic performance.

Result

Alex's academic performance drastically improved from being last in class to be the third (3rd) best pupil in her class just after a term of being fitted with her hearing aid. Alex's interaction with her family and friends drastically improved, and she felt more included in conversations, enhancing her self-esteem and confidence. Through Alex's story, more community members have become more aware of ear and hearing care services and the need to get screening. Statistics at the local health clinic have shown a higher number of patients visiting the clinic to receive EHC services.



↑ Alexandria and her siblings



↑ Alexandria at school

Lessons Learnt

1. Teachers must continue to be sensitized and trained on identifying children with ear and hearing care impairments (within their classrooms) and must be able to know when to refer a client for further screening.
2. There is a need to enhance sensitization through community health workers to the public on ear and hearing care services and mandatory screening at primary ear and hearing care facilities where the project has established those services.
3. There is a need to sensitize communities on hearing devices to reduce stereotypes about hearing aids, as the public sometimes mistake hearing aids for earphones, causing the users of the devices to be robbed of their hearing aids.

Inclusive Education

CBM promotes inclusive education as the only way of achieving lifelong learning for all, including girls, boys, men, and women with disabilities. In 2022, Africa East and South reached 243,287 persons enrolled in all education settings at partner-targeted schools (122,746 boys and 119,778 girls). 3,564 teachers and 2,856 parents/caregivers were trained for home-based academic support.

Ryan Gift Odhiambo's Journey with Club foot

"I was so angry and confused after seeing my first child's feet like that." Ryan's mother told us.

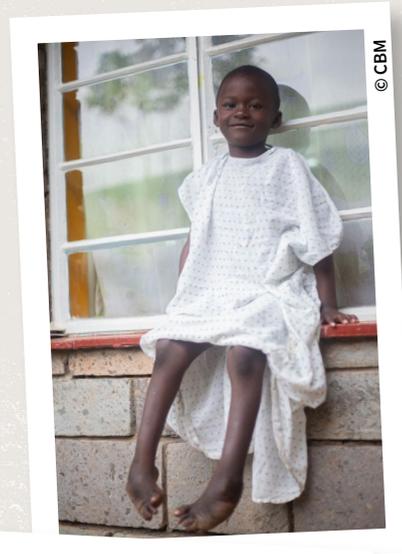
Vivian is a young mother of two kids. Ryan made her a proud mother as the baby. However, the joy of being a mother was cut short the moment she held Ryan in her arms. Vivian had given birth at home because her water had broken earlier than expected in the middle of the night.

The confusion and anger of having a child's feet curving inside (clubfoot) made her question why she was being 'punished.' Her mother told her to accept the condition and find a way of living with it. Her in-laws advised her to hide the child. Vivian cried every time Ryan asked her why he could not go outside to play. Ryan could not be kept in for long and would severally sneak out to play. That came with a consequence; being laughed at, and not only did he pay for that, but so did his mother.

Vivian tried local herbalists, but nothing came of it. She finally decided to take a shot at a local hospital but shock on her! It was expensive to buy casts occasionally. Since there was not much the hospital could do, she threw in the towel, took Ryan home, and entirely stopped going to the hospital.

Ryan's playful nature brought him his shot at specialized treatment when a neighbour who had come back home from the city. He saw Ryan's condition and immediately sought Vivian and her husband. He introduced them to CURE Kenya and its services. Ryan's condition is the core reason why the hospital was started in the first place. He informed them of CURE clinics around the area, but the COVID-19 pandemic hindered them from attending one. Fortunately, CURE Kenya was aware of Ryan's travel concerns and arranged to transport him to Kijabe for surgery.

Two years later, Vivian is lost for words and can only smile again because of the transformation she has seen in Ryan over time; a complete transformation of her firstborn!



↑ Ryan undergoing surgery



↑ Ryan wears shoes



↑ © Cure Kenya Ryan has successfully undergone club foot surgery and can now walk

Self Help Group Advocacy Saves a Young Family from a Broken Marriage



↑ Gatenga Self-Help Group in a meeting

Ayinkamiye Olive (20 years old) is married to Dusabemungu Alexis (23 years old), and they reside in Kicukiro District, Sector Gatenga, Karambo Cell, Jyambere Village. Their marriage began when Olive got pregnant, and they were required to start a family and live together according to tradition. As a result of their marriage, the young couple got one child with multiple disabilities, including intellectual disability (Twizerimana Fabrice, a boy, 3 years). The family lives in extreme poverty.

