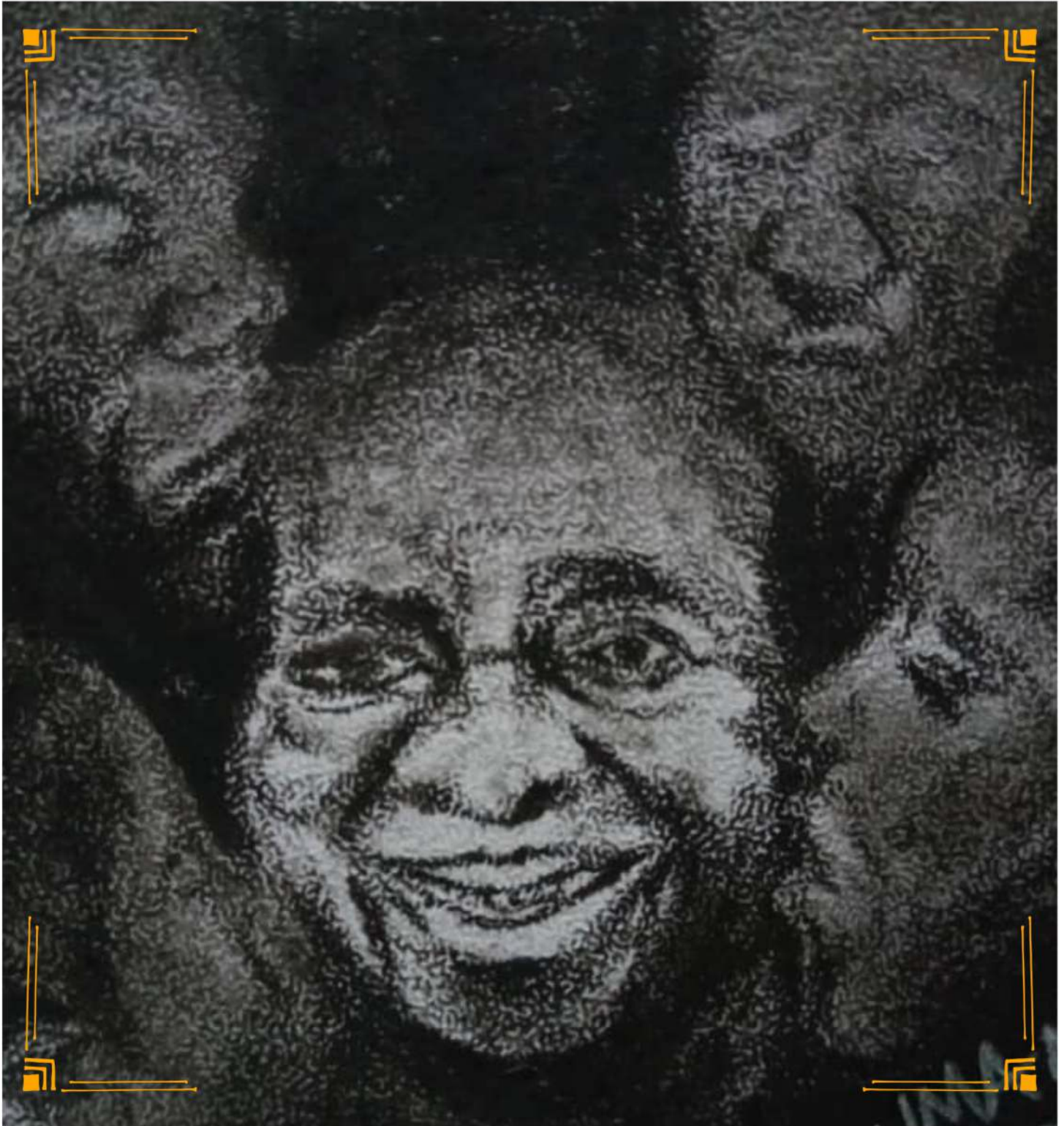


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mission
FOR PRIMARY HEALTH

mission
FOR WATER

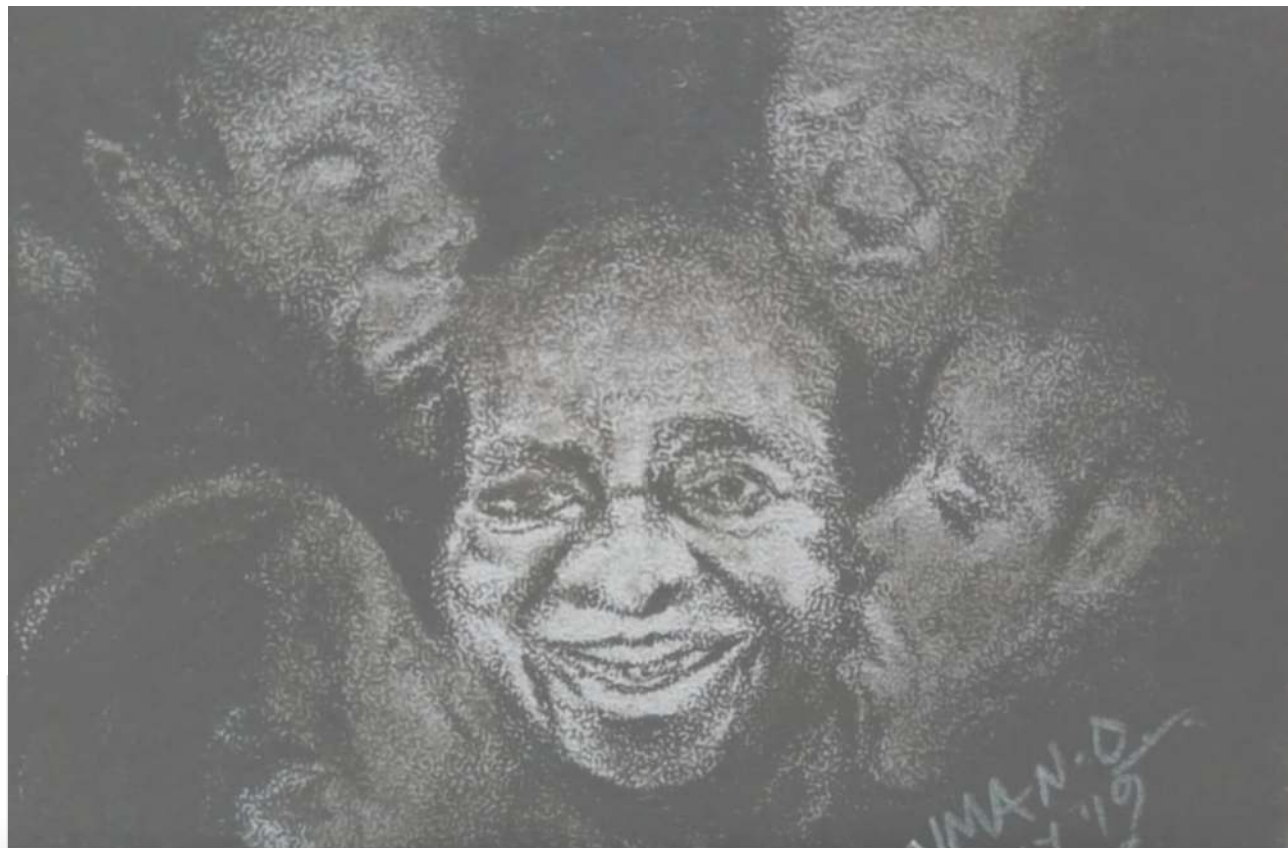
mission
FOR VISION



Tulsi Chanrai Foundation

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"From darkness to light"

