EYE HEALTH AFRICA CIC

LAUNCH

2nd EDITION

Saturday 2020 28th NOVEMBER

Your Eye Health Matters to Us
Eye Health Africa, was founded by Miss Primrose Magala, a British Senior Ophthalmic Nurse at London’s famous Moorfields Eye Hospital. She is also the author of ‘The Eye Opener’.

Eye Health Africa CIC is powered by health professionals passionate about delivering high quality ophthalmologic care across the continent of Africa.

The ultimate goal of Eye Health Africa is to create long term and sustainable ophthalmic institutions in Africa, to allow each country to deliver world class eye care for themselves. They do this by advocating for aid and partnership with local and international organisations. The organisation aims to share and exchange knowledge, and transfer practical skills to support the urgent need to build capacity for eye care services in Africa.

“Share your knowledge. It’s a way to achieve immortality”.
– Dalai Lama

SERVICES
Eye Health Africa CIC provides a wide range of services.

- We provide training for health professionals.
- We host eye health camps.
- Our team is composed of world class ophthalmologists and specialist nurses.
- We donate state of the art equipment to help health professionals screen their population.
- We aim to train professionals that express their interest in screening and those that are keen to enhance their knowledge on the subject area.
WHO WE ARE

Eye Health Africa CIC was founded by Miss Primrose Magala, a British Senior Ophthalmic Nurse at London’s famous Moorfields Eye Hospital. And also, author of ‘The Eye Opener’. Her dream was and still is; advocating for aid and partnership with local and international organisations towards providing affordable ophthalmologic care in Africa. The first outreach Eye Camp was conducted in Uganda in 2017, her and her team were approached by various organisations to have the same initiative in their own countries. This was the birth of Eye Health Africa.

The same team with the same dream, but with a bigger goal.

OUR MISSION

Working Together for Healthy Eyes and Healthy Lives!

OUR VISION

All the countries in Africa to have specialist ophthalmology services

OUR AIM

To support eye Health care services in Africa, to reduce the prevalence of preventable blindness and as a result empower individuals and communities.
WHAT WE DO

The estimated global prevalence of blindness is approximately 39 million people, one in 200. Approximately 246 million people are visually impaired, with staggering implications not just on their quality of life but on the wider economy.

Many of the pathologies that lead to blindness can be treated. Furthermore, appropriate therapies if instigated early can prevent blindness and visual impairment.

Through shared learning and co-development platforms such as Uganda UK Health Alliance (UUKHA), Eye Health Consortium, and public-private partnerships, and working with affiliated organisations including charities, Vision 2020 and International Agency for Prevention of Blindness (IAPB), the Eye Health Africa project aims to treat sight and life threatening ocular conditions (e.g. retinoblastoma), and give hope to many, especially to vulnerable children and those in rural communities where there is currently no access to eye health services.

Eye Health Africa aims to share knowledge and exchange and transfer skills to support the urgent need to build capacity for eye care services in Africa.

With this aim in mind and with support from all African Governments and people, our proposed solution is annual Education Eye Camps and creation of Eye Institutes in each African country.

These will model themselves on global centres of ophthalmic centres of excellence like Moorfields Eye Hospital (MEH), London, United Kingdom to provide world-class ophthalmic treatment along with excellent teaching and training to Africa wide eye care practitioners.

As a substantial amount of ophthalmic disease is refractive in nature (i.e. myopia, presbyopia, amblyopia etc), there is need for a strong Optometric team in Africa.

To achieve the above, the Eye Health Africa team will continue to work with world renowned institutions such as Moorfields, coupled with support via V2020, and other humanitarian organisations.

Eye Health Africa team is grateful to everyone who has contributed to our efforts, and for the continued support.
The Strategic Pillar of Eye Health Africa CIC

James Gleick in his book called “Chaos” the concept known as “The Butterfly Effect” was described as “The flaps of a butterfly in Rio de Janeiro can cause a tropical storm in New York”.

In the period 2019 to 2020, witnessed the devastating effects of a small virus codenamed Covid-19. This small virus that was reported in China totally changed the seemingly “orderly” ways of many socio-economic and political entities, into “turbulent” and “chaotic” systems.

Creating a new Social Enterprise in 2020, can seem to be overly ambitious. But that’s what Miss Primrose Magala and the Eye Health Africa just did. Not only did they focus trying to achieve success, they aimed for Viability.

A social healthcare enterprise can be viewed as a Viable System within the community and the business environment. Viable systems are a part of the third order cybernetic systems of coherent social organizations that survive dynamically through processes of anticipation and adaptability. Dynamic systems are affected by chaos and complexity. Chaos and Complexity Theories may provide pathways to viability in the healthcare industry on the edge of chaos.

It is on the “edge or boundary of chaos” where the greatest creativity occurs, said Miss Primrose Magala, the Founder of Eye Health Africa. Therefore, the EHA Team adopted the Viable Systems Model approach “on the edge of chaos” to provide the competitive advantage within the turbulent healthcare industry and in the African Continent.

A “Viable Eye Health System” can be seen as an upside down tree, with leaves, connected to small branches, then connected to bigger branches, then to the tree trunk, making it a big tree. A leaf would not survive without the branches. In Systems Theory these small similar structures are called fractals, like a fern of a Christmas tree. Therefore, each leaf is a key member of the System, so every person or entity including companies, charities, hospitals and governmental or civic entities are key to the total Goals of the Eye Health System.

Eye Health Africa CIC has created Partnerships and Collaborations with individuals, companies, charities and organisations to achieve a dynamic, sensitive and comprehensive approach to eye healthcare in Africa. When analysed further, the individual Partners and Entities may appear to be doing different tasks. They may appear as to be working differently on different pathways that seem unrelated. But when observed strategically from a distance through the long lenses of Eye Health Africa, these Partners’ activities would show that they are working towards a common goal. These Collaborations collectively contribute to the success of the whole system, as described by the “Butterfly Effect”.

**EHA – 5 YEAR STRATEGY**

1. **EYE HEALTHCARE**
   - Eye Health Screenings + Treatments
   - Annual Eye Camps
   - Community & Outreach activities
   - Mobile Clinics
   - Telemedicine

2. **WORKFORCE**
   - Partnerships
   - Collaborations
   - Clinical Skills Exchange Programs
   - Leadership Programs
   - Mentorship Programs

3. **EDUCATION**
   - Education and Training
   - Scholarships
   - Fellowships
   - Continual Professional Development

4. **CENTRES OF EXCELLENCE**
   - Establish Centres of Eye Excellence in Africa

From the EHA Strategy
Morris Kusotera – Director Strategy and Development
strategy@eyehealthafrica.org
MEET OUR TEAM

Ms Primrose Magala
Founder and Chief Executive Officer

Mr Morris Kusotera
Director and Head of strategy and development

Ms Peninah Wampamba
Director and Corporate Secretary

Mr Ian Yeung MA FRCOphth
Global Clinical Director

Mr Musa Sanyang
Nursing Clinical Lead
Primrose is a British Nurse Practitioner at the world-renowned Moorfields Eye Hospital, in London.

With a passion for Africa’s marginalised and vulnerable, Primrose has Ugandan heritage.

Primrose is the Interim Vice President Uganda Nurses and Midwives Association UK (UNMA-UK).

Having made a career change from a corporate background, following a life changing experience a few years ago, this inspired her to pursue a career in healthcare and specialise in ophthalmology.

Ophthalmology remains a neglected discipline in Sub-Saharan Africa. However, thanks to emerging global Sustainable Development initiatives, and collaborative partnerships, EHA has been established as one of them, a great platform which will enable positive and sustainable healthcare transformation in Africa.

Eye Health is now a global concern and it is being recognised as an essential health-care need, for millions, especially children with visual impairment.

Primrose’s vision is to work with other partners via an Africa wide Eye Health Consortium platform, and under the steering leadership of recognised, organisation models like UUKHA, to establish Centres of Excellence and Eye Health Institutes in Africa, so that everyone has access to eye care.

This will also mean that no one will have to leave the Continent to access these essential health services.

It is no longer a matter of, let someone else do it, but rather, let us do something about it together. Let us work together to utilise all available resources to maximum potential.

*Working Together for Healthy Eyes and Healthy Lives!*

Please Partner with us so that we can all work together to develop effective Eye Health systems in Africa.
She is a holder of a Bachelor of Science in Children’s and Young People’s nursing and is a practicing Neonatal Intensive care nurse. Her passion is global health, especially maternal and infant health.

Spending four weeks on a Neonatal intensive care unit in Fort Portal on an exchange programme gave her the initial exposure to global health that she needed. It served to emphasise the importance of collaborative work between the developed countries and developing countries.

She held the title of Miss Uganda UK 2018/19 and is currently a young Nurse Leader representing Uganda globally. This platform has enabled her to participate in raising the profile of nurses both here in the United Kingdom and back in her home country Uganda and also promote health and well-being.

She (or Penni) is a member/one of the Nightingale Challenge, Young Nursing and Midwifery Leaders from around the World. Inspiring professionalism, new ideas, solutions, support, encouragement and motivation during the WHO 2020 International Year of the Nurses & Midwives, especially now with the ongoing COVID challenges.

Working Together for Healthy Eyes and Healthy Lives!
Mr. MORRIS KUSOTERA

Morrise has over 18-years’ experience of working in the United Kingdom and also in the islands of Alderney and Guernsey both located in the Channel Islands.

Morrise worked in healthcare delivery and service improvement within the British National Health Service (NHS), the Public, Palliative, Prison and Private sectors.

Morrise is a viable systems strategist that manages projects through Polarprojects a dedicated service for Individuals, Companies and Charities. In one of his popular illustrations of managing a social healthcare organisation, Morris applied concepts in chaos and complexity sciences, organizational modelling and Stafford Beer’s Viable System Model to create efficient healthcare processes.

Academically and professionally, Morris has an Executive MBA in Health Services Management from the University of Hull, a BSC Honours in Statistics, a Higher National Diploma in General Nursing from the University Brighton, and other certifications including the PRINCE2 (Projects in Controlled Environments Version2).

A previous airline statistician and planner, Morris has certificates in airline planning, airline finance and aircraft economics.

Morris is a previous member of Spectrum CIC’s Council of Shareholders where he shared his knowledge and experience in shaping up Prison Healthcare Processes in the early years of the Spectrum Community Interest Company.

Morris is also accredited as the principal Co-Project Lead in the conceptualisation of the social enterprise that took over closed school premises worth £2-million in Yorkshire, England through a Local Council transfer sale 125-year Lease at a peppercorn price of £1 and turned the assets into a community business centre, and in the process earning the title of “the biggest Community Asset Transfer in Europe”.

Morris is also a Mentor for the London’s King College - India Mentorship program where he mentors international Indian Students. He is also the Chairperson of the newly formed Prison Health Focus, a dedicated coaching and mentorship service for prison health professionals.

Morris is an avid chess player and enjoys travelling.

When asked what is his ultimate dream job, Morris said “ an agricultural farmer, hatching my own chickens in Fort Portal, Uganda ”.
On a day-to-day basis, Ian is a Global Clinical Director responsible for teaching, research, clinical trials and NHS duties within the Medical Retina & Uveitis Services at Moorfields Eye Hospital NHS Foundation Trust.

His sub-specialty training includes fellowships in ophthalmic pathology, uveitis and retina from supervisors at the National Institutes of Health (NIH, USA), Moorfields Eye Hospital NHS Foundation Trust (London, England) and Hong Kong University.

Ian has worked as an Ophthalmologist in the United Kingdom, Hong Kong, USA, Uganda, Zambia and Liberia.

Ian’s graduated from Oxford University, UK in 1999 with an undergraduate degree in Physiological Sciences. Ian graduated from Cambridge University, UK in 2002 with a post-graduate degree in Clinical Medicine. Ian is a Fellow of the Royal College of Ophthalmologists (FRCOphth).