The disability of the child prompted constant family conflicts because the mother had to remain at home taking care of the child with a disability and hence was not able to contribute to the family's income in whatever capacity through any casual work. Regrettably, extreme poverty also made them unstable in terms of housing. They often moved from one house to another after being chased out of the previous ones due to failure to pay the rent.

The after-project situation

When the CBM project team became aware of the situation during their routine field work, they encouraged the couple to get over their conflicts because neither of them really contributed to having a child with a disability. They were advised that they needed to understand and accept that a child with any kind of disability has the same rights as the ones enjoyed by those without disability.

The family was then advised and supported to join the Gatenga Self-Help Group for the parents of children with intellectual disabilities, where they are now benefitting from psychological support from parents facing the same type of disability while also contributing a small amount of money monthly to the group's saving fund from which microloans can be obtained to solve some of their problems.

The young couple was also encouraged to visit the HVP Gatagara rehabilitation centre for the child to access health services. Given that these services normally require the parents to pay some fee, advocacy work was also carried out for them to get the rehabilitation services free of charge, and consequently, the child is now enjoying his basic right of access to health services facilitated by the project's physiotherapist.

In search of how this young family could be economically independent, the project team approached the district's leadership to support the family. Kicukiro district promised to support the family financially and provided five hundred thousand Rwandan Franc (500,000Rwf). The money will help start a small family project that would allow them to become financially stable while providing their basic needs. Their child living with disability will soon need to go to school like other children in the community.

From the 500,000Rwf supported, the young family agreed:

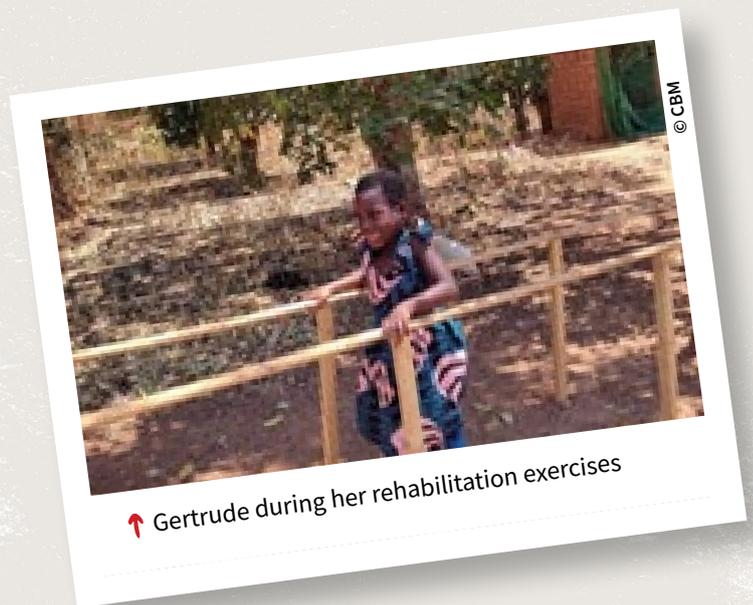
1. To buy a small electricity-run machine to be used by the lady (Olive) to grind and sell cassava leaves (Isombe) which is a good source of money in their community.
2. To buy a bicycle to be used by the husband (Alexis) to do paid bicycle rides (transport) in Kicukiro district, which is also a source of income for the family.
3. The family used another portion of the money to acquire some of the basic amenities of the household.

Hope Restored through Physical Therapy in Malawi

Gertrude Silo is 6 years old. She was diagnosed with cerebral palsy. Her condition was identified early after birth when her guardian noticed a delay in developmental milestones. She was drooling and not able to roll, use her hands well, sit, reach out for toys, stand, and walk.

When her family heard about physiotherapy services at St. John of God Hospitaller Services in Mzuzu, Malawi, they registered her in the programme to start receiving physiotherapy services falling under the Department of Child Development Centre (DCDC). Even though the services rendered to Gertrude were beneficial, her guardian could not continue with physiotherapy services at the St. John of God Community-Based Rehabilitation (CBR) clinic due to transportation costs from Ekwendeni to Mzuzu.