"Considering the theme "from darkness to light", I consider this a welcoming message for an eye clinic that offers free eye surgeries. I'm also putting into consideration the joys of their family members and the reconnection they all experience. And if there were any joys, it'd be the priceless satisfaction of having to see once again, the people they love and cherish."

– Nnanna

(painting courtesy- Nnanna, artist, son-in-law of one of the beneficiary at Calabar Eye Hospital)

Message from COO

For TCF, it has been yet another year of excellent work, wonderful experiences, and even more services delivered to the Nation. I am pleased to share our key achievements during the FY 2019/20 through this Report.

Let me first appreciate the efforts put forth by my teams on the ground to achieve what we did to make – “a big difference”. Thank you for your continued and committed work.

The services we delivered were only possible due to the unstinted support provided by our patrons, donors, and the well-wishers. A special thanks to our beloved chairman, Mr. Jagdish M. Chanrai for his leadership, guidance, and his passion for “Caring Capitalism”.

Mission for Primary Health Care provided quality services to 103,036 community members, specially mothers and children ensuring safe delivery of 3266 women; immunizing 2383 children & 4343 pregnant mothers against vaccine preventable diseases; and provided supplementary feeding for 4607 children.

Mission for Vision successfully restored the vision of 9,469 individuals at our Abuja, Birnin Kebbi & Calabar Eye Hospitals.

Mission for Water rehabilitated 548 handpumps & 59 motorized boreholes; repaired 2757 handpumps and maintained over 500 handpumps providing safe drinking water covering 230 LGAs in 32 states across Nigeria.

Unfortunately, towards the end of the year, the world witnessed the COVID 19 pandemic throwing a larger than life challenge to mankind and Nigeria was no exception. The activities implemented by TCF, be it health care services or provision of safe water were part of the solution to the pandemic. TCF continues to provide these services uninterruptedly. Additionally, to support the needy, TCF has initiated palliative support to over 3000 families during the COVID 19 lockdown period in FCT - Abuja, Yola and Zaria.

Let us take an oath to protect ourselves, our families, and our communities against COVID 19 and other prevailing public health challenges...

For a better tomorrow....

Shravan Kumar Kasam



Tulsi Chanrai Foundation

For more than 10 decades, **Chanrai family** is one of the most successful and respected business houses in Nigeria. The family not only believed in but championed the concept of Caring Capitalism by establishing **Tulsi Chanrai Foundation (TCF)**, a not for profit organization in the year **1992**. Since inception, TCF strives **to achieve quality health care services available, accessible and affordable** to the remote and disadvantaged Nigerian population **through scalable and replicable models implemented across Nigeria**.

MISSION:

ESTABLISH IN PARTNERSHIP HIGH QUALITY SUSTAINABLE AND REPLICABLE MODELS IN PRIMARY HEALTH CARE, PROVISION OF SAFE DRINKING WATER AND EYE CARE IN EACH OF THE 6 GEO-POLITICAL ZONES OF NIGERIA.

VISION:

EVERY NIGERIAN SHOULD HAVE ACCESS TO QUALITY PRIMARY HEALTH CARE, SAFE DRINKING WATER AND EYE CARE.



- ✓ Provided maternal and child health services to over 4 million people in partnership with respective state governments and donor agencies
- ✓ Provided access to safe drinking water to over 3.5 million rural population
- ✓ Performed over 126,500 free eye surgeries and established 54 bed eye hospital in Abuja

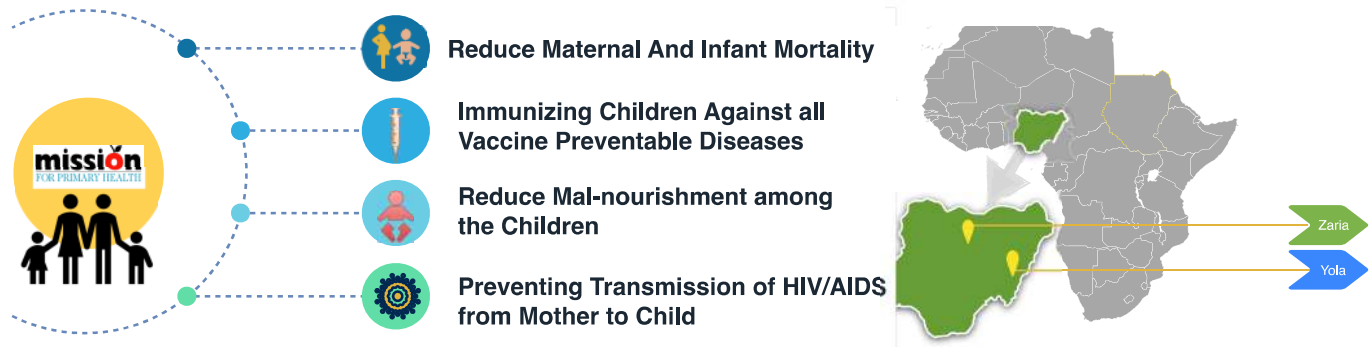


Mission for Primary Health

“FOR HE WHO HAS HEALTH HAS HOPE; AND HE WHO HAS HOPE, HAS EVERYTHING.”

-OWEN ARTHUR

Mission for Primary Health



Primary health care (PHC) is the backbone of a health system. PHC addresses majority of a person's health needs throughout their lifetime. This includes physical, mental and social well-being and it is people-centered rather than disease-centered. PHC is a whole-of-society approach that includes health promotion, disease prevention, treatment, rehabilitation and palliative care.

Nigeria has emerged as Africa's largest economy. However, Nigeria has underperformed in key health outcomes such as child mortality, IMR and MMR. Health is one of the priority sectors for Nigeria. It is recognized fact that Primary Health Care is critical in achieving the goal by delivering equitable, affordable, accessible and sustainable quality health care services to the people of the country. In order to contribute to the nations efforts to achieve this vision, Tulsi Chanrai Foundation (TCF) has been working with partners in a collaboration/partnership with the Government/other agencies to strengthen the Primary Health Care system.