Ian’s sub-specialty interests are in uveitis & medical retina.
Nursing Clinical Lead

BSc (hons) Nursing | MSc Advanced Practice

Mr Musa Sanyang

Musa Sanyang is an Advanced Nurse practitioner, a Practice Educator and Clinical nurse Leader for Moorfields North Directorate. MR Sanyang completed a BSc Nursing degree (Ophthalmology) at City University and a Post Graduate certificate in Ophthalmology. He is currently completing an MSc Advanced Practice at Middlesex university in London.

He won the Chairman’s award for outstanding contribution to Moorfields Eye Hospital in February 2016 for his outstanding leadership and his contribution in advancing nurse led clinics and improving patient experience.

He is an AMD and Glaucoma Nurse Specialist who conducted over 2000 intravitreal injections and Yag laser capsulotomies.

His interests include patient education in Glaucoma Management and AMD and have a special interest in Certification of patient with vision impairment.

He has participated and presented in many international conference including Shanghai international nurses conference 2019 on the role of advanced Nurse in Ophthalmology in the UK

Working Together for Healthy Eyes and Healthy Lives!
The Eye Health Africa CIC was a transformation of the original successful project Eye Health Uganda.

The seed of Eye Health Africa was sown by these amazing Achievers:

**AMBASSADOR JULIUS PETER MOTO**
High Commissioner of Uganda in UK & Ireland.

**LORD DOLAR POPAT**
Member of the House of Lords (UK)

**PROFESSOR LYNDON da CRUZ**
Consultant Retinal Surgeon and Head of Department of Vitreo-retinal Surgery at Moorfields Eye Hospital

**LORD SHEIK**
Member of the House of Lords (UK)

**PROFESSOR GED BYRNE**
Consultant Surgeon and Director of Global Engagement at Health Education England

**MOSES MULIMIRA**
Advisor Global Health

**Dr ANDREW SSEKITOOLEKO**
Executive Director and Practicing Family Physician at Lubaga Hospital

**Dr ZIMAR SIVARDEEN**
Commonwealth Future Chairman
H.E. Julius Peter Moto is the High Commissioner of Uganda in UK & Ireland. He is the Head of Uganda High Commission, London.

Ambassador Moto assumed his post in London on the 1st September 2017. He presented his letters of credence to Her Majesty Queen Elizabeth II, during a private audience at the Buckingham Palace on 1st November 2017 in London, United Kingdom.

He also presented his letters of credence to the President of Ireland, H.E Michael D. Higgins at Áras, an Uachtaráin (Presidential House), Dublin on 6th December 2018. Ambassador Moto joined the Ministry of Foreign Affairs of Uganda in 2012, following an appointment into the Foreign Service by the President of Uganda, H.E. General Yoweri K Museveni.

He served as Uganda’s High Commissioner to Pretoria from July 2013 to April 2017. While at Pretoria Mission, his tour of duty covered the Republics of Botswana, Namibia, Zimbabwe and the Royal Kingdoms of Swaziland and Lesotho.

Prior to his appointment to the Foreign Service of Uganda, Amb Moto worked extensively in the business and NGO sectors of Uganda and East Africa from 1993 - 2012. He served as the Program Manager with a relief and economic recovery project under USAID/World Concern Project in South Sudan from 2011 to August 2012.

He worked as an International Trade Policy Program Officer at the Eastern African Farmers Organisation based in Nairobi from 2006-2008 where he trained farmers on regional organisation and sensitised farmers on trade policies like the EU’s Economic Partnership Agreements, the US’s AGOA, the COMESA PTA protocols based in Lusaka-Zambia.

He served as Marketing Manager, Projects Director, and Chief Executive Officer for large private sector driven NGOs and organisations in Uganda, notably Northern Uganda Manufacturers Association, Uganda National Farmers Federation, Private Sector Foundation of Uganda, Mid-North Private Sector Development Company Ltd, and Chamber of Commerce Lira Branch.

Born on 9th November 1966, Ambassador Moto holds a Bachelors of Arts degree in Economics from Makerere University Kampala, and a Masters of Business Administration from Makerere University Business School, Kampala, Uganda.
Lord Dolar Popat, is a British accountant, businessman and Conservative life peer in the House of Lords. Originally born in Tororo, Uganda, he moved to the UK in 1971 at the age of 17, a year before the expulsion of many Indians from Uganda.

Popat sponsored himself through school and led himself to a career to be a CIMA qualified Accountant in the late 1970s, specialising in business and corporate finance. He diversified into the healthcare sector in the late 1980s and the hospitality sector in the late 1990s in the UK.

In 2009 Lord Popat was honoured with an award at the Asian Political and Public Life Awards at the House of Commons by the Conservative Party’s then Chairman, Eric Pickles MP, for promoting the Conservative Party in the community.

In May, 2010 it was announced that he would be ennobled on the recommendation of David Cameron, for his services to small and medium-sized businesses and to the wider community. He was created a life peer on 10 July 2010 taking the title Baron Popat of Harrow in the London Borough of Harrow.

He was the first Chairman of the Conservative Friends of India, an organisation launched by the then Prime Minister, David Cameron in April 2012.

Lord Popat was appointed a Government Whip and Minister of the Crown in January 2013, succeeding Viscount Younger of Leckie leading to being appointed Lord-in-Waiting.

From January 2013 to March 2015 he served as a Minister of the Crown at the Department of Business, Innovation and Skills, and the Department for Transport. He was subsequently appointed as the Prime Minister’s Trade Envoy to Rwanda and Uganda in January 2016.

On 16 July 2019, Lord Popat unveiled his autobiography, “A British Subject: How to Make It as an Immigrant in the Best Country in the World”

Lord Popat is an advocate of community cohesion and the importance of reconciling and uniting different cultures under the UK’s central democratic process.

Popat has advocated for enterprises, hard work and social responsibility, values he claims are intrinsic in the African and Indian Diaspora. He has worked to bridge the gap between the Diaspora and their African Countries and for their mutual benefit, from a deeper and sustained engagement and understanding.

In the charity sector, Lord Popat is on the board of the St Luke’s Hospice in Harrow, London and his eponymous Lord Dolar Popat Foundation, which makes contributions to medical and educational institutions.

Lord Popat was instrumental in the conceptualisation, formation, support and fundraising of Eye Health Uganda the predecessor of Eye Health Africa CIC. Lord Popat ensured that the eye camps were successful through positively lobbying stakeholders as the concept was announced and debated. As Eye Health Africa CIC is launched it is from African high achievers like Lord Popat, that the young people of Africa model themselves to be.
Professor Lyndon da Cruz  
Guest of Honour / Speaker  
Consultant Lead EHA  
Consultant Retinal Surgeon  
Head of Department Vitreoretinal Surgery Moorfields

Professor Lyndon da Cruz is Consultant Retinal Surgeon and Head of Department of Vitreo-retinal surgery at Moorfields Eye Hospital; Professor of Retinal and Stem Cell Transplantation, UCL; Hon. Professor of Biomedical Engineering at Kings College, London. He completed his PhD in Retinal Gene therapy at the University of Western Australia on an NHMRC medical Scholarship, his post-doc fellowship on the Royal Society Howard Florey fellowship and was named the Menzies scholar for Australia in 2000 (declined).

He has worked in innovative research for the treatment of blinding retinal conditions since 1990 including implanting the first prosthetic retina (bionic eye) in Britain (2008) and the first-in-man delivery of a stem cell derived retinal pigment epithelial sheet for macular degeneration that he has co-developed (2015). For his research he has been awarded The Ruskell Medal by the Worshipful company of Spectacle Makers (2018); The Alan Alderman award from the Macular disease Society (2018); The Denuncio medal from The Society of Ophthalmic Professors, Italy (2016); The Harold Ridley Medal, The Ridley Foundation (2014); The Gulstrand Medal from the Swedish National Ophthalmic Society (2010).

Professor Lyndon da Cruz co-founded The London Project, to create new stem cell treatments for blinding retinal conditions. The project realises the need for large scale multidisciplinary teams of stem cell scientists, surgeons and engineers to solve the problems of tissue manufacture, understanding of disease treatment points and reliable delivery of the therapeutic element. He continues clinical work in retinal disease clinics while developing new surgical techniques and therapies for untreatable retinal diseases.
Lord Sheikh was born in Kenya and brought up in Uganda. His family originated from Punjab.

Lord Sheikh has been honored by the presentation of several personal awards which have been given to him for his achievements, leadership, business and community work. He has also been awarded an honorary doctorate for Humanitarian work which he undertakes.

Lord Sheikh was elevated to the House of Lords in 2006. He is an active Peer and speaks regularly in the House of Lords on a variety of subjects. He has travelled extensively overseas and visited a number of countries and at present works towards expanding trade between the United Kingdom and overseas countries.

He is the Chairman of companies relating to Property and other businesses.
PROFESSOR GED BYRNE is a Consultant Surgeon and director of global engagement at Health Education England.

Professor Byrne is responsible for the enhancement of the NHS workforce through engagement with countries within and outside the EEA.

He is a Professor of Medical Education at the UoM, an honorary Professor of Health Sciences at the University of Salford and was awarded a National Teaching Fellowship by the Higher Education Academy.

In his roles as director of Education and Quality for Health Education North West and director of Education and Quality for HEE North, he has led nationally for HEE on population health and prevention, patient safety and academic development.

He has a long-standing interest in global healthcare capacity building and education, leading the development of the GuluMan healthcare link and is the founder director of the Uganda-UK Healthcare Alliance.

He passionately believes that education must be globalised for all NHS staff if they are to offer a fit for purpose role in the future of healthcare in the UK. He was awarded an MBE in the Queens Birthday Honours in 2019 for global and medical education.
Moses Mulimira is a Global Health Consultant with Health Education England and an Advisory Group Member with NIHR Global Health Research Group - the WHO Collaborating Centre for Mental Health Service Development Queen Mary University of London. He is also a Substance Related and Addictive Disorders Clinician with the Oxleas NHS Foundation Trust (London).

He holds a BSc (Hons) Health Psychology and Health Sciences, from the University of Essex; an MSc. Mental Health (Transcultural Mental Healthcare) from Queen Mary University of London; an MSc. Clinical & Public Health Aspects of Addiction from King's College London; and is postgraduate student in Health Research at Centre of Evidence Based Medicine at the University of Oxford.

Moses is also the Director and Co-Founder of Uganda Diaspora Health Foundation. Moses is the UK Lead of The Uganda-UK Health Alliance, under whose auspices, the Uganda-UK Healthcare Forum and the UK-Africa Healthcare Summit are run. The Alliance is Co-chaired by Professor Ged Byrne MBE (Director Of Global Engagement at Health Education England and Dr Diana Atwiine (Permanent Secretary, Ministry of Health Uganda).

The Uganda-UK Health Alliance is an umbrella Organization created to coordinate and galvanise the large number of UK based Institutions, organizations and individuals actively engaged in healthcare capacity building activities, mainly in Uganda and continues to champion and facilitate co-operation and interaction in healthcare provision between the two countries.

The Alliance has identified a number of priority areas including public health, quality and safety, educational development and placements, leadership and research collaboration and has over the years set up systems and processes to support communication, shared learning and logistics, product development and supported capacity building in tandem with national strategic priorities of both the UK and Uganda.

Suffice to say, Moses is very hands on and passionate about Global Health, especially in so far as it affects the UK and the African Continent. He brings over 12 years’ invaluable experience in the healthcare space both in the UK and Africa.

Moses was instrumental in sowing the seed of Eye Health Africa, tending the new shoots and giving strategic leadership.
Dr. Andrew Ssekittooleko is the Executive Director and a practicing Family Physician at Lubaga Hospital, he completed his specialization training in Family Medicine at Stellenbosch University in South Africa in 2012.

He graduated from Mbarara University of Science and Technology with a Bachelor Medicine and Surgery.

He has practiced in some of the leading private hospitals in Uganda including International Hospital Kampala and Nsambya Hospital and sits on a number of hospital boards.

He is a member of the National Taskforce for Emergency Medicine and serves on the EMS sub-pillar of the Covid-19 Response Team in Uganda.