Decentralization of CBR clinics, such as St. John of God Hospitaller Services, has brought healthcare closer to people, especially in Mzimba North; it has greatly relieved the communities. The family knew about the development through a community sensitization campaign carried out by the project through a public address system and leaflets distributed in their community. The sensitization campaign was also augmented by the support group from the same area, which was equally briefed about the project. Gertrude was reassessed at a CBR clinic, currently running at Ekwendeni Mission Hospital monthly and closer to her home, in June 2022.



↑ Gertrude during her rehabilitation exercises

Gertrude's guardians started attending the monthly physiotherapy clinic at Ekwendeni. She started receiving interventions immediately. Her guardians were also among the beneficiaries who received guardian training on children with various kinds of disabilities. The major focus of the training sessions was imparting knowledge on the specific condition of every child and home management of the children.

Furthermore, Gertrude started benefitting from the individual home visits program carried out by the project staff and community volunteers. Guardians were taught to use locally made clean handkerchiefs to clean the child's mouth and use the inside corner of the house to stand the child to facilitate independent standing. After registering improvement, the child was given a walking frame, and parallel bars were locally made at her home to help improve balance while walking. Gertrude has now achieved important milestones such as hand function, standing and walking with minimal support.

Exploring Inclusive Eye Health and Community-Based Inclusive Development Collaborations

CBM's Inclusive Eye Health and Community-Based Inclusive Development programmes have commonalities that may be explored for collaboration. Patients accessing eye health and community-based services may have similar needs and require similar services. It has been noted that comprehensive eye health programs (promotion, prevention and rehabilitation) for these eye diseases can be implemented successfully only when communities are engaged. For example, there is evidence that volunteers in rural communities can provide affordable mobility training for blind people without involving hospital staff. Where there are partners with both IEH & CBID projects, CBM has encouraged the strengthening of ongoing collaborations as an important means of support systems. Projects already exploring this collaboration are Gahini Hospital in Rwanda, Cheshire Services, Ruharo in Rwanda and Vision Impact Project in Kenya.

Olivier's story – A beneficiary of IEH & CBID collaboration

Olivier was born with sight but began losing it at the age of six. He completely lost his vision when he was 13 years old, in the fifth year of primary school. He was the third child in a family of three. He is a resident of Muhanga district, Kabacuzi sector, Kabuga Village. His condition impacted him negatively, and he eventually dropped out of school.

He would not have dropped out if the school he had enrolled in had been welcoming and inclusive of disability and diversity in education. Staying alone at home, a form of isolation, undoubtedly resulted in depression. Olivier's mother, who had always supported him and felt the weight of his suffering in her daily routines, had given up hope.

Olivier was brought to Kabgayi by her mother for treatment, where the ophthalmologists tried all they could to restore his sight; unfortunately, it was too late. He had lost it. The ophthalmologists recommended a special school for him to access education services like any other child. However, given that special schools in the country are very few and expensive, Olivier's mother was financially unable to provide the required school fees for her son to be enrolled in a special school for learners with visual disabilities. With the abovementioned barriers and challenges, Olivier remained at home and could not support his mother in agricultural activities.

Fortunately, with the launch of the CBM project in collaboration with Kabgayi Eye Unit and implemented by a sub-implementing partner Rwanda Union Blind (RUB), through IEH-CBID collaboration, Olivier was able to enrol in Masaka Resources Centre, a Technical and Vocational Education and Training Centre (TVET) where he learned how to sew and weave clothes.

In addition to one year of training, he received knitting equipment and basic consumables from the project, and he is now excited to start his own business (sewing and tailoring career) with the knowledge/skills and materials he received. With the provision of basic necessities, he expects his family's living conditions to improve as a result of his initiative/project.