Since 1997, TCF has been working in partnership with State Governments and NPHCDA, implementing model PHC Projects in Oyo, Osun, Kaduna, Adamawa, Imo and Cross River States. Currently, in collaboration with Kewalram Chanrai Foundation TCF is implementing 2 such programs at G. K. Chanrai Memorial Hospital at Zaria and the other at G.D. Chanrai memorial hospital, Yola.

01

MATERNAL & NEWBORN HEALTH SERVICES- Antenatal Care (ANC), Malaria in pregnancy, PMTCT, Labor and Delivery Care, Emergency Obstetric and Neonatal Care (EmONC), Newborn Care, Maternal and Newborn Nutrition

02

CHILD HEALTH SERVICES- National Program on Immunization (NPI), Integrated Management of Neonatal and Childhood Illness (IMNCI), Child Nutrition, Growth Monitoring, Infant and Young Child Feeding, Identify, Treat or Refer Cases

03

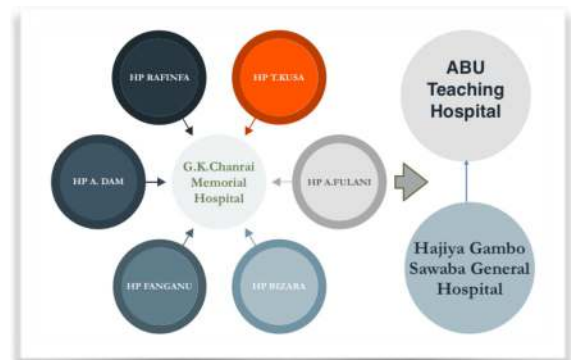
PREVENTION AND CONTROL OF COMMUNICABLE DISEASES & NON-COMMUNICABLE DISEASES- STIs/HIV/AIDS Prevention and Control, Prevention and Control of Malaria, Prevention and Control of Diseases with Epidemic Potential

04

REPRODUCTIVE HEALTH SERVICES- Family Planning and Counseling

Mission for Primary Health

- Yola PHC program (YPHC) located in Yola south LGA, covers a population of more than 89000, and renders services to inhabitants of 55+ villages. Started in Jan 2005, TCF has signed MoU with Ministry of Health, Adamawa State Government, Yola South Local Government and Kewalram Foundation to implement the PHC Program in Yola South.
- The GD Chanrai Memorial Hospital (GDCMH) started operations from Dec 07, 2009.
- GDCMH offered services as a referral Centre to the health posts scattered in the three wards of Yola South LGA.
- The communities have been served with G.D.Chanrai Memorial Hospital and 16 health posts spread across 3 wards (Namtari, Yolde Kohi and Ngurore wards) of Yola South LGA.
- Zaria PHC project located in Dambo Ward of Zaria covers a population of more than 17400, across 24 settlements; with G.K.Chanrai Memorial hospital covering Dakace and other surrounding communities; started in the year 2015, TCF signed MoU with Zaria LGA and Kewalram Foundation. Since then project has expanded by adding 6 Health posts at Rafnfa,, Tudun Kusa, Ang-fungannu Ang. Malamai Dam Ang. Fulani and Bizara cover other settlements.
- Indirectly the project supports entire ward of Dambo with population of 63975 as a primary referral unit, Patient flow and Referrals from neighboring wards of Zaria LGA and neighboring LGAs (Soba) very common
- Effective referral systems from the HPs to the GKCMH are essential to save lives and ensure both the continuum and quality of care, Further mechanism in place with support from ambulance services to secondary/tertiary referral units



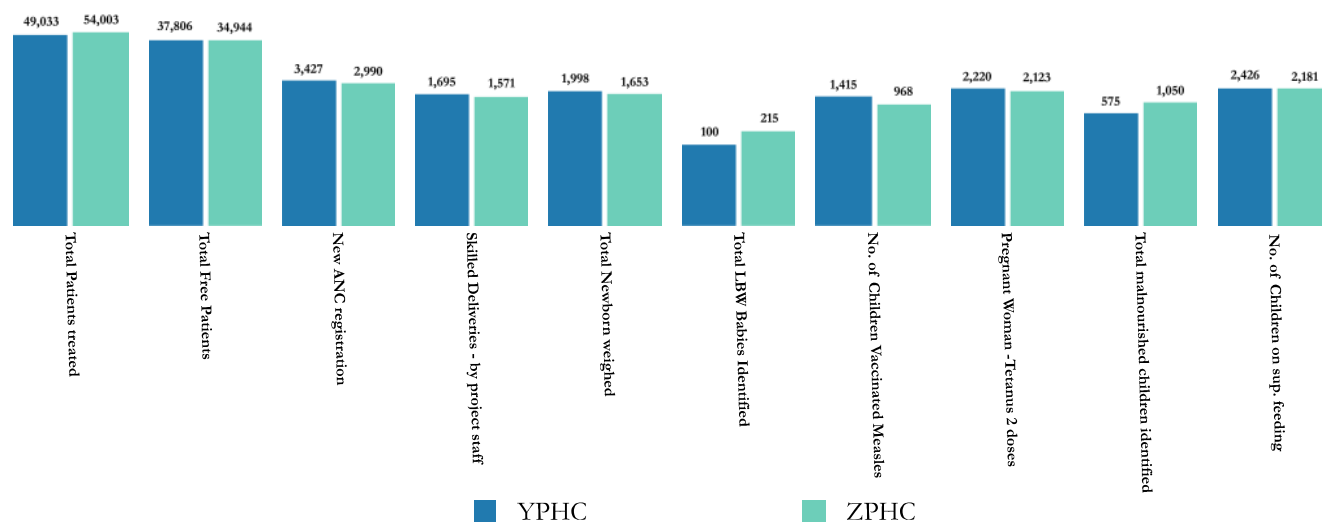
Mission for Primary Health

During this Financial Year, the project has witnessed considerable growth both in terms of client uptake and accessibility at both project locations while two new health-posts were added at Zaria PHC.

Overall, the project has seen 26% increase in the footfalls accessing PHC services. The increase was witnessed across the key services such as 34% increase in the services accessed by priority population (treated completely free of cost); ANC registrations increased by 10%; Maternity care, as in deliveries conducted by TCF staff rose by 26%; Vaccination of children as per national immunization schedule showed improvement as Measles vaccination increased by 32%; and pregnant women receiving TT 2 doses increased by 36%. Further, there was an increase by 23% among malnourished children put on supplementary feeding. The increase in service uptake may be attributed to accessibility, affordability, availability and quality of care being ensured.

