

Blog for February 2025

Hey hey, I bet you all thought I had forgotten about you..... Well I have not. I am VERY much aware of all of your brilliant and constant support and both me and Jim (and the Gambians who benefit) are very mindful and thankful for your kindness and generosity. As you will recall the last you heard from me was my whinging about how hard it was to get all that gear to The Gambia. It arrived in late July to some jubilation..... And undamaged.... to our absolute relief. It is impossible to insure!



Some more slit lamps .....

AND.....Three visual field analysers  
The First to be owned by the  
National Eye Health Programme!



All of the items were duly distributed. All of the out of date consumables to Alhagie Camara at his Sami Institute of Nursing. All of the beautiful clothes to The Glove Project and to the GOVI School for the blind and of course all of the ophthalmic gear and tools to Kanifing to be sorted and distributed. Phew!

We have so many photographs I do wish I could put them here..... smiling kids and thrilled/gleeful eye health operatives.....

We have been fortunate once more to receive a very generous donation from the wonderful Kitchen Table Charity Trust developed by John Humphreys who used to read out the BBC news and compere Mastermind.

Jim and I decided that we would escape the dreadful weather and world problems and once again visit The Gambia. We felt we could not justify the expense in 2024 because we had two planned holidays, so we devised a plan whereby we could go once again, and witness first-hand the amazing work carried out in CAC's name.

Plans were laid for us to see a full eye health 'screening,' something we **had not** witnessed first hand before, in spite of it becoming a very integral and important part of what we do. We know that the eye team very much appreciate being able to go out into the country to check on the eye health of villagers. We have been told that since Sight Savers left The Gambia in 2014 little had been done to continue to monitor eye health outside of the main hospital and health outposts around the country. As I have said before simple eye complaints such as conjunctivitis and dry eye can be simply treated and avoided if sufficient information and very inexpensive medication can be issued. Remember conjunctivitis, if not prevented, can result in serious short sightedness resulting in the need for glasses. Simply not affordable for most Gambians especially if the child is female! (Grhhhh) Several times we have been told that screenings are just as important as cataract surgery!! Prevention is better than cure and all that.

We left the UK on 20th January and returned on 12th of February. We had a very interesting and varied time. We visited the main eye hospital and saw our newly imported gear at work, and some of the very grateful operatives. The plan was to go up to Bansang in the Central River Region to witness the first of several screenings, followed by the necessary cataract ops. The screening that we attended was in Galleh Manda.

We stayed in a lodge in Bansang, a town close to the river. Our journey to Galleh manda for the screening, made us understand just how difficult it must be for the staff at Bansang Hospital to make such a visit. We travelled about 15km along the main road and then left the road to travel for a further 7km along a track, seriously 7km. When we got there, I was staggered to see there was electricity and evidence of lots of boreholes. There were many, many wandering animals, cows, goats, chickens and a few horses obviously used to pull carts and to transport goods to and from the town. The houses were traditionally built and there seemed to be quite a few. The main building of the town was a huge covered but open air area as we have seen before, and it was here that so many villagers had begun to collect to be examined.

Many of the team were there already opening the cases of medication that CAC had paid for, getting the screening materials together and displaying our Cataract banner which we like dedicated to the main donor for a project, plus the date so that we can be as authentic as possible to dispel doubts that there inevitably are about 'working in Africa!!'



I had taken some 'minties' (the name they give to sweets) with me. All Gambians seem to have a very sweet tooth and in spite of my Englishness..... care for teeth and all of that I purchased quite a few bags. It made me very popular! I did know that there would be lots and lots of children.

There were. Many of them suffering from conjunctivitis or sticky eye! The age range of the people turning up was wide, from newborns to the very elderly. The team, having done it before, had a good system going. Older people who were likely to have cataracts were seen first. The people queueing sat on benches and moved along one by one as they were processed by the team. All patients carried a piece of paper with their details, and later the details of their diagnosis or medication on it which stayed with them.

We witnessed the initial acuity test using what is called the 'tumbling E' chart. The individual is required to show the direction of the legs of the E. It was shocking how many could not see past the third row down. In particular I watched two very young people with apparently no real vision. A young lad about 12 and a really beautiful young girl of about 20, who could not see *any of the letters*, nor CF (count fingers in front of her face). She could only see hand movements in front of her face (HM) with one eye and could only perceive light (PL) and dark with the other. Finally the surgeon, Ebrima Jadama, shone his phone light into her eyes, one at a time, looking for a reaction, and when he got a response he actually smiled. I cried!



It is quite apparent that, without **what we are all doing**, she would stay remain blind! She may anyway but we will follow this up for sure once we get the report from the screenings. We only witnessed eye health screenings in one of the four villages to be visited that week. A huge amount of work, the population of Galleh Manda alone is 5,000. We are old now; Jim keeps telling everyone he is 78.... I do not comment; witnessing this is exhausting as well as very emotional.

In due course we will be sent a report as usual which we will publish on our website. We and the NEHP are making plans for bringing the complicated cases up to Kanifing. We know that if we do not pay the cost of this, these patients will never receive the treatment that they need.

We had other business in The Gambia, we had some beautiful lovingly handmade clothing to distribute and we wanted to visit the newly established Sami Nursing Institute in Abuko.

You will probably remember our old colleague from Friends of The Gambia days, Alhagie Camara, who had strived over many years and finally achieved his goal of establishing a new (badly needed) nursing college. Jim and I had always believed he would do it. However, it was a very, very long hard slog. We helped a bit on the way. Jim is very good with spread sheets and complicated (for me) things like cost analysis stuff. Because of my background working in a British University and teaching nurses and human resource management, we were able to offer a bit of advice; but really and honestly, mainly encouragement. It was such a big ask for him and such a big, big dream. We promised that we would visit.

We took a taxi up to the Institute, and picked up a very smartly dress young nurse on the track, who showed us exactly where it was. Alhagie was there to greet us with another friend from our FoTGA days, Modou Camara. We told the driver we would be about an hour. WELL..... In fact we had been sort of kidnapped..... As we walked across the grounds it was obvious something was afoot.



Meeting the team and then ... over  
200 students and staff!!  
We were guests of honour.



It was such a big surprise. There were two fabulous celebration cakes, champagne type drinks and of course speeches. UGH! I had to do it though.....

We had a simply marvellous time, we listened to the speeches, ate and drank royally, and learned that in such a celebration the guests are hand fed cake!



There was entertainment of all sorts including a well scripted play acting out the dire need there to **not** overprescribe antibiotics. It was a comedy with an ailing old man who had a headache demanding antibiotics and his daughter explaining why they would not help him, nor would they administer them. There were musical chairs but I was not invited to play! There was dancing and the atmosphere was wonderful.

It really was a magical afternoon completed by a tour of the site and the teaching rooms. Though not yet in its finished state non the less really impressive. We feel rather proud of our part in this!

As you can see, we had a varied and rewarding trip. Our thanks goes to all of you who support our eye health programme so well. I have actually saved the very best until last!!

To date

CAC has paid for:

Nearly 1500 cataract operations

AND

Fifteen eye health community screenings

AND

Because of our efforts to obtain and transport ophthalmic  
equipment to The Gambia,

the National Eye Health Programme

have been able to open

TWO new secondary eye health units!

One in Brufut and the other in Bundum

This is a really big win.

THANK YOU