He intends to use the acquired skills to serve as an ambassador or advocate for colleagues/friends who have not had the opportunity to learn any skill that will help them in their current and future lives. Olivier says, *"Blindness is a disability, not an inability. Blind people should have the right to be treated well among people without disability or the fear of being ridiculed, embarrassed, or looked down on as a lesser person because of this impairment. People with visual impairments want to be treated like everyone else."*



↑ Olivier learning how to use a sewing machine

3. Inclusive Humanitarian Action

Persons with disabilities have unique needs in the humanitarian context. They are more likely to lose their lives in any humanitarian crisis than persons without disabilities. Due to their disability, persons with visual, hearing, physical, psychosocial, or intellectual impairments may be less able to escape hazards and have greater difficulty accessing humanitarian assistance. The number of disabilities also increases during emergencies, either short-term or long-term, due to injuries sustained. Services like rehabilitation and medical accessibility may also be missing.

CBM's humanitarian action aims to equally reach and actively involve persons with disabilities, addressing specific needs while promoting and facilitating full inclusion in mainstream services. In 2022, CBM's Inclusive Humanitarian Action in Africa East and South reached 62,127 people in the year 2022. The activities were mostly food security and livelihoods, Water, Sanitation and Hygiene (WASH), and Inclusive Education.

In Kenya, 13,943 beneficiaries received support through food distribution and cash transfers. WASH activities were also conducted through water tracking in the affected areas. In Inclusive Education, school feeding in 24 Early Childhood Development Centers (ECDs) reached over 4,000 children between ages 3-10. In Malawi, CBM conducted an emergency response to Cyclone Freddy, which left over 600,000 people displaced. CBM responded by providing cash transfers, construction of latrines, boreholes, and hygiene promotion.

Zimbabwe: Sector of intervention – Education

- Beneficiaries reached
- 2,203 (1,103 learners and 100 teachers)
- 50 schools in 5 districts
- 1,103 learners with disabilities assessed
- 115 assistive devices procured and distributed to assessed learners with disabilities
- Disability-inclusive resource units established in 43 schools
- 100 teachers and school development committees trained in inclusive education

South Sudan: Sectors of Intervention – Food Security and Livelihoods

Beneficiaries reached: 1,806



↑ Susan Kufika washing her vegetables.

Farmers in Gorom Refugees' settlement grow vegetables

Kafuki Susan is a mother of six children (3 boys and 3 girls) residing in Gorom Boma. She had been praying to God for humanitarian assistance in their area. Unfortunately, things were not going well. One day she decided to go to Gudele to do some small business to generate income for her family, but getting a place for her business was not easy in Gudele.

She decided to return to Gorom Luri, where she cultivated groundnuts, okra, and sorghum on a small piece of land to get some little income and for domestic consumption, but still, the income was not that steady. "Luckily, her prayer was answered when ACROSS and CBM supported the most vulnerable person in Gorom Luri with an irrigation scheme. Susan narrates, "Because of the water availability at the irrigation scheme, I cultivated four different kitchen gardens for vegetable farming.

I started investing in the irrigation scheme supported by ACROSS with funding from Christian Blind Mission (CBM) International. Currently, I can support my kids, who are schooling in Juba and Gorom, with the little income I generate from my vegetable production. In addition to that, I'm able to feed my family with vegetable production and sell some produce or exchange them with other foodstuffs for me to get a balanced diet. I can get 6,000 SSP to 7,000 SSP weekly from my vegetable production.

Susan appreciates the tremendous support by CBM through ACROSS for supporting the most vulnerable people of Gorom to grow vegetables at the installed water irrigation project.

The current challenges include sharing one tap, which can only be used by one person at a time. Secondly, the temporary fence made from the local poles has started falling off, thus exposing the vegetables to livestock and intruders who harvest the produce in the field; this has discouraged some farmers. Therefore, I call upon ACROSS and CBM to construct a permanent fence for long-term sustainability.



↑ Head of Ophthalmic Services Unit(OSU) Dr. Gichangi explaining use of Equipment to National Health Officials



↑ David Munyendo Country Director Kenya(left) hands over donated list of equipment to top Kenya Ministry Of Health(MOH) official

4. CBM Africa East and South Key Activities 2022

Vision Impact Project (VIP) Kenya Launch Graced by Top Government Officials

The Vision Impact Project Kenya, a four-year project aimed at accelerating universal eye health coverage through comprehensive, inclusive, integrated, and people-centred eye health services in Kenya, was launched in April 2022. The launch was the first of its kind in the country office, attracting over 300 attendees.