Mission for Primary Health - Performance 2019/20

Indicator	YPHC	ZPHC	Total	% Change
Total Patients treated	49033	54003	103036	26%
Total Free Patients	37806	34944	72750	34%
New ANC registration	3427	2990	6417	10%
Skilled Deliveries - by project staff	1695	1571	3266	15%
Total Newborn weighed	1998	1653	3651	14%
Total LBW Babies Identified	100	215	315	39%
No. of Children Vaccinated Measles	1415	968	2383	32%
Pregnant Woman -Tetanus 2 doses	2220	2123	4343	36%
Total malnourished children identified	575	1050	1625	24%
No. of Children on sup. feeding	2426	2181	4607	23%

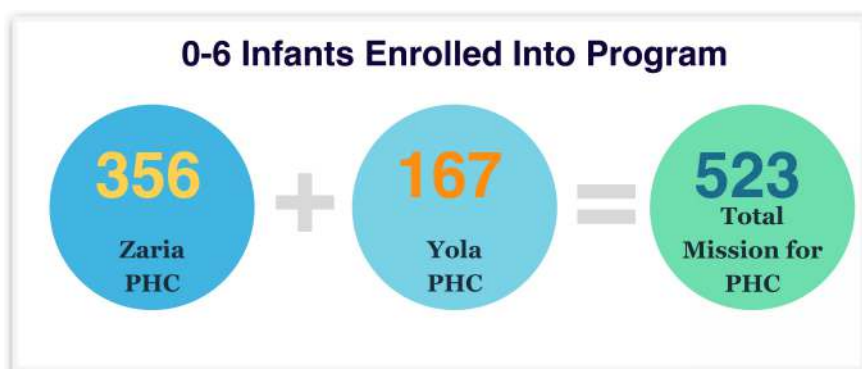


Mission for Primary Health

Management of acute Malnutrition in infants (0-6 months) MAMI Program

TCF has been implementing Mission for Primary Health Care program in Nigeria for over 2 decades. Time and again, the program incorporated several need-based components such as malnutrition support for children, pregnant women in association with the government or other stakeholders. One of the key gaps identified was targeted nutrition support program to the infants (0-6 months).

During the visit of Ms. Kusum Chanrai, the program need was discussed. Initially, to understand the need a pilot phase of the program was implemented in Zaria. Based on the need and feedback from the pilot program, a full-fledged program was supported by Ms. Kusum Chanrai and implemented in both Yola and Zaria PHC sites during the FY 2019/20. The project was able support 523 infants 0-6 months. All these children were provided with formula fed during the recommended period.



Key Indicators	Yola PHC	Zaria PHC	mission FOR PRIMARY HEALTH
Total New children identified during the year	167	356	523
Total graduated during the year	97	159	256
Total no of defaults / migrated	16	90	106
Total transferred to OTP >6 months	11	27	38
Total deaths if any	11	6	17
Total formula feed units issued during the year	1264	1346	2610

SKILLED MATERNAL CARE- MAKES A DIFFERENCE



A Grand-Multi-Parous woman (gravid -10; Parity -9) presented in labour at term gestation with drainage of liquor and passage of show to G.K.Chanrai Memorial Hospital, Zaria.

She was earlier booked in the facility and had a total of five visits, had tetanus toxoid dose, routine hematinic, antihelminthic, nutritional supplements and two sessions of ultrasound scanning at no cost.

On examination was found to be 5cm dilated with very poor contractions. She was augmented with oxytocin in intravenous fluid and was delivered subsequently of a neonate with good fetal outcome. Third stage of labour was also actively managed and she was very stable afterwards clinically.

She was duly counseled on the need for family planning and was subsequently discharged with an advise to review for post-natal care and Immunization for the newborn.

NEONATAL CARE- A NEED FOR TIMELY INTERVENTION

A 3 day old baby who presented to the facility with a day history of yellowness of the eyes which was noticed to be progressively deepening and continuous high grade fever. Reduced sucking was also noticed by the mother. On examination child was febrile (38 degree Celsius). Reflexes were examined, Moro and sucking were found to be normal.

The newborn was admitted into our neonatal unit, where he was placed under phototherapy with both eye padding and perineal padding, antibiotics were given and the fever was on a downward trend. The baby was later referred to a tertiary centre for further management and exchange blood transfusion. He was discharged after five days and was followed up at G.K.Chanrai Memorial hospital, Zaria



Mission for Primary Health



Mission for Primary Health



Mr. NG Chanrai, CEO Kewalram group, graced ZPHC project on 26th September 2019.



Mission for Water

“YOU WILL NEVER SOLVE POVERTY WITHOUT SOLVING WATER AND SANITATION.”

-MATT DAMON

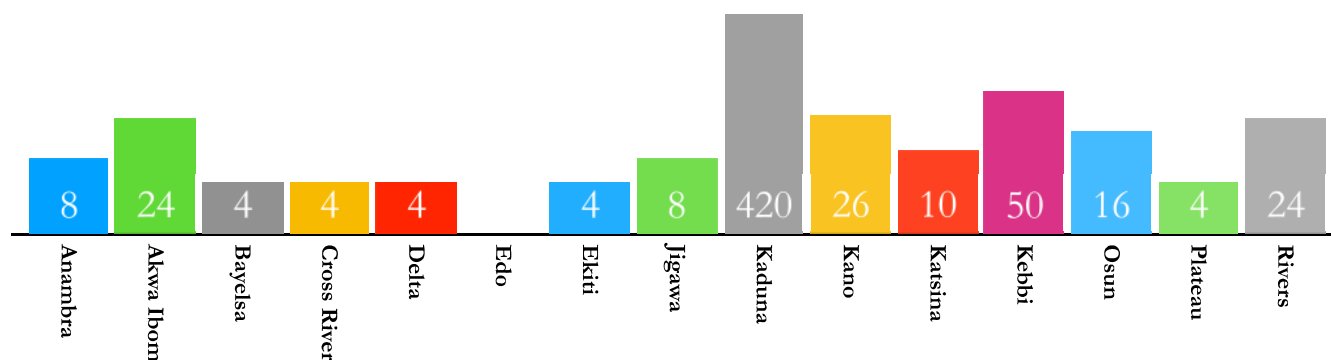
Mission for Water

Sustaining functionality of Improved Water Supply and Sanitation Facilities is a major challenge in Nigeria that accounts for nearly 30% of the population without Access to safe water. This is nearly one third of the population without access to improved water supply. The National WASH Routine Outcome Monitoring conducted by the National Bureau of Statistics of Nigeria in the year 2018 reported that, 22% of improved water facilities broke down within the first one year of installation and only 11% of water facilities are dependable in the terms that, they are operated and maintained. A recent world bank 'WASH Poverty Diagnosis' reveals that 46% of all water schemes in Nigeria are non-functional (as at 2015) and nearly 30% fail in the first year of operation after construction. Low access to improved water coupled with poor sustainability and low functionality of existing inventory of water supply schemes will further swell the huge budgetary resources required to meet the SDG target on universal access to basic water supply by 2030. The narrative above entails that, even where improved water supply facilities are provided enough to address the need of the people, access to water supply will be on the declining path owing to lack of operation and maintenance.