Dr. Andrew has a passion for health systems strengthening especially in emergency medical services and for the advancement of nursing practice in Uganda, he currently works closely with international and local partners to promote both areas.

Dr. Andrew enjoys nature walks and travelling.
Dr. Zimar Sivardeen is an eyecare specialist with a strong clinical, educational and research background, devoting over 25 years to optometry.

Zimar accepted the position of Honorary Research Fellow at Aston University, developing novel ideas on multifocal contact lenses and dry eyes. He has further diversified his research to include branding and international marketing. He has authored peer-reviewed articles published in international industry leading journals. The British Contact Lens Association, College of Optometrists, the European Academy of Optometry and Optics and the Higher Education Academy have awarded their Fellowships to Zimar. He works as an educationalist and academic at Portsmouth University.

As a clinical and commercial director of Specsavers Opticians and Chairman of the Local Optical Committee in Kingston, Richmond and Twickenham, he has been instrumental in bringing the multi-disciplines of the healthcare profession together in the local community.

Elected as Chairman of Commonwealth Future, Zimar has enhanced and strengthened diplomatic links throughout the Commonwealth countries in “Eye care and correctable vision.”

Under his leadership Commonwealth Future launched its campaign, “Eye care through reading.” This strategy recognises the importance of sight across the Commonwealth and the intertwined roles of education, reading and vision. Since its foundation, the association has sought to engage with international parties within the Commonwealth and develop initiatives to share professional knowledge and innovative ideas for improving eye care.
Eye Health Education, Skills exchange and Capacity Building.

Time: 1000hrs - 1300hrs UK Time

Registration Link: https://bit.ly/3dkC9GF
Eye Health Africa CIC a community interest company registered in England and Wales, Company number 12480431

LIVE ON ZOOM &

28th SATURDAY NOVEMBER

THEME: Eye Health Education, skills exchange and capacity building

TIME: 1000hrs - 1300hrs UK Time

SPEAKERS

Professor Lyndon da Cruz
Primrose Magala
Peninah Wampamba
Morris Kusotera
Simon Day
Lyndon da Cruz
Primrose Magala
Peninah Wampamba
Morris Kusotera
Simon Day

Dr Simon Arunga
Dr Andrew Sekitooleko
Dr Ian Yeung Ma FRCOphth
Dr Marko Lukic
Dr Denis Erima
Dr Simon Arunga
Dr Andrew Sekitooleko
Dr Ian Yeung Ma FRCOphth
Dr Marko Lukic
Dr Denis Erima

Dr Paula Gatsey - Atabuzi
Winfred Nakamanya
Elizabeth Pearson
Musa Sanyang
Dr Paula Gatsey - Atabuzi
Winfred Nakamanya
Elizabeth Pearson
Musa Sanyang

Dr Kaveh Vahdani
Winfred Nakamanya
Elizabeth Pearson
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Elizabeth Pearson
Musa Sanyang

Molemisi Kono
Sebastian Waiswa
Ronald Kamoga
Mrs Denise Ead
Molemisi Kono
Sebastian Waiswa
Ronald Kamoga
Mrs Denise Ead

Ismael Kato
Keynote Speaker
Ismael Kato
Keynote Speaker

Partners and Supporters

AMBASSADOR JULIUS PETER MOTO
HIGH COMMISSIONER OF UGANDA IN UK & IRELAND

AMBOSSADOR JULIUS PETER MOTO
HIGH COMMISSIONER OF UGANDA IN UK & IRELAND

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SPEAKERS

Moderator
- Dr BOIKANYO PHENYO – Moderator (Vip - EHA)

Host - Opening
- Mr MORRIS KUSOTERA – Host & Director – Strategy and Development EHA

Key Note Speech
- H.E JULIUS PETER MOTO – High Commissioner of Uganda in UK & Ireland

Special Guest Speakers
- PROFESSOR LYNDON da CRUZ – Consultant Lead EHA – Consultant Retinal Surgeon - Head of Department Vitreoretinal Surgery Moorfields
- Mr SIMON DAY – IAPB – Vip & Stakeholder Special Guest

Tribute to Youth
- Ms PENINAH WAMPAMBA – Young Global Leaders – Director & Corporate Secretary EHA

Tribute to Marginalised
- Ms PRIMROSE MAGALA – CEO EHA

Africa’s Potential
- Dr SIMON ARUNGA – President – OSU – Member of COECSA
- Dr ANDREW SSEKITOOLEKO – CEO Lubaga Hospital
- Dr IAN YEUNG MA FRCOphth – Medical Volunteering in Africa
- Dr MARKO LUKIC – Telemedicine – Medical Retina Expert – Clinical Education EHA
- Dr DENIS ERIMA – Ophthalmologist - Lubaga Hospital
- Dr KAVEH VAHDANI – Oculoplastic – Advice For Africa Based On What He Saw / Contribution So Far
- Dr PAULA GATSEY ATABUDZI – Ghana Reading Centre

Nursing Potential
- WINFRED NAKAMANYA – Examples of Community Health
- Mrs ELIZABETH PEARSON – Knowledge Sharing Collaborations
- Mr MUSA SANYANG – Critical Role Of Advanced Nurse Practitioners

Strategic Partners
- MOLEMISI KONO – Visual Eyes Afrika-Internatonal – Habilitation and Rehabilitation Specialist

Community Engagement
- SEBASTIAN WAISWA – OPDC – Examples of Marginalisation
- Mr RONALD KAMOGA – CEFOVID – Examples of Slums Marginalisation
- Mrs DENISE EAD – Representing Helping Uganda Schools Charity their work in Uganda
- ISMAEL KATO – Plead for Health Uganda, Schools & Community Engagement.

Optometry Potential
- NICHOLAS KAGUMBA – Optometrist

CPD Education
- CRAIG FITZPATRICK – World Continuing Education Alliance - WECA
- Dr JAMES ADDY – Ghana Eye Health Lead
- Tribute Song – DANIEL NATIIGO
- Entertainment – GCOBANI SISEKELO MASUKU
Boikanyo is a lifestyle specialist: she works with people who want to improve their lifestyles. She does this through advice, support, encouragement, and guidance using holistic approach on diet & nutrition, fitness, and relaxation. She believes that it is important that you love yourself and look & feel great in everything that you do!

She is an experienced crisis counsellor: working with people who find themselves facing life crisis. Passionate about giving back to the community, Boikanyo is one of the leaders running the Botswana Community UK – a charitable community project whose mission is to promote Botswana culture in the UK.

She is a successful model and beauty queen turned pageant director who specialises in choreography for the catwalk and the beauty pageant stage. She has much experience managing models and beauty queens. She has appeared as a VIP Judge for many prestigious pageants all over the country.

She was honoured in 2013 to be invited to the Commonwealth Nations Reception given at Buckingham Palace by The Queen and The Duke of Edinburgh and met the entire Royal Family. She has appeared on numerous TV Shows and won several awards including a Peace Missionary by the Diplomatic Mission, Peace and Prosperity.
Professor Lyndon da Cruz is Consultant Retinal Surgeon and Head of Department of Vitreo-retinal surgery at Moorfields Eye Hospital; Professor of Retinal and Stem Cell Transplantation, UCL; Hon. Professor of Biomedical Engineering at Kings College, London. He completed his PhD in Retinal Gene therapy at the University of Western Australia on an NHMRC medical Scholarship, his post-doc fellowship on the Royal Society Howard Florey fellowship and was named the Menzies scholar for Australia in 2000 (declined).

He has worked in innovative research for the treatment of blinding retinal conditions since 1990 including implanting the first prosthetic retina (bionic eye) in Britain (2008) and the first-in-man delivery of a stem cell derived retinal pigment epithelial sheet for macular degeneration that he has co-developed (2015). For his research he has been awarded The Ruskell Medal by the Worshipful company of Spectacle Makers (2018); The Alan Alderman award from the Macular disease Society (2018); The Denuncio medal from The Society of Ophthalmic Professors, Italy (2016); The Harold Ridley Medal, The Ridley Foundation (2014); The Gulstrand Medal from the Swedish National Ophthalmic Society (2010).

Professor Lyndon da Cruz co-founded The London Project, to create new stem cell treatments for blinding retinal conditions. The project realises the need for large scale multidisciplinary teams of stem cell scientists, surgeons and engineers to solve the problems of tissue manufacture, understanding of disease treatment points and reliable delivery of the therapeutic element. He continues clinical work in retinal disease clinics while developing new surgical techniques and therapies for untreatable retinal diseases.
PhD London School of Hygiene and Tropical Medicine, his thesis was on Epidemiology of Microbial Keratitis in Uganda.

Post doctoral research fellow, London School of Hygiene and Tropical Medicine.

Volk 20/20 Visionary Award Winner, April 2020
IAPB Eye Health Hero 2019.


Clinical Lecturer and Residency training coordinator Mbarara University of Science and Technology.

President OPHTHALMOLOGY SOCIETY OF UGANDA.
Dr Marko Lukic was born on 20th of February 1984 in Zagreb, Croatia. He finished Medical Faculty of University of Zagreb, Croatia in July 2009.

He started his ophthalmology training in 2010 which he finished successfully in December 2014 with excellent marks. In May 2015 he passed the EBO exam and has been entitled as Fellow of European Board of Ophthalmology.

In January 2016, Dr Lukic started the Clinical Medical Retina Fellowship at Moorfields Eye Hospital in London, UK. A year after, Dr Lukic started to work as locum consultant ophthalmologist at Moorfields Eye Hospital.

At the same time, he was working as a sub-investigator in clinical trials as part of his Clinical Trials Fellowship until November 2018. He is a member of RCOphth (Afil), ASRS, ARVO, EURETINA and Croatian Society of Ophthalmologists. He sits on the Executive Boards of Medical Retina and Uveitis Sections of Croatian Society of Ophthalmologists.

Dr Lukic lectures at postgraduate studies at Medical School of University of Zagreb and he is invited speaker on different international conferences.

He has been a member of Mr Pearse Keane’s team in the collaborative project between Moorfields NHS Trust and Google’s Deep Mind on development of AI based systems for recognising different retinal conditions.

Dr Lukic has been publishing in highly ranked ophthalmology journals (Nature medicine, American Journal of Ophthalmology, European Journal of Ophthalmology, Retina, Acta Scandinavica) and his area of research is real-life data in efficacy of intravitreal drugs in treatment of diabetic macular oedema and wet age-related macular degeneration.

Lastly, Dr Lukic is part of Moorfields’ team on supporting Uganda Eye Health project.
Dr Paula Gatsey-Atabudzi is an alumnus of the UCL institute of ophthalmology, as a Master of Science graduate, trained at the Moorfields eye hospital, in ophthalmology with clinical practice.

After a 6 year doctor of optometry program at the Kwame Nkrumah University of Science and technology, in addition to a one year externship at the 37 Military hospital, she practised for 5 years at the Hohoe municipal hospital in Ghana, under the employ of the Ghana health service.

She doubled up as the head of the eye department. A role that gave her the opportunity to work closely with the Operation eyesight Universal’s seeing is believing project.

Through this project, she developed special interest in diabetic eye disease. As a result, she started a diabetic screening program where together with her team, was able to see about 37% of their patients come back with better vision, because of their supported care.

Her quest to make more impact influenced her decision to seek further education, hence UCL.

Her experience there has inspired her to set up reading centres all over Africa, replicating what is done at Moorfields eye hospital. Imparting knowledge in the field of eye health is her passion.

She was a peer tutor and a support tutor during her study at UCL. She aspires to do a PhD in the field of diabetic eye disease, researching more into this area, particularly targeting the area of therapeutics that can salvage diabetic eyes before the disease manifests in the eye.

She was a co-investigator in the on-going DOLF project, a clinical trial studying onchocerciasis treatment. She is a member of the UCL/Moorfields Joint Education committee and the e-Learning committee.
Dr Kaveh Vahdani graduated from Bucharest University of Medicine and Pharmacy.


This was followed by oculoplastics fellowships in Bristol Eye Hospital and Moorfields Eye Hospital. Current role: Adnexal Consultant.