The launch was graced by dignitaries and stakeholders ranging from different embassies representatives, top government officials, medical practitioners, Kenya's Council of Governors' representative, representatives from different ministries, implementing partners, and other key players in the eye health sector. This attendance was an outright representation of the multi-sectoral approach adopted by the project and an indication of the level of endorsement and adoption of the project in the country.

The role of implementing partners

The project's implementing partners had a stunning exhibition demonstrating the uniqueness and vastness of the project in the counties of Vihiga, Bomet, Kajiado, Kwale, Kakamega, Embu, and Kiambu targeted in phase one of the project. targeted in phase one of the project. The quality of the displays at the exhibition booths articulately mirrored CBM's standards to be upheld during the project implementation and beyond. Additionally, Peek demonstrated the use and value of Peek technology in the project for screening, referrals, and treatments.

Achievements of the launch

The launch was documented by one of the country's leading TV stations and was aired on the prime time news at 9:00 pm EAT. You can watch it by clicking on <https://youtu.be/a37QHJnaX8I>.

Other than the impressive attendance of the launch, the following were some other achievements.

i. Launching of the Vision Impact Project

With tons of activities planned for the project ranging from training county community health workers on using Peek technology to constructing and equipping eye clinics, the launch served as an official kick-off to the project activities. The ceremonious launch signified the magnitude of the project, starting it off at a high momentum, keen to be observed by all the team players and stakeholders. It was a moment to behold and will serve as a point of reflection four years later at the end of the project.

ii. Donation of equipment to the ministry of health

A total of six high-spec laptops, one scanner, one printer, and a server disk were donated to the ministry of health's Ophthalmic Services Unit (OSU).

iii. Donation of equipment to implementing partners

As one of the project's main goals is to strengthen eye health systems, equipment was procured to be distributed to several eye hospitals and clinics in the project. While more equipment is to be procured during the four-year course of the project, a slit-lamp bio microscope, tonometer, Zeiss operating microscope, auto refractor keratometer, biometry machine, and an operating microscope were donated during the launch.

iv. Donation of nine vehicles

The Vision Impact Project capitalizes on screenings in public primary schools and community screenings in the seven counties, necessitating project-specific outreach vehicles in those counties. Nine vehicles were therefore donated to the seven implementing partners, one to the Kenya Society for the Blind (KSB) and one to the ministry of health's Ophthalmic Services Unit. These were flagged off during the launch, and donation certificates awarded to the respective custodians

CBM Zambia joins in “Breaking the bias against disability”

International Women’s Day is for all women, and all women should be celebrated, including women with disability. On the 7th of March, CBM Zambia hosted women from diverse backgrounds to celebrate International Women’s Day under the theme “**Breaking the bias against disability.**”

The event was a fun-filled, interactive event aimed at breaking the bias against disability and making a stand to celebrate all women in all their diversities. The event provided a forum for differently abled women to share amazing experiences through a paint-and-sip session. With the help of experienced professional artists, the women were guided to express and celebrate themselves through ART. This was coupled with motivational talks by the CBM country director, Linda Kasoka, the CBM CBID regional advisor, and testimonies from two participants.

In honour of women’s accomplishments and call to strengthen the potential of women with disabilities, CBM drew 15 women from 3 implementing partners, Beit Cure Hospital, Cheshire Homes Zambia and Zambia Federation of Disability Organisation. The women included those with hearing impairment accompanied by a sign language interpreter, the ones with albinism, and women with other physical disabilities. Through this session, the women were able to engage in deep conversations, encourage each other and use ART to express themselves.

Some quotes from the inspirational talks

“The way people were looking at me like they have never seen a woman with albinism pregnant before.”

“I have 8 kids, I am a powerlifter, I am a wheelchair basketball player, and I can do anything they can do. We are all equal in the eyes of God, no matter my physical challenges”.

“From the time I married, they kept looking at my tummy. They even linked my not being pregnant to my disability. It’s about making your own decisions and not trying to prove to the world.”