The indices highlighted in the paragraph above point to the fact that, building local capacity for operation and maintenance is a very important aspect in programming WASH access to the unserved population in Nigeria. Water supply and sanitation facilities installed will only continue to yield services where there is an appropriate institution at state and local government level to address operation and maintenance needs and if there are local businesses providing services of supplying borehole spare parts and skills are available in communities to repair facilities whenever broken down.

Tulsi Chanrai Foundation – Mission for Water Programme is focused on the concept of Establishing Village Level Operation and Maintenance of Drinking Water facilities across Nigeria through the establishment of VLOM system at the State and LGA level, formation of WASHCOMs, Practical Training of Local Area Mechanics, Capacity Building of pump caretakers on Preventive Maintenance and Repair of Water Sources, Water Quality Monitoring and Surveillance and Establishing linkages with a Local Supply Chain for quality low-cost materials. The program focuses on rehabilitation of existing drinking water facilities rather than drilling new boreholes and inculcating a maintenance culture with the community. The critical component of TCF 'Mission for Water' Programme is community engagement. In the last 23 years, with the rehabilitation of 7,285 hand pumps and 167 motorized boreholes in 230 Local Government Areas of 32 States of Nigeria, the program has benefitted over 3.80 million remote Nigerian people. In the year 2019-20, TCF has rehabilitated 548 hand pump boreholes and 59 motorized boreholes in 57 LGAs across 15 States of Nigeria with the support from UNICEF and other donors. Apart from that a total number of 42 new mechanics were trained for the repair and maintenance of hand-pump boreholes, and 09 new local traders were trained for ensuring supply chain of spare parts by TCF. All the mechanics are equipped with standard toolboxes. Local Traders had received seed stocks of spare parts to start their business. 204 trained mechanics had successfully repaired 2,757 hand pump boreholes and 139 motorized boreholes in 90 LGAs across 19 states of Nigeria during the year 2019-20. TCF had successfully strengthened 2,139 community WASHCOMs on preventive maintenance, water quality monitoring and collection of user charges in 2018-19.

Borehole Rehabilitated 2019/20

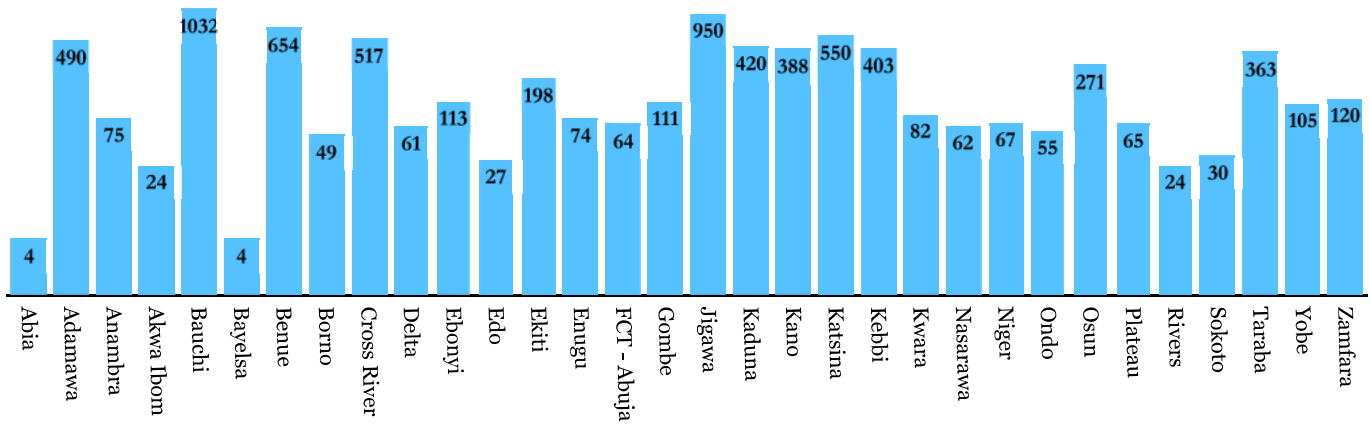


Mission for Water

S#	State	No. of LGAs Covered	Total Achievements	Boreholes rehabilitated	Total Achievement
			<i>April 1997 - March 2019</i>	<i>April 2019 - March 2020</i>	<i>April 1997 - March 2020</i>
1	Abia	2	4		4
2	Adamawa	5	490		490
3	Anambra	5	67	8	75
4	Akwa Ibom	4		24	24
5	Bauchi	10	1032		1032
6	Bayelsa	2		4	4
7	Benue	12	654		654
8	Borno	4	49		49
9	Cross River	18	513	4	517
10	Delta	2	57	4	61
11	Ebonyi	7	113		113
12	Edo	2	26	1	27
13	Ekiti	9	194	4	198
14	Enugu	4	74		74
15	FCT - Abuja	7	64		64
16	Gombe	9	111		111
17	Jigawa	15	942	8	950
18	Kaduna	22		420	420
19	Kano	10	362	26	388
20	Katsina	11	540	10	550
21	Kebbi	15	353	50	403
22	Kwara	3	82		82
23	Nasarawa	6	62		62
24	Niger	2	67		67
25	Ondo	5	55		55
26	Osun	7	255	16	271
27	Plateau	2	61	4	65
28	Rivers	2		24	24
29	Sokoto	1	30		30
30	Taraba	16	363		363
31	Yobe	5	105		105
32	Zamfara	6	120		120
	Total	230	6845	607	7452

Mission for Water

Total Boreholes Rehabilitated (April 1997 - March 2020)



Glimpses of rehabilitation of hand pump boreholes in Nsit Atai LGA of Akwa Ibom State in May 2019



Glimpses of rehabilitated hand pump boreholes from Kaduna State during June 2019

Mission for Water

Aisha Shehu - Female LAM- helping her community to access drinking water in Batagarawa LGA of Katsina State

Several communities in Batagarawa Local Government Area in North West Nigeria didn't had access to safe drinking water and proper hygiene and sanitation. They lost many of their children due to water borne diseases like cholera, typhoid, diarrhea and malaria which are common among the people. Many families relocated in the need of drinking water and livestock population.

Batagarawa LGA was established in 1991, it has an area of 433 km and a population of 184,575 as per 2006 census. The major tribe populated by hausa people and other tribes that are settled with them. The LGA has 20 wards with 239 communities. The people are traditionally farmer and cattle herder, few of them are also engaged in other occupation.