Dr KAVEH VAHDANI
Adnexal Consultant Surgeon
Moorfields
On the surface, Winfred is an accomplished Eye Specialized Nurse Practitioner working at Lubaga hospital, Kampala.

Because of her skills, she can deliver productive and satisfactory results for all categories of Ophthalmic patients both in hospital and the community.

She was recently recruited as the Uganda Representative - Eye Health Africa founded by Miss Primrose Magala a senior Advanced Nurse Practitioner working at Moorfield’s eye hospital, London supported by co-directors including Mr. Morris Kusotera.

More than her role as an Ophthalmic specialized practitioner in training, she is also a Global Health Associate Nightingale Challenge Northern Ireland Leadership programme which aims at developing young health professionals in leadership, policy making, quality improvement and partnership working skills.

Following her training in Ophthalmic Nurse practice, she has successfully contributed to improvement of eye health in Uganda by starting a project that involves the extension of eye care services to the community. Here they move out to assess, diagnose and treat patients with eye conditions referring complex cases to the hospital. They also carry out preventive measures through health education talks.

On addition to that, she has come up with a Concept Paper on establishing the Advanced Nurse Practitioner pathway in Uganda. This is yet to be submitted to the Ministry of Health

She prompted to write this, following the International Nurses and Midwives Conference she attended in London, UK that took place in March 2020. It focused on achievement of Universal Healthcare Coverage globally through training more Nurse Specialists and developing Nurse led clinics. This would ensure access to healthcare by all people in both rural and urban settings. Winfred volunteered to be part of the Organizing Committee for the 2nd Uganda healthcare conference which took place in August 2020. Here, she mobilized nurses, midwives and other healthcare professionals by appearing on Central Broadcasting Service (CBS), a radio station in Uganda, informing the health professionals and the public to attend this knowledge sharing event.

She participated in an Abstract writing competition and eventually emerged as a finalist. She showcased her abstract presentation on “Extension of Eye Health Services to the community” during the above mentioned Conference.

Outside being an eye health specialized professional, she is pursuing a Bachelor of Science in Nursing at Agakan University which she is optimistic that this will widen her scope of knowledge in general medicine and other health disciplines.

Her long term goal is to be an exemplary Nurse Specialist and a National level policy maker. She wants to use her untiring commitment and drive to inspire the young professionals to aim higher for the better.
Sebastian Waiswa is a Ugandan, aged 43 years old and a first born of three children of late George Williams, who was a Roman Catholic Catechist.

He has committed his life to helping and working with and for the Differently Abled Persons especially the children to help them overcome injustices. He does this out of his personal and career experiences.

As a parent of a Differently Abled Child, Sebastian has been able to painstakingly go out of his way to help and bring a sizeable number of children with disabilities to the frontline so that they are recognized and considered as being normal like other children in our society. While his focus is on children with disabilities, he is also passionate to provide services to the adults with disabilities.

With Financial Support from Helping Uganda Schools (HUGS) UK, he has enrolled for his Masters in Special Needs Education at Kyambogo University, Kampala. He is the nominated Trusted Representative for Helping Uganda Schools in Jinja, Uganda.

He received his undergraduate education at Makerere University in Kampala with a Bachelor of Arts with Education. He also holds various professional certificates like in Participatory Planning, Monitoring and Evaluation, Civil Society Public Relations, Counselors’ HIV/AIDS, among others.

He has a wide NGO work experience the fact that he worked with The AIDS Support Organisation (TASO) Uganda Limited for 13 years in different capacities, the last being a Public Relations Officer. He retired from TASO in 2014 in preparation for his new calling to support children with disabilities.

Sebastian is the founder and Executive Director of a Civil Society organisation called Jinja Organisation of Parents with Deaf Children (JOPDC) which he started in 2015. Through his charity, he has been able to work with a UK Charity called HUGS to mobilize and support 100s of children with disabilities like those with hearing impairment, visually impaired and physically challenged.

With support from HUGS, and Primrose Magala, a Senior Nurse at Moorfields Eye Hospital in London, Sebastian has further been instrumental in fighting and eliminating preventable blindness among children and adults.

He is optimistic that the landscape for the differently abled children (DAC) is going to drastically improve when the construction of St. Francis de Sales School is complete courtesy of HUGS starting in 2021.
Mr. KAGUMBA NICHOLAS MUSISI
BSc. Optometry

Nicholas graduated with a Bachelor of Optometry from Makerere University and is currently working as an optometrist in Uganda, his homeland.

His key aspiration is to utilize the available opportunities to promote and provide quality eye care services to communities who need them. This includes; comprehensive eye examinations, low vision services and binocular vision assessment.

He hopes to pursue a Masters degree in Optometry so that he can teach and support capacity development of eye health experts in his country of origin/Uganda and Africa where optometry services are not readily available due to limited eye care human resources.

He regularly volunteers in outreach eye screening activities and camps which include providing refractive services to marginalised communities, in addition to his regular job. Other voluntary activities include; student mentorship, teaching, public speaking, research and counselling.

He hopes that with Eye Health Africa his knowledge and skills will be utilised to support more marginalised communities towards reducing avoidable blindness globally.
Dr Dennis Erima

He is an ophthalmologist at Lubaga Hospital and a member of the Executive committee of the Ophthalmology Society of Uganda.
Consultant - Ophthalmologist, Mulago Specialised and National referral hospital and teaching hospital. Paediatric Ophthalmology

Dr Ssali Grace Nsibirwa
Kato Ismael A clinical officer by profession with a diploma in clinical medicine and community health and a diploma in Human Nutrition. Director Plead For Health Uganda.

Former Dean of students Kampala School of Health Sciences
Former Examiner with Uganda Allied Health Examination Board (UAHEB)

Former community outreach manager at Prince Kimbugwe Foundation,
Currently working as an Educator at the Green planet Dubai and a member of Health and Safety Committee of Green Planet Dubai.

MR KATO ISMAEL
Clinical Officer
Dr. JP. Bagala is the founding CEO of the Women’s Health and Research Institute (WHRI), an affiliate institute to the Uganda UK Health Alliance and the lead coordinating entity of the National Safe-motherhood Expert Committee (NASMEC).

NASMEC is a team of seasoned experts with an advisory think-tank role to the Ugandan government on maternal and newborn health. He served as the Uganda Country Lead for the Uganda-Uk Health Alliance (UUKHA) during its revival from 2016 to 2018 and continues to engage with the Alliance on a consultancy role.

He is undertaking his residency in Obstetrics and Gynaecology at Makerere University, College of Health Sciences Kampala thus keeping him at the frontline of care for both mothers and the newborns. He has great passion for Global maternal and newborn health.
Craig oversees Project-2020 which supports nurses and midwives in Low and Middle-Income Countries access leading COVID-19 & CPD resources using innovative technology to assist them to continue to develop their skills, improve patient care and health outcomes.

He is responsible for initiating & developing relationships with our key in country partners ie Ministry of Health, Councils, Professional Associations and our key education partners and with our global partner, ICN.
Bholoja, born Mboniseni Ngubane, is to be considered one of the most relevant figures of the contemporary African music scene. After the success of his first album, Swazi Soul, released in 2009, Bholoja gained vast appreciation and earned ample recognition in Southern Africa, becoming the first Swazi artist to achieve international exposure solely through the works of his music.

He draws his inspiration from Swazi tradition and seeks to preserve the country's cultural heritage through his songs. His music is a response to the changing global situation and African growth challenges. This passionate artist soon became Eswatini’s rising symbol of its native rhythms, melodies, arts and culture. Maintaining Swazi traditions is his greatest inspiration and his way of living, becoming a mouthpiece for the underprivileged, bringing forward a message of hope to the victims of true social and health pandemics.

Bholoja's unique and original brand of music, which he calls Swazi Soul, quickly gained popularity in Southern Africa, and his distinctive and outstanding voice has become its symbol. It is hard to classify his characteristic music as it meanders and bends between his various sources of inspiration, such as alternative soul, gospel, jazz, blues and African traditional. What is certain about his music is that it is cloaked in social commentary, and it speaks to the listener. His enduring popularity is largely a result of his music lyrical strength, depth and individuality. A large number of his songs focus on the social and economic issues that govern peoples’ daily lives. With an infectious sense of humour and optimism that prevails through all his music, Bholoja's appeal extends to young and old alike.

In 2009, he recorded his debut album, Swazi Soul, in Paris, France through the help of the Alliance Francais du Swaziland. In 2015, he completed Swazi Soul II in Pretoria, South Africa. Swazi Soul III is currently in the final stages of production.

Some of his other musical achievements include: Best Upcoming African Musician 2009 Artist at Visa Pour la Creation hosted by Culture France. Best Siwati Album (Swazi Soul) 2010 South African Traditional Music Achievement (SATMA) Best Album (Swazi Soul) 2012 Swaziland Tihlabani Awards Artist of the Year. The 2012 Swaziland Tihlabani Awards are known as the most prestigious music awards in Swaziland. In 2010, he again was in the top ten nominees in Radio France International (RFI).

His growth as an artist has seen him sharing the stage and studio with great names in the music scene, such as Hugh Masikela, Erika Badu, Jimmy Dludlu, Sipho Hotsticcks, Judith Sephuma, Thsepoe Tiso, Roly Phiri, Nqubeko Mbatha, Ciska Mthethwa, Babaduo Matse, Ilove, Switch, Fanaza, MTCE, Luska Kanza, Tony Cox, Steve Newman, Koli Kuen, Vincent Bucher, Tao Rayao, Oliver Mtukudz, Freshly Ground, Kunle Ayo, Simphiwe Dana and many other.

He has shared his music at numerous venues since his 2004 debut at House on Fire. This includes many festival performances, such as MTN Bushfire, Standard Bank Joy of Jazz, Azgo Festival, Sakifo Festival, Kuwait Music Festival and Moshtito Festival. He has toured at least 19 African countries throughout his career, as well as in Austria, France and Germany.

Bholoja has built a strong reputation as a positive and influential symbol of his country. In August 2008, he was appointed a member to the Entertainment Committee of the 40/40 National Double Celebration by His Majesty, King Mswati III. His Majesty also appointed him to the committee of Arts in Eswatini University etukaleni. It is also worth noting that he received a direct letter from US President Barack Obama, appreciating his composition of his life-story. As a voice of the Swazi people, Bholoja does his very best to represent, appreciate and give back to his country. He started his own foundation, Bholoja Arts Technology and Educational Foundation (BATEF). The mission of BATEF is to fight poverty in Africa, starting in Eswatini, by providing the resources and motivation necessary for people, particularly the youth, to acquire skills necessary to succeed in our ever-changing technological world. This spirited musician uses BATEF to motivate, inspire and positively advise students to follow their passion and conquer the barriers that stand in order to live a successful and fulfilling life. He is committed to the continuous growth of BATEF throughout the country over the next several years. Bholoja also works with local NGOs and the American Embassy to create innovative road shows to fight the HIV/AIDS pandemic. He is an ambassador of World Vision's fight against abuse (especially against women and children) and was also the first MTN Swaziland Ambassador, and served in that role for 3 years, from 2011-13.
Gcobani Sisekelo Masuku born on 2nd July 1998, best known by his stage name Gcobani (The African Soul Prince), is a Swazi guitarist singer and song writer. He started singing in 2009. His growth as an artist has seen him sharing the stage with the Muffinz, Bholoja, Sands and many. His music is classified as Afro Soul as he sings in his native language Siswati as well as in English.

He is from Hlatikulu, Salem and he went to Christ The King high school. The very ambitious singer grew up with his grandparents since his parent separated when he was very young.

He describes himself as self-motivated and ambitious and definitely God-fearing person. He also loves what he does and believes he is blessed with a gift that he feels he need to share with the world.

He loves what he does so much that even during his spare time all his energy is directed to anything musical. When free he watches music videos and composes songs with his guitar. It gives him piece of mind and generally makes him happy. His love for music grew through inspiration from his grandmother as she was fond of African music.

