



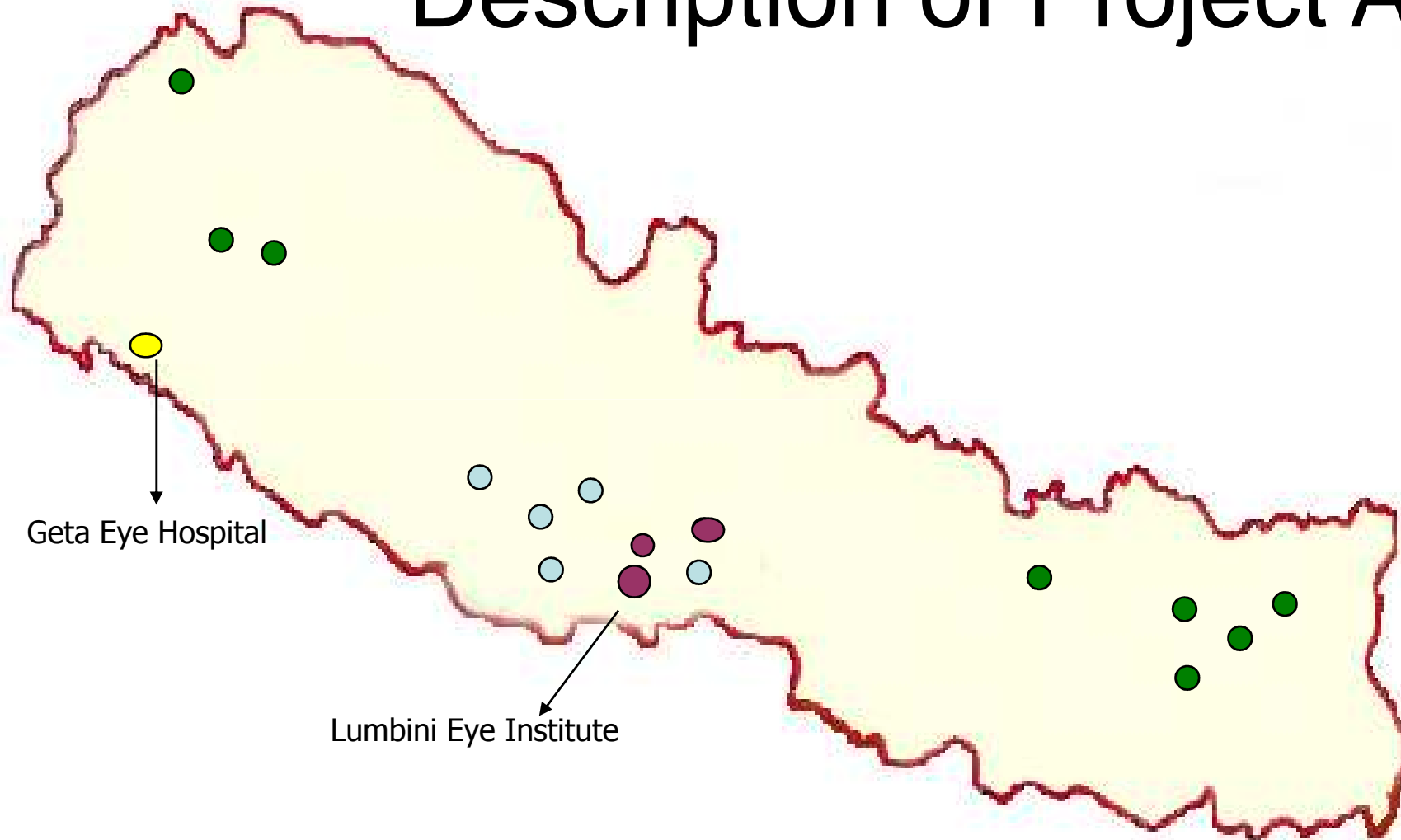
Greetings



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Description of Project Area



Map of Nepal



Overall Goal

*Increase the **detection, treatment & follow up** of children with **vision problems**, with an emphasis on **little girls & children in isolated communities.***



Methodology/Project Approaches (1)

- **Involving people:**

Training to the community

- (a) Female Community Health Volunteers
- (b) Traditional Healers
- (c) School teachers
- (d) Drug Retailers
- (e) H.P In-charges

- **Developing referral mechanisms:**

- Community to PECC/secondary hospital
- Secondary hospital to Lumbini Eye Institute



Methodology (2)

- **Early detection and treatment:**
 - (a) School screening
 - (b) DST camps
 - (c) Pediatric screening camps
 - (d) House to house visits
- **Service Delivery:**
 - (a) Surgery (fees for patients who can afford it; free for those who cannot afford it)
 - (b) Medical treatment as per the need
 - (c) Spectacle provision (free for patients who cannot pay)



Methodology (3)

- **Counseling** :

Counseling by trained pediatric counselor to each patient/guardian to accept services and ensure appropriate use of medicine, adherence to instructions.

- **Follow up**:

Remind patients about follow up and encourage to come in time for follow up



Targets vs. achievements

Activities	2 Year Targets	Achievements (till Sep 2009)
Screen children		
1) Children examined at school	75,000	70,963
2) Children examined at partner hospitals	50,000	36,842
3) Door to door screening in small communities	13,000	1,027
Pediatric surgery	2,300	1,243
Year 1: -75% operated children have VA better than 6/18 -60% children receive at least 1 post op exam within 3 months		39% have VA better than 6/18 89% received follow up



Activities	2 Year Targets	Achievements (till Sep 2009)	
Free glasses	2200	1755	
Public awareness program		FCHV training: 464 Drug retailer training:151 Traditional healer training: 81 Teachers training: 518	
Conduct workshops & attend international workshops to share knowledge		1 pediatric workshop	



Barriers and Strategies

- Low level of awareness (due to illiteracy and lack of knowledge)
- Cultural
- Poorly developed road/transport and communication
- Grassroots level training helped a lot to overcome cultural and knowledge barriers
- Whole family approach helps to educate parents and increase follow up



Conclusions

- School screening and house to house visits by field workers are two of the most effective mechanisms for the early detection and treatment of children.
- Grassroots level training (especially for Female Community Health Volunteers) is vital to break down barriers and increase uptake of services.



Thank you!

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