Aisha Shehu a 23-year old single, student of Federal College of Education, FCE Batagarwa, studying Islamic Education, joined WASH programme supported by UNICEF and UKAid during mid-2018 as a Local Area Mechanic. She intended to contribute her part for her community to resolve the issues related to water scarcity and water quality for the local communities. She had interest to be a Local Area Mechanic (LAM) with local government which made her to meet WASH Unit of the LGA, she was trained in handpump repair works by Tulusi Chanrai Foundation. She feels enjoyed helping women and children to overcome the problems of water scarcity and suffering in her area.

Aisha explained her achievements, before she become LAM everything about handpump was strange to her, now she understands better. Now there is more awareness on water facility maintenance among the community members. She received a toolbox immediately after the training for carrying out major and minor repairs.

Aisha recollects that, there were cases when men divorced their wives for being unhygienic. She further explains that, it all happened due to unavailability of water and poor awareness on hygiene & sanitation. Most of the men were abusing their wives for being dirty, unhygienic and not taking care of the hygiene of their children. The harsh weather condition further increased their difficulty. Female members are generally responsible for washing clothes,



utensils, taking care of children and maintaining hygienic environment around house and toilets. School children were also affected, they were going far away to get drinking water for their family, this denied most of them from being regular to the school. Any kind of fault of handpump, she always takes lead and go to repair it as soon as the information reaches to her.

Another challenge for Aisha was the being a female, due to which so many men saw her working with men doing a job meant for men, such is strange in a remote community in Northern parts of Nigeria. Another challenge is managing time with her school, studying Hausa Education at the FCE – Batagarawa which is far from her own community. She is proud to be a LAM, always try to encourage and motivate other women to join her to help men and their communities to tackle water related problem in the region. Her activeness not only helped women and children but the entire community including the livestock. After her training, she started meeting community members, sensitizing women and children on various hygiene and sanitation issues and importance of safe water alongside the other LAMs. She actively involved and supported VLOM member and handpump caretakers during the rehabilitation of broken-down hand pumps. By initiating and ensuring that she also gets firsthand information (through SMS) from caretakers on any faulty handpump, she actively takes quick action for any repair work so that people don't suffer for long time.

Aisha serves as an inspiration to other girls in her community. She is outstanding, she is the only female LAM in the Batagarawa LGA who is very active. As against the general believe that females are not allowed to take part in such activity; Aisha is an exception. She is an active LAM and every girl wish to be like Aisha.



Mission for Water

Community Group-WASHCOM lead to Regular Water Quality Testing

With 182 households and a population of 1208 (2017), Umunevili community in Anambra East LGA of Anambra formed WASHCOM-Water, Sanitation and Hygiene Committee with the implementation of UNICEF supported Water Supply and Sanitation Sector Reform Program-II, Nigeria, funded by EU-European Union. Umunevili-Eziagulu are indigenous Igbo tribes those are involved in traditional business of farming Cassava, Yam and Maize.

The MICS 2016-17 finds that the percentage population using improved drinking water in Anambra is 84 against national average of 64. But, 9 out of 10 houses use no water treatment at household level against national average of 8. Six out of ten families in Anambra state use improved latrines and ODF population is in just 10 percent cases. On overall drinking water and sanitation ladder Anambra fairs at 51 percent to Nigeria's average of 27. The survey in the state further finds that in 10 percent cases a separate place for handwashing and soap in 5 percent. The E.Coli risk was 53 percent at water source and 76 at household level. The situation across cannot be said good.

Angela Nwawuo's an energetic young entrepreneur and trainer now, with her husband are excited with the concept and results of the programme in their community, under which the concept of Water Sanitation Hygiene promotion was propagated in the community and WASHCOM formed, which is now effectively managing a Solar Motorized Borehole. She was also elected as WASHCOM's secretary by Umunevili-Eziagulu community.

She regularly trains and generate awareness among the community members on various aspects of water and sanitation like; drinking water safety, water quality, community & personal hygiene, community sanitation, reducing open defecation practices, water testing with various aspects of child and women health.

Angela, also a petty trader, supports the WASHCOM Chairman in managing and looking after the water facility including regular meetings on every last Sunday of a month and discussing the issues. The committee members will visit each house to check the storage, status of toilets, hygiene condition around community, water management and sanitary aspects. The members also visit health center near to them on quarterly basis to see the health record of community to observe the difference, which was huge since the programme implementation and availability of safe water in this community.

The concept of VLOM-Village Level Operation & Maintenance was unique to maintain the solar based water pumping facility in Umunevili. A series of training under the project like Water Safety Planning, Operation & Maintenance, Water Quality surveillance, Hygiene and

Sanitation etc. were received by Angela, who further helped the community to get the benefits of the programme. There was precarious situation before the implementation of the programme about availability of safe water, children suffering from diarrhea, jaundice and typhoid, and children not going to their schools and sometime families had to buy drinking water from the market.



Now, each household pays water user fee of Naira 10 each for an average of per 20 liter of drinking water they fetch, and accordingly the WASHCOM members keep the momentum of collection of each household on regular basis leading to a deposit of Naira 150,000 in their account by now. They also have provision of a tap around major community compounds for easy access of water on a rotation basis. The repair work of solar panel, generator and pump was done recently by the trained mechanics from the water user fee account and their dependency on LGA or government funds have reduced substantially.

The practice and facility of regular 'water quality test' started here with the help of Unicef-TCF team, with the provision of H₂S vial. Here the LGA WASH Unit in coordination with community ascertains the quality of the drinking water, at the source-during transport-point of use and in case of any water quality issue immediate action used to be taken by community members with the help of LGA officials.

Mission for Water



Water Sample Collection and Quality testing using WAGTECH kit in Isoko South LGA of Delta State during May 2019



WASHCOM strengthening in Edo State on VLOM and WQMS during July 2019



Glimpses of repair of broken-down hand pump boreholes by the trained mechanics in Mubi South LGA of Adamawa State and Riyom LGA of Plateau State during July 2019

Mission for Water



Distribution of tools and safety kits to the newly trained Local Area Mechanics in Geidam LGA of Yobe State by the LGA team on 27th December 2019



Orientation of facility caretakers on VLOM and IVR based facility tracking system in Nsit Atai LGA of Akwa Ibom State held during July – August 2019



Glimpses of the Training of Local Area Mechanics for the repair and maintenance of



Mission for Vision

"THE ONLY THING WORSE THAN BEING BLIND IS HAVING SIGHT BUT NO VISION"

-HELEN KELLER

Mission for Vision

The World Health Organization (WHO) estimates that globally there are 39 million blind people and another 285 million are visually impaired. Africa accounts for 15% of blindness. Almost 80% of the causes are either preventable or treatable.

There is paucity of survey data from West and Central Africa where some of the poorest countries in the world are located. As poverty is closely associated with blindness, it is likely that the age-specific prevalence of blindness in West Africa is higher than in industrialized countries and in Asia.