His grandmother Phumzile Khumalo listened a lot to Miriam Makeba, Hugh MAsikela, Ringo Madlingozi, Freshly Ground and many others. To tell the truth it was not his favorite music until his grandmother passed away.

When she passed, he started seeing the importance of the music she listened to, but what made him fall in love with this type of music more was when he realized that, this type of music was what his grandmother only left for him as an inheritance.

Gcobani realized he was in love with making music at the age of 9. He remembers very well, it was 2007 when he was 9, that he realized he loved music. He would sing with his siblings most of the time and at times they would compete at home and eventually he always came on top.

Gcobani then started saving his pocket money and would take a bus from Hlathikhulu to Mbabane the capital city of Eswatini to record a few song at Subjamz studios.

He would also make sure he sings during events such as speech and prize giving day at school. He would sing and the audience would be entertained through his singing and seeing that, made him even hungrier for this thing called music.

What is so interesting about this is that for his first guitar he exchanged his school shoes. That was when he got the opportunity to play a guitar and master his skills and art.

After trying to push his music and career in 2017 Gcobani share a stage with South African band, the Muffins. Then in the same year he recorded a track with Bholoja and David Felgeirolles a producer from France. Speaking of his dreams and aspirations, Gcobani hopes to record an album and make good music.

His biggest dream is to perform both locally and internationally on the world biggest stages, and the BET awards are his major target. He also wishes to be a music producer in the near future.

Eye Health Africa is a great opportunity to support development initiatives close to his heart, coming from a marginalised community himself.
My personal objective is to serve to the best of my ability with talent to create a positive impact in whatever works I do and become a resourceful person while pursuing successful career in a competitive world through sharing knowledge and professional expertise in order to make a difference.
WHO WE ARE

The Uganda-UK Health Alliance is an umbrella Organization for UK Institutions and organizations undertaking healthcare capacity building activity in Uganda. Without controlling or inhibiting individual organisational members, the Alliance has provided a system-platform to allow each member to maximize their impact by linking them to other agencies working in the same geographical region or sharing similar activities. It has also created mechanisms to support and better coordinate its member organizations and ensure that their activities map to the priorities of the prevailing Ugandan government and Ministry of Health.

VISION

Strong and robust health systems built through well-coordinated mutual collaboration between Uganda and UK.

MISSION

To provide system leadership that better coordinates and supports UK derived programs in Uganda’s Health Sector.

GOAL

To enable successful delivery of UK derived health programs in Uganda’s Health Sector while fostering mutual collaborations, shared learning and sustainability.

OBJECTIVES

✦ Support the Ugandan Government to implement its plans to increase and develop its health objectives and systems, and to contribute towards achieving the health-related Development Goals.
✦ Provide opportunities for learning and development for health workers and institutions in both Uganda and the UK.
✦ Provide a means of better coordinating UK organizations’ contribution to joint working in health, within internationally recognized standards of good practice.
✦ Encourage professional volunteering in both directions, in particular the development of standard models for different categories of volunteers.

OUR CORE VALUES

Shared Learning
Joint Working
Co-Development
What we do

Moorfields Eye Hospital NHS Foundation Trust is the leading provider of eye health services in the UK and a world-class centre of excellence for ophthalmic research and education. We have a reputation, developed over two centuries, for providing the highest quality of ophthalmic care. Our 2,300 staff are committed to sustaining and building on our pioneering legacy and ensuring we remain at the cutting edge of developments in ophthalmology.

Who we are

Moorfields Eye Hospital NHS Foundation Trust is authorised to operate as a public benefit corporation under the National Health Service Act 2006.

The trust is led by a board of directors, which is accountable to our membership council (the name we give to the board of governors at Moorfields).

The responsibilities of the board and the membership council are set out in our constitution, which you can download from the related documents section to the right of this page.

We also have strong clinical leadership arrangements below board level, with four clinical directorates based around clinical services or locations and led by seven clinical directors. An eighth clinical director covers quality and safety across the trust.

The clinical directorates are complemented and supported by corporate directorates covering operations, nursing and allied health professions, strategy and business development, finance, human resources, research and development, and governance.
TUHEDA
Tanzania UK Healthcare Diaspora Association

Tanzania UK Healthcare Diaspora Association (TUHEDA) was formed soon after The East Africa Healthcare and Investment Summit in April 2017, held at BMA House in London.

It was noted that there was no great representation of the Tanzania diaspora at the Summit, hence the drive to form the association.

The few attendees from the Tanzania diaspora met up to discuss a way forward after the summit. On that day, a steering committee was chosen and later an interim leadership was nominated. This leadership became the trustees who steered TUHEDA to becoming a registered charity.

ABOUT US
Who we are

The Tanzania UK Healthcare Diaspora Association (TUHEDA) is formed of healthcare professionals, entrepreneurs and researchers of Tanzanian origin and friends of Tanzania who are based and work in the United Kingdom. However, we have members in Tanzania and other parties of the globe.
Background.

Lubaga hospital is one of the oldest hospitals in Uganda having existed for over 100 years, being founded in 1899. It is the second oldest hospital in the country and has offered health care to millions of people during its long history of existence. Over the years the hospital has built a reputation as a provider of affordable health care services and therefore has continued to attract and treat people of mainly mid level and low level status.

The hospital has remained faithful to its founding mission of providing quality health care to the less privileged. For this reason and considering its age and history the hospital has not expanded its product line but rather remained a modest general hospital. This makes the Hospital committed to a holistic integration and sustainable action in health, including treatment, prevention, health promotion and training of health workers.

In October 2012 the Board decided that the name of the hospital should be changed: from previously Rubaga Hospital to Lubaga Hospital.

The Board also clarified that the full name of the hospital is now: Uganda Martyrs Hospital Lubaga.

Since the earlier years the hospital has been dedicated to the Uganda Martyrs. In 1942, two White Sisters admitted to Lubaga Hospital were healed from pneumonic plague, which was a deadly disease at that time.

There were no antibiotics by then. The healing occurred after the intercession to the Ugandan Martyrs who had been beatified in 1920 by Pope Benedict XV. The miracle in LUBAGA HOSPITAL was instrumental for the canonisation of the Uganda Martyrs as saints for the whole world. This was done by Pope Paul VI in 1964 during the Second Vatican Council. The Pope later visited Uganda in 1969 and visited Lubaga Hospital.

The staff and management of Lubaga Hospital feel that it is a great honour and responsibility to work and serve at a place where the Martyrs showed in front of the whole world that sacrifice, ‘to make sacred’, is the consequence of loving the truth of a reality, the value of a person, not the denial of its goodness. We pray and hope that their example is not just a reminder and a lesson for us but a daily experience that helps us to grow as we follow the noble call of assisting the Lord in the process of healing of the sick.

Who We Are

Our Vision:
To be a leading provider of affordable, quality healthcare services in Uganda.

Our Mission:
To promote Christ’s mission of life and healing through providing sustainable, quality and affordable health care services without discrimination, especially against the less privileged.
IAPB was established as a coordinating, umbrella organisation to lead an international effort in mobilising resources for blindness prevention activities. IAPB aspired to link professional bodies, non-governmental organisations (NGOs), educational institutions and interested individuals with national programmes for the prevention of blindness.

IAPB’s history began in the mid-1970s when the late Sir John Wilson amongst others, began to draw the international community’s attention to the problem of global blindness. These efforts led to the setting up of the International Agency for the Prevention of Blindness (IAPB) on January 1, 1975, with Sir John Wilson as the Founder President. The founding members were the World Blind Union (WBU) and the International Council of Ophthalmology (ICO).

At IAPB, we believe in a world in which no one is needlessly visually impaired, where everyone has access to the best possible standard of eye health; and where those with irreparable vision loss achieve their full potential.

Our key priorities are:

- **Global advocacy:**
  Our objective will be to raise the profile of eye care with key international institutions, so it receives the attention and resources needed to achieve universal access to eye health.

- **Connecting knowledge:**
  Underpinning our activities is our role in providing authoritative data and information and enabling access to up-to-date knowledge, information and practice.

- **Strengthening the network:**
  We will support active partnership building both between members and with other key sectors to tackle the barriers to delivering eye care for all.

- **Providing services:**
  We will aim to provide high quality, economically viable services which add value to members.
A not for profit organisation and we operate in Uganda. Through running free medical camps, we provide health services and create an environment where the underprivileged community gets sensitised about health issues. Thousands of poor people in villages and urban areas attend the health camps.

These camps provide free tests for Diabetes, HIV, Blood Pressure, Haemoglobin etc. We offer counselling & treatment by trained Doctors and Specialists. Free medicines are also given to the people. Iron and Folic Acid supplements are also distributed to the malnourished at the camp. The underprivileged community also has aging members who are not able to purchase health care and access the facilities due to the long distance and other joint problems that have demobilised them.

We work in partnership with Eye Health Africa and the Uganda UK Health Alliance.
The ultimate goal of Abalon is to provide an ophthalmic eye service to developing countries. We operate under Abalon Trust. Trustees comprise of Ophthalmologists, Ophthalmic Nurses, Bankers, Optometrists and Clinical Lecturers. We are registered in England and Wales; CIO ref: 1167443.

Our Vision

Our medium to long-term vision is to develop training, research and treatment capacity in Sub Sahara Africa.

To enable mobilisation of resources and developing bespoke and sustainable solutions for primary health care challenges within the region.

Capacity building through medical internships.

Long term purpose to build a world class regional center for ophthalmology.
The charity Helping Uganda Schools (HUGS) started 25 years ago and funds the building of schools and sponsors young adults to University level. Education empowers, enhances lives and gives prosperity to countries. HUGS works with committed partners in Uganda who guide and advise on best practice. Over the years there has been increasing awareness of the plight of children with sensory problems, especially sight loss and blindness.

Eight years ago Sebastian Waiswa who lives in Jinja and who started the ‘Jinja Organisation of Parents of Deaf Children’ (JOPDC) contacted HUGS to ask for funding for children with sensory loss who did not attend school. His role was to go to outlying villages, seek out children with sensory loss and identify educational opportunities for them. Over the years HUGS has paid for the schooling for some of these children.

Initially the emphasis was on children with hearing loss but then Sebastian told HUGS about Aaron aged 14 who required corneal grafts and could not go to school as he could not see the blackboard. We then found there were many more children with untreated eye problems.

One of HUGS Trustees contacted the big eye charities, discovering there were no projects in the Jinja area and many families could not afford to take the children to the hospital as they could not pay for transport. Some children who had been assessed at the hospital remained without treatment as there was no money to pay for treatment.

HUGS then made contact with a very experienced optometrist in Jinja who met Sebastian and together with funding from HUGS started, ‘The Sight Restoration Project’. Sebastian made a list of all the children with sight problems and they were assessed in groups of ten. The conditions fell into four categories.

(1) Children requiring spectacles and drops.
(2) Children needing simple operations ie cataract surgery.
(3) Children requiring complex surgery ie corneal graft and
(4) children who were blind, requiring aids and adaptations.

To help group

(1) HUGS paid for spectacles and drops and many of the children could quickly return to school. It was difficult to identify a pathway for treatment for Group

(2) Until HUGS made contact with Primrose Malaga (A Senior Nurse at the famous London Moorfields Eye Hospital) via the UUKHA (Uganda, UK Health Alliance), Children from Jinja then attended the yearly ‘Eye Camps’ at the Lubaga Hospital where many received treatment. HUGS paid for transport, overnight stays, food for the children and their parents and medication. Group

(3) Aaron was treated at a private hospital in Kampala paid by donation. Aaron can now see and goes to college with fees paid by HUGS. Group.

(4) A Braille Machine was taken to Jinja by HUGS Trustee who also initiated contact in the UK for braille books to be sent to Jinja.

Helping Uganda Schools current work

HUGS are in the process of completing the building of a school in Jinja called St Francis de Sales. This will accommodate up to 90 children many with sensory loss. HUGS hopes to have a ‘Clinical Room’ at the school where children can be assessed and those from group one treated.