Investing in the Optical Workshop and Retina Unit in CBM Ethiopia

CBM, in collaboration with its partner, All Africa Leprosy Rehabilitation and Training Centre (ALERT), recently established and inaugurated an optical workshop and retina unit in Ethiopia. The main purpose of this workshop is to produce spectacles and distribute or avail them to the community and school-aged children who may have eye conditions that would be corrected through wearing spectacles.

By so doing, the hospital will increase its scope of services to support the ongoing effort to prevent avoidable blindness and successfully integrate the patient into society. The unit will be key in supporting the hospital to generate income that will support the secondary eye unit (SEU) activities. The retina unit also has a laser and OCT room equipped with all the necessary medical equipment. The unit will provide much-needed retina services to the community.

The All Africa Leprosy Rehabilitation and Training Centre (ALERT) is a medical facility in Addis Ababa. The hospital has a high-volume SEU, providing quality and inclusive eye care services for the community at the base hospital and outreach sites. Besides, the partner is conducting school eye screenings using Peek technology.

In collaborative efforts, CBM Ethiopia Country Office shared the design of the optical workshop with the CBM IEH advisor for Africa East and South, Dr Tadesse Demissie. Dr Demissie provided critical advice towards the enrichment of the unit's design. The country office closely followed the construction process to ensure the optical workshop was accessible. Ramps were constructed for the optical workshop, and the retina unit and other building accessibility processes were followed.



↑ Ribbon cutting ceremony to officially open the optical workshop and retina unit



↑ Francesco Guillette, Teamer Misganaw and Dr. Demissie in discussions during the occasion



↑ CBM staff receive a warm welcome as they arrive at the hospital opening ceremony



↑ CBM Kenya country office staff and Africa East and South staff participate in World Health day and World sight Day



CBM Health Day – Promoting the CBM Brand

CBM health day was celebrated on 18 October 2022. The Regional Office and Kenya Country office staff based in Nairobi looked forward to the CBM health day with great anticipation. A survey had been sent earlier seeking staff views on commemorating the day. This survey resulted in a series of events planned and delivered successfully under the theme ‘Wellbeing is more than the absence of illness.’

The day began with a nutritionist giving a health talk about how to care for our bodies through healthy eating. The presentation was immediately followed by a nutritious breakfast. An optometrist spoke about how to care for our eyes as part of the day’s activities.

Some staff members took part in online presentations from the Bensheim office on exercises to be done at the workplace and employee assistance programmes by CIC Insurance.

Following support from the Nairobi staff’s health insurance, three medical facilities were sent to CBM offices to allow CBM staff to undergo basic tests and

checks such as BMI, blood pressure, dental, and eye checks. Those who needed more help improving their health were referred to experts. Overall, the staff appreciated CBM’s opportunity to reflect on health, particularly how to break bad habits and live a healthier lifestyle.

Winning the “CBM Got Talent Show” dance competition against six other CBM offices was the icing on the cake. Even though the Kenya Country Office won, we recognise and appreciate the efforts of the other CBM teams, who demonstrated a wide range of talent. The dance competition was well received, and the staff had a great time practising. Staff worked together to develop various ideas to be incorporated into the dance, demonstrating teamwork.

The staff praised CBM for organising the events, which clearly demonstrated that CBM is concerned about staff wellbeing.

We look forward to a healthy team working in a healthy environment.

Celebrating International Days of Persons with Disabilities in Rwanda

CBM Rwanda Country Office joined the rest of the world on 3 December 2022 to commemorate the International Day of Persons with Disabilities (IDPD) in solidarity with persons with disabilities in Rwanda. The day was recognized as a special day to advocate for the rights and needs of persons with disabilities in Rwanda.

Rwanda has made progressive steps in ensuring that people with disabilities are included in the country's development. In 2021, Rwanda adopted a national policy to help and ensure that persons with disabilities enjoy their human rights, full inclusion in society and equal participation in the country's transformation agenda.

CBM in Rwanda is partnering with various organizations of people with disabilities, churches and the Government of Rwanda to support persons with disabilities toward their self-reliance, independence and building an inclusive society.

For CBM Rwanda Country Office, the International Day of People with Disabilities is a great opportunity to celebrate achievements in reducing the prevalence of diseases which cause impairments and minimize the conditions which lead to disabilities.



↑ CBM Rwanda staff participate in International Day of Persons with Disabilities



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