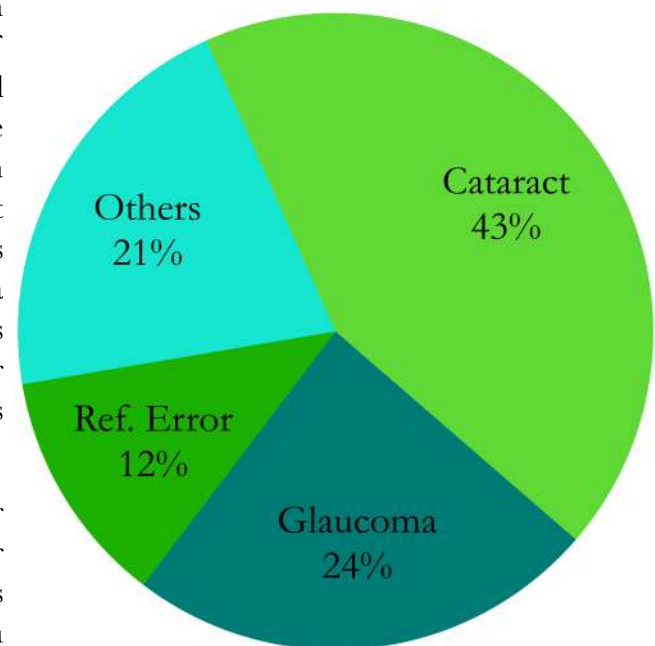
Nigeria is the most populous country in Africa with an estimated population of over 190 million which also makes it the seventh most populous country in the world. Despite its size, there has been no recent national estimate of the prevalence and causes of blindness and visual impairment. Most data used for planning eye care services have been generated from hospital-based studies or special population groups, or from small, focal surveys.

The studies showed that 4.25 million adults aged ≥ 40 years in Nigeria have moderate or severe visual impairment or blindness. The >1 million adults with blindness in Nigeria are therefore in urgent need of attention, as are the additional 3 million with severe and moderate visual impairment, who would benefit from eye care services. This million-plus pool of persons with blindness also impinges on national productivity, as it entails not only a loss of income of affected individuals but also lost wages and time of those caring for them. In a resource-constrained country like Nigeria, priorities should be set with specific attention paid to the older population, as an overwhelming proportion of blindness is concentrated among this segment of the population.

Prevalence of blindness in Africa region is at $\sim 7,000$ per million population, much higher than some of the other regions, with an estimated 0.78% prevalence of blindness in general population and 4.2% in above age of 40 in Nigeria. Cataract is the leading cause - $\sim 43\%$. 84% of all causes of blindness were either preventable or treatable.

Cataract surgical coverage (CSC) is a good indicator of the extent to which the need for cataract surgery is being met at the population level. Compared to many other countries in the developing world, the CSC in Nigeria is very low. **Only 22.8%** of all cataract blind eyes had undergone cataract surgery which means that more than $\frac{3}{4}$ of blind eyes had not undergone surgery. Older persons (70+ yrs), those residing in rural areas and the illiterate had much lower CSC compared to younger persons (< 70 yrs), urban residents and the literate.

Treatable blindness



Mission for Vision

Mission for Vision at TCF focuses on addressing avoidable blindness through:

- Increasing the cataract surgical rate
 - Increase accessibility, availability, and affordability to quality eye care services
 - Increase the number of surgeries conducted through free and subsidized surgical interventions
- Increase local ophthalmic capacities through training to address the barriers of availability, accessibility, and affordability
- Partnership with key stakeholders such as federal government, state

Mission for Vision performed **126521+** eye surgeries till date

Currently, TCF is rendering high quality eye care services through our centers at:

- Tulsi Chanrai Foundation Eye Hospital, Abuja, FCT
- Hafsat Eye Center, Birinin Kebbi, Kebbi State
- Calabar Eye Center, Calabar, Cross River State

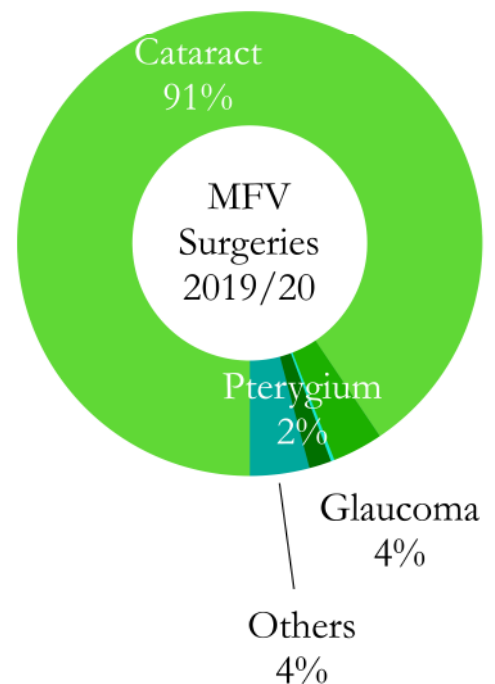
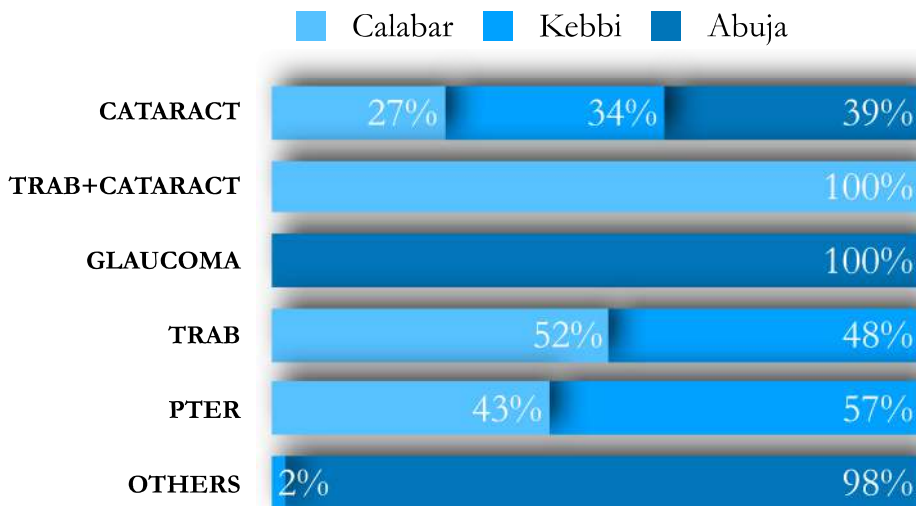


Mission for Vision

During the FY 2019 – 2020, TCF has conducted 9476 eye surgeries at these three locations, of which 8475 surgeries are performed completely free of cost and remaining at a very subsidized cost.