HUGS has just completed a ‘Big Virtual Cycle Ride from UK to Kampala’ and raised over 35 thousand pounds to finish the new school which we hope will have its first intake mid 2021. HUGS are currently funding the University places of two optometry students.

HUGS will continue to fund the travel expenses for children to attend the yearly ‘Eye Camps’. The small ‘Sight Restoration Project’ began in June 2017 with 127 patients treated. (114 children and 13 adults). Of these children 73 had allergies, 14 cataracts, 10 squints, 1 glaucoma, 16 myopia. The adults: 10 had Myopia and 3 had allergies. There are currently 26 children we know of who require treatment. Three requiring corneal graft. There will be more children yet to be discovered.

Barriers to overcome

(1) There are many children who could benefit from spectacles and drops but assessment of these children remains a problem. (The optometrist in Jinja who assessed the children is now in another country and it is difficult to find someone to take her place). When the ‘Clinical Room’ is in situ at the school there will be an opportunity for a visiting optometrist.

(2) Children are sometimes assessed but often remain at this stage as there is no one to pay for treatment.

(3) There is a shortage of optometrists in Uganda. (HUGS are currently funding the places of two at University, but there needs to be more in the profession). Also, a shortage of doctors and nurses to meet the needs of children requiring treatment.

(4) The ‘Clinical Room’ at the school will be a challenge to equip. (This could become a resource for the wider community).

(5) The yearly ‘Eye Camps’ held at Lubaga Hospital (organised by Primrose Magala via the UUKHA) have provided a pathway for children to be assessed and some treated but since COVID-19 it is unclear what will happen to them.

(5) Those children who fall into Group (3) with complex eye conditions ie (tumours, glaucoma, corneal graft) remain a challenge. There needs to be a clear pathway to treat these children as the cost of treatment at private hospital is prohibitive.

(6) Children who are blind require aids and adaptations.

Many parents cannot afford the bus fare, overnight stays and funding for treatment for eye care for their children, consequently, many children still remain untreated.

HUGS tries to do its very best for all children and we wish the ‘Eye Health Africa’ success and hope its existence will forge links and find pathways for the children who deserve the very best treatments. www.helpingugandaschools.org

‘Valuing all children, showing respect to all’

Left to right

Sebastian Waiswa, Director of Jinja Organisation of Parents of deaf and disabled children.
Denise Ead Trustee of HUGS
Catherine Gregson (supporter of HUGS and sister of Denise).
Dr. Henry Mwuonge UUKHA

Attending the ‘Eye Camp’ at the Lubaga Hospital, Kampala, Uganda in October 2018

Mrs Denise Ead Trustee of HUGS

HUGS have built 6 schools in Uganda and 1 in Rwanda.
St Francis De Sale in Jinja will be the 7th school.
Background

The Nursing Now campaign was launched in 2018 in the presence of Nursing Now Patron HRH Duchess of Cambridge with launch events and activities across the world, including the UK, Switzerland, Jamaica, USA, Jordan and South Africa. More than 30 countries were represented and many people pledged their support to the campaign from around the world.

The Nursing Now campaign was developed in response to the findings of the Triple Impact report, which concluded that as well as improving health globally, empowering nurses would contribute to improved gender equality and stronger economies.

The campaign will run until the end of 2020, the 200th anniversary of Florence Nightingale’s birth and a year when nurses will be celebrated worldwide as a result of the Year of the Nurse and the Midwife.

Who we are

Nursing Now is a global campaign to improve health by raising the status and profile of nursing. Nurses are at the heart of most health teams, playing a crucial role in health promotion, disease prevention and treatment. As the health professionals who are closest to the community, they have a particular role in developing new models of community-based care and supporting local efforts to promote health and prevent disease. By developing nursing and midwifery, countries can achieve the triple impact of improving health, promoting gender equality and supporting economic growth.

Nursing Now is a growing social movement with an active network of groups working to influence global and national policy. Today, there are 587 Nursing Now groups active in 117 countries (as of February 2020) with new groups registering and launching every month.

Nursing Now is a programme of the Burdett Trust for Nursing run in collaboration with the World Health Organization and the International Council of Nurses, and is supported by a Campaign Board made up of nurses and non-nurses from around the world.

The Nursing Now name is owned by The Burdett Trust for Nursing.

The campaign focuses on five core areas:

1. Ensuring that nurses and midwives have a more prominent voice in health policy-making;
2. Encouraging greater investment in the nursing workforce;
3. Advocating for more nurses in leadership positions;
4. Encouraging research that helps determine where nurses can have the greatest impact, and
5. Sharing examples of best nursing practice.

What we do

Nursing Now works to improve health globally by raising the profile and status of nursing, influencing policymakers and advocating for more nurses in leadership positions.

Nursing Now encourages health leaders to invest in nursing and introduce new models of care that maximise nurses’ contributions to achieving Universal Health Coverage.

A special tribute to Lord Nigel Crisp, a Visionary and pioneer of the Nursing Now Campaign, which has given Nurses and Midwives a strong voice globally, raising our profile and status.

Also, Dr Catherine Hannaway who has led the global awareness activities. She is Director of the Nightingale Challenge Northern Ireland Global Leadership Development Programme, supporting the mentorship and development of Young Nurses and Midwives to become great leaders.
Improving Eye Care Training by linking Eye Care Institutions in the UK and Africa

The VISION 2020 LINKS Programme works to improve quality and quantity of eye care training, mainly in Africa. The programme, which began in 2004, has so far established 21 links between training institutions in Africa and the UK. It works by matching an African eye department with a UK eye department in a partnership to train the whole eye care team. ICEH helps develop the programme by acting as a resource and networking centre, as well as facilitating new LINKS in NHS hospitals. The impact so far includes:

- Skills in vitreoretinal surgery where none existed before (Malawi)
- Paediatric surgery (Malawi, Swaziland)
- Management of diabetic retinopathy including laser treatment (Tanzania, Botswana)
- Medical and surgical glaucoma management (Sudan)

What participants say about the programme

“The visit of the team seemed to open the doors for children to come for help at the unit. Perhaps it was the advertising, or maybe by word of mouth after successful surgery, but since the team’s visit there have been a large number of successful cataract surgeries on children.” Dr Jonathan Pons, Consultant Ophthalmologist Good Shepherd Hospital, Siteki, Swaziland.

“The team in Lilongwe and Nkoma are full of enthusiasm and with a little support from us are able to produce very good quality clinical research. It was refreshing for me to see that the people there have their own ideas on what they want to do and it is good to be facilitating that – especially when you see how they are working under such difficult conditions compared with UK ophthalmologists. It is as much a learning experience for me as for them.” Dr Bal Dhillon, Consultant Ophthalmologist and Honorary Professor, University of Edinburgh, UK.

We pay tribute to Vision 2020 LINKS Management team, especially Marcia Zondervan and Professor Geeta Menon, for their contribution to eye health development in Africa through the LINKS Program activities.
NHCC - The Knowledge sharing platform for nurses and midwives

Our experienced team works tirelessly round the clock to outsource experts in different specialized Nursing Fields to share their knowledge and expertise.

NHCC has been created with the background of the Nursing Now global Campaign (NNC) - to raise the status and profile for nurses and midwives globally.

The National Health Care Conferences

- provide participants with relevant training and tools
- The sessions are designed specifically to meet information requirements
- Provide evidence-based practice
- Provide current information from the experts both national and international
- Explore the advanced technological methods of delivering care

The goal is to equip you, with skills, competencies, and tools.

We Care

We are optimistic that with enhancing the diversity skill mix of specialists within the nursing fraternity, will in turn create champions/link role nurses and attract new positions for career development and enhance recruitment and retention.

Mrs Elizabeth Pearson
Who We Are

Uganda being the Pearl of Africa has suitable environment if well exploited can lead to promotion of a number of activities. Nevertheless, due to the increasing population in most towns, resources are getting limited hence the call for innovations in order to realize equal growth and development amongst her communities.

Aware of the profound need to THINKBIG and catch up with increased opportunities for the growth of these communities in the black man’s continent amidst political ideological differences, economic gap between the poor and the rich, acute spread of the AIDS Pandemics, Health Hazards like malaria, Cholera and other related disasters that have caused multiplicity in orphanage, deteriorating cultural and traditional values thus realizing the noble need to foster development, unity and solidarity among these communities so as to cover the social, economic and information gap.

Our Objectives

To empower and facilitate the economic and social development of the people particularly those in the needy communities to become increasingly involved in resource planning and monitoring of programs that are essential for reducing poverty.

To mitigate the Health and Social economic impacts of HIV/AIDS, poor family planning methods and malaria at individual household and community levels through sourcing for support from other health service providers, donors, the division and the government.

To provide Bursaries to students and educate youths using funds, donations and gifts solicited from established contacts with organisations and governments both locally and internationally for the purpose of furthering the objectives of the organisation.

To start-up vocational training centers so as to equip communities with basic entrepreneurial skills so as to improve their standards of living and to provide services of consultancy in Business skill development projects and outsourcing consultants on different matters.

To provide for people with disabilities and expand in other needy areas that are outside Kampala district and ensure that the cause for health, social and economic problems are addressed and mitigated through collaborative efforts with the communities and other government bodies.

We as a group have deemed it necessary to set up Community Empowerment For Village Development (CEFOVID) as a community Based Organisation to Complement the initiative made by the government of the Republic of Uganda, other CBOs and NGOs through cooperative and working hand in hand with villages, within communities to achieve her objectives.

Mr Ronald Kamoga

Mr Ronald
Kamoga
HEE exists for one reason only: to support the delivery of excellent healthcare and health improvement to the patients and public of England by ensuring that the workforce of today and tomorrow has the right numbers, skills, values and behaviours, at the right time and in the right place.
Visual Eyes Afrika-international (VEA-int) is a UK registered Community Interest Company (12325571), specialising in bespoke HABILITATION and REHABILITATION training in rural and peri-urban in Africa through partnerships with community-based grassroots charities.

Those trained are to cascade the training to the poor and disadvantaged, those with low incomes, women, older people, ethnic minorities and indigenous population. Habilitation is teaching blind and vision impaired children and young people skills for the first time. And rehabilitation is re-skilling adults after acquiring sight loss.

Our training aims to promote and embed the findings and outcome recommendations of the World Report on Vision (WRV) through Sustainable Development Goals and Universal Eye Health Coverage including the Africa Union Agenda 2063.

Mr Molemisi Kono
The WCEA works in partnership with the World Medical Association, the International Council of Nurses and other key collaboration partners focusing on supporting healthcare organizations to provide their professional healthcare workers access to education through online systems and mobile technology. In doing so we work with respected educators to make their content available around the world.

Our primary area of focus is on Continuing Professional Development (CPD/CME)/ Lifelong Learning and we are currently assisting organizations across the world with access to COVID 19 resources.

Our technology allows organizations to react quickly to pandemics through the provision of eLearning & mLearning, plus the ability to send bulk SMS messages to frontline health workers to assist with preparedness, response and control during epidemics, pandemics, natural disasters etc.

The technology has been further developed to allow organizations to gather artificial intelligence via Field Surveys & feedback from staff.

Our team is dedicated to helping provide the information and education that will protect healthcare workers, and assist the healthcare community at this most difficult of times.
About Us

As an organisation, Commonwealth Future is committed to developing and creating positive and sustainable futures for all its members, by encouraging collaboration, teamwork and emerging partnerships throughout the 54 nations within the Commonwealth.

We are a group of highly motivated individuals, dedicated to raising standards of excellence, and promoting deeper thought around the treatment of society, in particular the Commonwealth population.

Our Beliefs

We believe in a future that includes improved standards of education, better healthcare models and consistently developing social welfare.

Commonwealth Future believe all of this is possible through liaising closely with our members and non-members, on joint ideas and ventures; through working with young people and encouraging them to achieve their goals and ambitions, and by breaking down barriers that may exist between public and private enterprises, government bodies, associations and international organisations.

Our charity work is non-discriminatory, we believe in the fundamental basics of Human Rights and we wish to promote and encourage diversity of religion, cultures, ethnicities and social backgrounds.

Through our commitment to team work, our responsibility as members and our drive towards a better future for Commonwealth Citizens, Commonwealth Future is dedicated towards providing improved standards of social welfare across all 54 nations within the Commonwealth.

Our work is focused on delivering better standards of education, improved healthcare facilities, increased trade and enterprise, and enhancing the opportunities for our young people. Through our vast array of experience and valued team, our members will drive the change necessary through providing open communication channels with Governments, Associations and International Bodies at local, national and International Level, necessary to campaign for better social justice and the well-being of every Commonwealth community.
Nurses and midwives form the majority of health care workers across all health care settings and particularly in the primary health care context. In rural settings and in developing countries the nurse or midwife may be the only local source of health care.

The Commonwealth Nurses and Midwives Federation (CNMF), founded in 1973, is a federation of national nursing and midwifery associations in Commonwealth countries.

The CNMF has regular and constructive contact with major Commonwealth bodies in London including the Commonwealth Secretariat and the Commonwealth Foundation. The CNMF is an accredited Commonwealth body, which allows involvement in annual Health Ministers' meetings, the biennial Commonwealth Peoples Forum held prior to the Commonwealth Heads of Government meeting and other Commonwealth meetings such as the civil society consultations.

Management

The CNMF is managed by an elected Board, which consists of a President, a Vice-President, and a member from each of its six regions. The Federation has two appointed officers - an Executive Secretary and a Treasurer. Board Meetings and General Meetings are held every two years.

Objectives

The CNMF’s current Constitution was agreed in 2018. It exists to:
- influence health policy throughout the Commonwealth,
- develop nursing networks,
- enhance nursing education,
- improve nursing standards and competence, and
- strengthen nursing leadership.

Historic Constitutional changes in 2014 included a change of name to the Commonwealth Nurses and Midwives Federation, the insertion of a clause on the values of the organisation, and an expansion of membership categories. Further minor changes were made in 2018.

The CNMF is committed to fostering active participatory membership and collaborating with Commonwealth and international organisations such as the International Council of Nurses, the International Confederation of Midwives and the World Health Organisation.

Work Programme

The CNMF’s current work programme includes the following:
- membership development,
- conducting in-country projects with national nursing organisations involving capacity building and training,
- communicating with member organisations through a newsletter and the website,
- conducting and facilitating research on nursing and midwifery within Commonwealth countries
- participating in and contributing to Commonwealth Health Ministers’ and Heads of Government meetings
- participating in and contributing to Commonwealth Health Ministers and other Commonwealth meetings,
- promoting Commonwealth Day.

Born in Uganda, has dual citizenship Ugandan and Swedish.

Been working in the UK since 2002 as A Dental Hygienist, currently working with Mydentist dental company, covering five practices in South London, (Mitcham, Sydenham, Tooting, Streatham and Morden).

Married and have children. Very much interested of advocating for Mouth link with entire body, ie mouth hygiene importance to the entire body. Currently working hard to see that we introduce Mouth/Dental Hygienist professional in Uganda.

My Moto "The Mouth is the first sign of one’s personality " 
ADOPT A SCHOOL

Adopt-a-School Foundation was born from a passion and a desire to be a positive force in changing the future of education in South Africa. From humble beginnings, the Foundation has grown exponentially. With hundreds of schools spanning the entire country, we are able to make a sustainable difference in the lives of hundreds of thousands of learners, their families and their communities.

Through a holistic, inclusive model called Whole School Development, we aim to address the academic, infrastructural, social and security environments in our adopted schools, to ensure that they are conducive to teaching and learning. Through this holistic approach, we are able to address most obstacles that stand in the way of providing quality education. Our schools are some of the least resourced and marginalised schools in the country, but as long as there is a passion and a commitment to education, together with our partners, we are able to bridge many of these gaps.

VISION

A dynamic, transformed and accessible schooling environment that produces capable global citizens to meet the developmental needs of Southern Africa.

MISSION

To support the delivery of an enhanced and conducive teaching and learning environment that can be replicated in disadvantaged schools.

Strategic Objectives:

- Ensure delivery of quality and best value programmes for beneficiaries and stakeholders.
- Ensure effective programme implementation to support the improvement of education learning outcomes in schools.
- Establish and maintain a reputable, capable, innovative and dynamic organisation.
- Develop and maintain systems and policies to support transparency, accountability and good governance.
- Develop and maintain funding models that will ensure the long-term sustainability and optimal impact of our work.
Rotary is a global network of 1.2 million neighbors, friends, leaders, and problem-solvers who see a world where people unite and take action to create lasting change – across the globe, in our communities, and in ourselves.

Solving real problems takes real commitment and vision. For more than 110 years, Rotary’s people of action have used their passion, energy, and intelligence to take action on sustainable projects. From literacy and peace to water and health, we are always working to better our world, and we stay committed to the end.

What we do

Rotary members believe that we have a shared responsibility to take action on our world’s most persistent issues. Our 35,000+ clubs work together to:

- Promote peace
- Fight disease
- Provide clean water, sanitation, and hygiene
- Save mothers and children
- Support education
- Grow local economies

Our mission:

We provide service to others, promote integrity, and advance world understanding, goodwill, and peace through our fellowship of business, professional, and community leaders.

Vision statement:

Together, we see a world where people unite and take action to create lasting change — across the globe, in our communities, and in ourselves.

We work differently:

We see differently: Our multidisciplinary perspective helps us see challenges in unique ways. We think differently: We apply leadership and expertise to social issues — and find unique solutions. We act responsibly: Our passion and perseverance create lasting change.
Background

The College of Ophthalmology of Eastern Central and Southern Africa (COECSA) is a registered specialized virtual college. The college was registered in 2012 after a merger between Eastern Africa College of Ophthalmologists (EACO) and Ophthalmological Society of Eastern Africa (OSEA). The aim of this college is to address the chronic shortage of ophthalmologists in Eastern, Central &Southern Africa as well as improve the quality of eye care services in the region.

COECSA’s mandate is: to contribute to Human Resources for Health (HRH) through quality training in ophthalmology; set standards for professional ophthalmic practice; facilitate continuous professional development; and, promote research which advances ophthalmology in the region.

Its establishment was informed by similar initiatives as those of the medical colleges in South Africa and United Kingdom. COECSA, however, aims to address the unique needs in Eastern, Central &Southern Africa, based on evidence and priorities identified in the region.

COECSA relates closely with other players in eye health and allied sectors through interventions in the Eastern, Central &Southern Africa region comprising Kenya, Uganda, Tanzania, Rwanda, Burundi, Malawi, Ethiopia South Sudan (Republic) and Zambia.

COECSA is a constituent member college of the Eastern, Central &Southern Africa -College of Health Sciences (ECSA -CHS).

Our Core Values

TEAM WORK: we shall endeavour to work in collaboration with organizations that have similar vision and promote teamwork within and between member countries.

INNOVATIVENESS: COECSA seeks to promote novel ideas that facilitate better ways of delivering interventions and services.

INTEGRITY: The institution shall seek to remain transparent, committed and accountable to its constituency and partners by fostering good governance and accountability.

INCLUSIVENESS: COECSA believes in embracing diversity and fairness as an overarching principle in health system.
ABOUT US

The Charity has identified healthcare gaps and has already donated medical/surgical equipment to a variety of medical facilities across the UK, Africa, and the Caribbean. We hope to transfer much needed items and respond to emergency health care needs. We are currently working on creating awareness and fundraising to provide a funding stream to assist in the distribution process.

OUR MISSION

Let The Hungry Be Fed
The Naked Clothed
The Sick Be Nourished
The Aged Protected
The Infants Cared For
OUR PURPOSE

We fulfil unmet needs in the ophthalmic space by innovating commercially relevant technologies through to feasibility.

We generate ideas. We push the scientific envelope. We solve problems. We translate and communicate our knowledge. We look forward.

OUR VALUES

Focused:
We focus exclusively on research, development and ophthalmic sector support.

Innovative:
We lead with industry, solving problems and creating technology. We bring new ideas to markets.

Dynamic:
We focus on meeting unmet needs. We trial, test, learn, share and adapt.

Collaborative:
We cannot achieve without each other; our team, our partners and our customers.
We pay tribute to Zimbabwean Diaspora Health Alliance (ZDHA) represented by Dr Brighton Chireka and Professor Edward Kunonga. The entire team have been a pillar of strength and vital source of shared learning during COVID.
UNMA-UK is an advocacy group established to empower & foster mutual collaboration of Ugandan Diaspora Nurses & midwives in the UK and Globally.

Uganda Nurses and Midwives Association UK (UNMA-UK) is a non-profit organization founded in June 2020.

MISSION STATEMENT

UGANDA NURSES AND MIDWIVES ASSOCIATION

- UK seeks to develop a vibrant, supportive organization to prosper the welfare of UK-Ugandan nurses, midwives, and health care assistants, and to advance the value of nursing development through education and professional network.

VISION

The vision is to unlock the professional know-how of our members, empower them to develop beyond their limitations, consider their professional and personal space, to use this as a professional group but as individuals to drive change within nursing and midwifery both here in the United Kingdom, Uganda and globally.

The association objectives are;

1. To provide a professional advocacy body to belong to.
   - Registered body
   - Link to other organizations for recognition
   - To provide a communication link between the association on issues affecting Ugandan diaspora nurses and midwives, and other professional bodies in the UK and in Uganda

2. To promote the health and wellbeing of members
   - Offer guidance and promote information sharing
   - WhatsApp messenger (check on members welfare)
   - Offer health advice, redirecting to appropriate registered health care services, etc

3. Raise funds to support global health and social welfare initiatives.
   - As a professional healthcare Body, we believe in supporting evidence-based healthcare staff innovations, enterprise and business initiatives for which a commission -based dividend will be relayed back into the UNMA-UK treasury for the sustenance of our organizational goals and multi-national funding initiatives
   - Create a Go-fund me page for the Association for continuous fundraising

4. To provide a forum for Uganda diaspora nurses and midwives to network professionally, share skills
   - meet, exchange ideas, views, and support each other in professional development.
   - Mentorship program with colleagues and counterparts
   - Empower members to unlock the future of advanced global engagement.

5. To organize and deliver educational development meetings, training events, and courses for members and others.
   - Organise and deliver webinars/workshops
   - Organise and Deliver projects (project bank)
   - Design a “working in the NHS course” for those internationally recruited Colleagues and first time into the NHS

6. To register as a charitable organization, with charitable objectives and goals.
   - Governing document

- Selection of trustees
- Complete the online form

OUR VALUES

The association’s key values are

1) Membership
   - providing a supportive professional network of like-minded professions

2) Reputation
   - Upholding our Code of professional conduct and collaborating with other professionals and advocacy groups. (NMC professional code of conduct, 2015)

3) Professionalism and excellence
   - Demonstrating integrity and accountability and promoting evidence-based practice in all we do and aspire to undertake and achieve

4) Our Health and Well-being
   - providing opportunities to promote the health and wellbeing of our members and others.

5) Enterprise/Innovations
   - enhance and promote Innovative and creative opportunities

A platform to promote effective delivery of safe nursing practice by engaging members in discussions around health and social care policies

- seeking out partnerships to benchmark good practice including activities to promote social inclusion, advocacy, leadership development, participation at conferences, and where possible policy review engagements.

The ethos and direction of this association identify three pillars that will both influence the project activities in a range of different settings including mental health, general practice, primary and community health, child and maternal services, research and academia, etc. They are Professional Practice, Regulation awareness, and Socio-Economic Welfare.

PROFESSIONAL PRACTICE

· Health and safety of our members where they work
· Clinical practice issues
· Continued Professional Development (CPD)
· Establishing communities of practices-use of digital technologies to promote good practice

REGULATION AWARENESS

· Engage with global health organizations · Promote awareness amongst members around regulatory competencies, professionalism, and expected code of conduct as set by the regulatory professional bodies in the United Kingdom and Uganda.