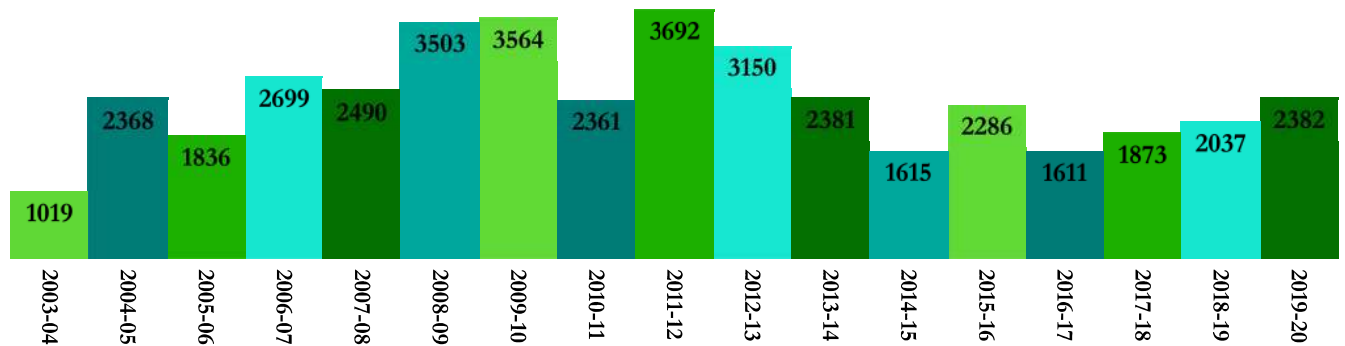
MFV- Ophthalmic Surgeries Details (April -2019 to March-2020)

	CATARACT	TRAB+CATARACT	GLAUCOMA	TRAB	PTER	OTHERES	TOTAL
Calabar	2306	1	0	12	63	0	2382
Kebbi	2903	0	0	11	84	9	3007
Abuja	3392	0	311	0	0	384	4087
Total	8601	1	311	23	147	393	9476

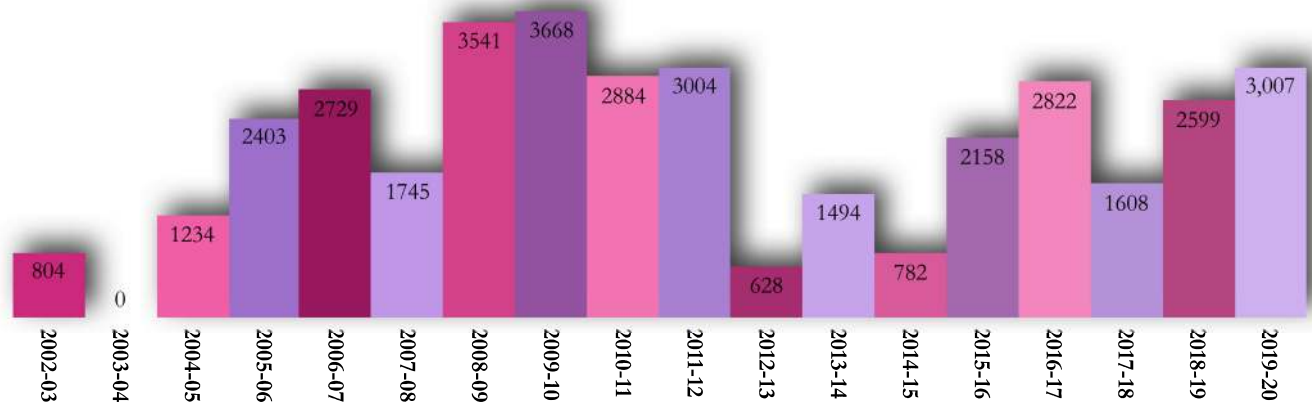


Mission for Vision

At Calabar eye center, in Cross River state. Since inception of the program in 2003, TCF had successfully conducted 40867 surgeries (at an average of 2400 surgeries per year)



At Hafsat Eye Centre, in Birnin Kebbi, Kebbi state. Since inception of the program in 2002, TCF had successfully conducted 37108 surgeries.



Mission for Vision



"I AM HAPPY, I WILL BECOME AN EYE DOCTOR"

Post-Surgery –
The woman is
back into business
of selling fish –
HAPPY and
CONTENTED –
Mother of an
aspiring
Ophthalmologist



30 Years of
Blindness

“WoW – I can see
after 30 Years”

Mission for Vision

“Miracles can happen in a day”



Patients – Post Surgery Counselling and Discharge



“We are very Happy to regain the sight – Thanks to TCF and the DONORS”

TCF Eye Hospital, Abuja

The hospital provides **outpatients services; investigations** for case detection or further analysis such as confirmatory tests for Glaucoma and others; **Optical services** to address refractive errors; Conducts **outreach camps** to identify eligible patients for **free surgical interventions; subsidized surgical interventions** and **training** of ophthalmic personnel.

On a whole, TCF has provided OP services to 24,583 patients of which **2004** were referred for Investigations. Based on the OP services and investigations, vision was restored, regained, or maintained for around 8932 individuals with 4845 refractive errors rectified and 4087 surgeries conducted. Of these surgeries 76% of them were conducted completely free of charge for economically and socially disadvantaged; rural and remote Nigerians, identified through outreach camps conducted by TCFEH. To identify beneficiaries of free surgical program, TCFEH conducted 109 outreach camps within the radius of 100 KMs of FCT Abuja.



The President, Federal Republic of Nigeria addressing the gathering at the TCFEH Commissioning event



The Chairman & Trustee, TCF addressing the gathering at the commissioning event

Key Activity	Achievement
Out Patient (OP) Services	24583
New (OP)	12648
Review (OP)	11935
Investigations	2004
Optical	4845
Outreach Camps	109
Surgeries	4087
Free	3086
Subsidized	1001

TCF Eye Hospital, Abuja

Major Events:

1. TCF EH has observed World Sight day. As part of World Sight day, TCF has conducted
 - a 2-day poster exhibition for public to build awareness on eye issues and eye care for all age-groups. Over 300 people have visited the exhibition and were educated on eye issues, prevention measures and quality eye care. Both representatives from Ministry of Health and National Blindness Program, Nigeria graced with their presence at the exhibition.
 - Free eye screening camps at schools in Abuja and screened around 200 children for eye related issues.
 - General awareness through special programs on Radio and Television



Formal inauguration of Eye Exhibition by Dr.Nasir Sani Gwarzo – Director MoH and Dr.Evans – Director, Medical & Diagnostics dep

2. On World Glaucoma Day, March 12, 2020, the hospital has conducted special screening for Glaucoma. To raise awareness and reiterate the importance of early detection and treatment for Glaucoma, Dr. Johnpaul Okolo, one of our consultant ophthalmologists was invited to be on National news program 'Nationwide' by Nigerian Television Authority



3. Community Activities:



Community Camp



Congenital cataract identified among four children in the same family. All four underwent the surgeries successfully in TCFEH on Nov 2019