HEALTH & WELLBEING AND SOCIAL ECONOMIC WELFARE

· Membership
· Health and Wellbeing
· Support confidential networking
· BAME global engagement
The College acts as the voice of the profession, we set the curriculum and examinations for trainee ophthalmologists, provide training in eye surgery, maintain standards in the practice of ophthalmology, and promote research and advance science in the specialty. Ophthalmologists are at the forefront of eye health services because of their extensive training and experience in the area.

As an independent charity, our policies are based on impartial, clinically based evidence. We work with leaders and decision-makers in the eye health sector, such as government health departments, commissioning bodies, and patient and charity organisations to help shape eye services for the benefit of patients.

We have over 3,500 members worldwide and our work involves:

- Developing the education, training and exam programme for doctors wishing to specialise in ophthalmology
- Setting and maintaining the standards for professional practice of ophthalmology through clinical guidelines
- Promoting study and ground-breaking research in ophthalmology and publishing the results, including through our scientific journal, EYE
- Educating the public in eye health

We support NHS Trusts in reviewing their hospital eye health services, using our expertise in ophthalmic care and management of eye health for patients.

We are not, however, a regulatory body and don’t have a role in disciplinary actions relating to ophthalmologists, and are therefore unable to act on complaints about individual doctors. The General Medical Council (GMC) is responsible for this, as it is for all medical professions.

The GMC holds the central registers of doctors’ qualifications, including details of those who have completed specialist training. Patients and the general public can find out if consultants are registered with the GMC. You can also search for a consultant who is a registered member with RCOphth.

College History

The College was originally formed from the Ophthalmological Society of the United Kingdom and the Faculty of Ophthalmologists. The Society, founded in 1880 by Sir William Bowman, had held a scientific meeting every year with only a few exceptions during the Second World War. The Faculty, formed in 1946 by Sir Stewart Duke-Elder, was the professional organisation for ophthalmologists. The Royal Charter creating the College of Ophthalmologists was granted on the 14 April 1988 and the Royal Licence was granted five years later.

Sir William Bowman continues to be honoured by an eponymous lecture which is given every second year at the annual congress. The lecturer receives the Bowman medal, the most prestigious award offered by the College. Sir Stewart Duke-Elder has given his name to the Duke–Elder Undergraduate Prize Examination which takes place once a year in medical schools throughout the country.
DIDA Sports Organisation is a non profit organisation based between London and Budaka District in the region of Eastern Uganda. DIDA (Develop, Inspire, Discipline, Achieve) is an initiative whose goal is to holistically develop Ugandan, and eventually East African youth from the young ages of 6 years all the way to 18 years and beyond.

DIDA is the vision of its founder, NAKI KADDU, an Irish born and proud Ugandan Business Analyst within the Financial Services Industries.

Her business experience has seen her deliver large scale business improvement and change management programmes.

Naki’s passion for Ugandan Youth development, Sports and philanthropy led her to launching DIDA.
A world where every woman and child is healthy in pregnancy and throughout life.

**OUR VISION**

We use film and innovative media to transform the health and wellbeing of women and children around the world.

**OUR MISSION**

**What we do**

We bring together health experts with film makers to create engaging, accessible films—empowering health workers and communities with vital knowledge and skills about women’s and child health.

**Our approach**

- **Partnership** — lasting, meaningful partnerships are at the heart of our work from film development to delivery
- **Production** — through rigorous expert review, we create accessible, engaging, high quality film content
- **Innovation** — we use new technologies where appropriate to make our content accessible to health workers and communities
- **Making a difference** — putting audiences first, we work to understand how people learn through film

**Our story**

Medical Aid Films grew out of the experiences of Midwife Fiona Laird, working in a refugee camp in Darfur in 2006. Seeing babies dying needlessly from tetanus due to their cord being cut with a dirty knife, she sought a way to share simple but life-saving information with health workers and mothers in the community.

Together with co-founders, Professor Eric Jauniaux and Dr Natalie Greenwold, they had the idea to create a simple animation to inform community members about basic care during delivery of a newborn baby — 10 Steps to a Clean Delivery. With that, Medical Aid Films was born.

A special tribute to the CEO, Catherine McCarthy and her team for the amazing work they are doing to support health development efforts in less developed communities, especially in LMIC’s.
REACH Bwindi has been established by current and former UK volunteers from Bwindi Community Hospital and Uganda Nursing School Bwindi.

We give grants to these and other suitable organisations which provide effective and accessible healthcare to the whole population (currently around 100,000 people) in this part of Kinkiizi Diocese. We also have an active and ongoing professional involvement, via some of our trustees and volunteers, in various projects being run by these organisations or their partners. In both cases, this is in order that people may live their lives free from preventable disease, with affordable healthcare when they need it.

The overall object of REACH Bwindi is: The prevention or relief of poverty or financial hardship in South West Uganda by providing or assisting in the provision of education, training, healthcare projects and all the necessary support designed to enable individuals to generate a sustainable income and be self-sufficient.
When he first arrived on the coast of Nigeria with his wife Helen in 1960, the physician Eldryd Parry was not expecting to spend the majority of his career in Africa. He was only seconded for a year’s term there but he extended his stay by half a year. Having had a successful experience at the University College Hospital in Ibadan, the largest teaching hospital in West Africa at the time, Eldryd came back to the UK and took up academic work on health issues in Africa. What he noticed about British aid at the time was the lack of responsiveness. Rather, British aid was prescriptive and not decided by the countries in need, so in 1988 Eldryd founded the Tropical Health and Education Trust (THET).

The 1990s marked a period of gradual growth for THET. It was during this time that THET was starting to use Health Partnerships as a model of supporting local communities and Ministries of Health in Africa. Our work began as a result of requests from the Deans of the Jimma and Gondar Medical Schools for help with the development of the skills of their young specialist and trainee doctors. As a result, strong and enduring partnerships were formed with Nottingham and Leicester University Hospitals.

We soon realised that the rural patients, many of whom were very poor, needed care near their homes. So a programme of decentralised care at health centres around Jimma and Gondar, with training of local nurses and health officers, began; to date it has transformed the care of Non-Communicable Diseases (NCDs) for rural people. Jimma and Gondar are now centres of excellence for decentralised care and the service continues to provide and expand its training for Health Extension Workers.

THET continues to grow and build on the relationships we have forged with health institutions and professionals around the world. We now have country presence in Ethiopia, Tanzania, Uganda, Zambia, Somaliland and Myanmar in order to co-ordinate the huge range of health partnership work happening in those countries.

Over 25 years later, our work is still inspired by Professor Parry developed and his formative work in Africa – that project work should be responsive not prescriptive, and that if there is mutual trust and a willingness on both sides to learn from each other, then good work will happen. This is the philosophy that THET is built on and one that we will continue to promote as we move forward.

For over twenty-five years THET has been training health workers to build a world where everyone has access to affordable and quality healthcare.

Health workers are at the centre of what we do. Without them, there is no health.

Today, one billion people will never see a qualified health worker in their lives.

THET has a vision of a world where everyone has access to healthcare. We achieve this by training and educating health workers in Africa and Asia, working in partnership with organisations and volunteers from across the UK. Founded in 1988 by Professor Sir Eldryd Parry, we are the only UK charity with this focus.

Over the past nine years we have partnered with over 130 NHS Trusts, Royal Colleges and academic institutions. We work closely with the British government, and are an organisation in Official Relations with the World Health Organization.

From reducing maternal deaths in Uganda to improving the quality of hospital care for injured children in Myanmar, we work to strengthen local health systems and build a healthier future for all.

In the past nine years alone, THET has reached over 100,000 health workers across 31 countries in Africa and Asia in partnership with over 130 UK institutions.

A special tribute to Mr Ben Simms for everything he and THET team are doing to support healthcare development in Africa and globally.
About ICare Foundation

The ICare Foundation is a development initiative functioning to create immediate and lasting improvements to the lives of people affected by lack of healthcare and educational issues, poverty, and disaster.

We believe that the world can and must be promptly transformed into one where everyone can live a full life, free from scarcity. Our mission is to support the marginalized and the vulnerable people in Uganda with a focus on Education and Health. We have on board Specialty Doctors from the National Ophthalmology Society to carry out the surgeries. These include Dr. Ssali Grace Nsibirwa, Dr. Edward Nkurunziza to mention but a few. Together with our partners, we have so far hosted 16 Free Eye Camps, in which we have scanned 5627 patients, Distributed 2750 spectacles, 1885 free eye treatment medicine, successfully done 200 Cataract surgeries and 03 free Cornea transplants, in different parts of Uganda.

We run FREE EYE CAMPS under the theme “YOUR EYESIGHT IS OUR INSIGHT”. With an objective to;

1. Afford under-privileged people the opportunity to assess the condition of their eye sight;
2. Assist under-privileged citizens with serious eye problems to seek medical assistance as soon as possible;
3. Provide eye medicine to people with eye problems in their early stages, and sensitize them on how to prevent further complications
4. Provide free eye care for patients with specialty eye conditions such as diseases of the: i. Retina - detachments, ii. Cornea - corneal grafting; and iii. Orbit - Tumors & Cancers, Glaucoma, Low Vision services. With the technical support of the Ophthalmology department at Mulago hospital, we shall undertake FREE sensitization, screening, diagnosis, eye surgeries, provide free spectacles (eye-glasses), medicines during our camps, thereby countering the high cost associated with private medical check-up and surgeries.

Mission:

To establish a powerful support mechanism to the most vulnerable people in Uganda.
AFRICA CDC

Africa Centres for Disease Control and Prevention (Africa CDC) is a specialized technical institution of the African Union established to support public health initiatives of Member States and strengthen the capacity of their public health institutions to detect, prevent, control and respond quickly and effectively to disease threats. Africa CDC supports African Union Member States in providing coordinated and integrated solutions to the inadequacies in their public health infrastructure, human resource capacity, disease surveillance, laboratory diagnostics, and preparedness and response to health emergencies and disasters.

Established in January 2016 by the 26th Ordinary Assembly of Heads of State and Government and officially launched in January 2017, Africa CDC is guided by the principles of leadership, credibility, ownership, delegated authority, timely dissemination of information, and transparency in carrying out its day-to-day activities.

The institution serves as a platform for Member States to share and exchange knowledge and lessons from public health interventions.

About Us

Africa CDC is a specialized technical institution of the African Union established to support public health initiatives of Member States and strengthen the capacity of their public health institutions to detect, prevent, control and respond quickly and effectively to disease threats.

Objectives

• Establish early warning and response surveillance platforms to address all health threats and health emergencies and natural disasters in a timely and effective manner.
• Assist Member States to address gaps in capabilities required for compliance with the International Health Regulations (IHR 2005).
• Support and/or conduct regional- and country-level hazard mapping and risk assessments for Member States.
• Support Member States in health emergency responses, particularly those which have been declared a public health emergency of international concern (PHEIC).
• Support health promotion and disease prevention through health systems strengthening, by addressing infectious and non-communicable diseases, environmental health and NTDs.
• Promote partnership and collaboration among Member States to address emerging and endemic diseases and public health emergencies.
• Harmonize disease control and prevention policies and the surveillance systems in Member States.
• Support Member States in public health capacity-building through medium- and long-term field epidemiological and laboratory training programmes.
EYE HEALTH AFRICA CIC
LAUNCH

Dr BOIKANYO PHENYO
MODERATOR

AMBASSADOR
JULIUS PETER MOTO
HIGH COMMISSIONER OF UGANDA IN UK & IRELAND

LIVE ON ZOOM &
https://eyehealthafrica.org/launch

Time: 1000hrs - 1300hrs UK Time

Theme: Eye Health Education, skills exchange and capacity building

Partners and Supporters

Professor Lyndon da Cruz
FOUNDER & CHIEF EXECUTIVE OFFICER

Primrose Magala
DIRECTOR & HEAD OF STRATEGY AND DEVELOPMENT

Peninah Wampamba
DIRECTOR & CORPORATE SECRETARY

Morris Kusotera
DIRECTOR & CEO LUBAGA HOSPITAL

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