



## A BRIGHTER FUTURE

AFTER CATARACT SURGERIES, EBOLA SURVIVORS IN LIBERIA REGAIN SIGHT

ADVANCING PARTNERS & COMMUNITIES
PHOTO JOURNAL









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#### **ADVANCING PARTNERS & COMMUNITIES**

Advancing Partners & Communities is implemented by JSI Research & Training Institute, Inc., in collaboration with FHI 360. The project focuses on advancing and supporting community programs that seek to improve the overall health of communities and achieve other health-related impacts, especially in relationship to family planning. Advancing Partners & Communities provides global leadership for community-based programming, executes and manages small- and medium-sized sub-awards, supports procurement reform by preparing awards for execution by USAID, and builds technical capacity of organizations to implement effective programs. Learn more about Advancing Partners & Communities at advancing partners.org.

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#### JSI RESEARCH & TRAINING INSTITUTE, INC.

JSI Research & Training Institute, Inc., is a public health management consulting and research organization dedicated to improving the health of individuals and communities. JSI collaborates with government agencies, the private sector, and local nonprofit and civil society organizations to improve quality, access and equity of health systems worldwide.

#### FHI 360

FHI 360 is a nonprofit human development organization dedicated to improving lives in lasting ways by advancing integrated, locally driven solutions. FHI 360 serves more than 70 countries and all U.S. states and territories. FHI 360's work is grounded in research and science, strengthened by partnerships and focused on building the capacity of individuals, communities and countries to succeed.

Photos: Joshua Yospyn/JSI

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worker in Monrovia,
Liberia, contracted Ebola while helping patients during the outbreak three years ago.

He was lucky to have survived. But a few months after he was declared Ebola-free, he started having trouble with his eyes. At first they would tear when he tried to read or write, then everything started getting dim. Soon, he could barely see.





William was not alone. A number of Ebola survivors now suffer from uveitis—inflammation inside the eye. Some have also developed cataracts that have left them legally blind.

While a handful of Liberian health care providers are trained to perform cataract surgery, the process is more complicated for survivors because the Ebola virus may still be in their eye.



efore the outbreak, little was known about survivor health issues, but it quickly became apparent that access to appropriate health services was lacking.





his fall, cataract surgeons, ophthalmologists and lab specialists from Emory University and Johns Hopkins University Hospitals came to Liberia to fill this immediate need—helping survivors like William regain their sight. In the long term, USAID is also working to build self-reliance in Liberia by training Liberian health workers on how to address these health issues on their own.



illiam's wife, who helps support the family's 10 children, was reluctant to let William undergo cataract surgery because of local fears that the eye is removed during surgery.

"She said, 'They'll spoil both your eyes. Don't agree. Don't sign.' I said 'No, I'll give it a go.' "





nother Ebola survivor, Levi, was a farmer until he was stricken with the Ebola virus. Like many in the region, he lost his wife, parents and brother to Ebola. Now he is left to take care of his two children as well as his brother's three children.

For Levi, clear vision is crucial to his family's well-being—otherwise, it will be harder for him to find work to support them.

"Even if I get a janitor job, I will be happy, because I will be able to send my children to school," he said.



# DETERIORATING EYESIGHT

eatrice was admitted to an Ebola Treatment Unit in 2015 for two weeks with her child, who later died. Like many survivors, she faced stigma and discrimination in her community after she was discharged.

"They did not let me go around them. When I would go buy anything they would refuse my money," she said.

As Beatrice's eyesight began to deteriorate, she was unable to see anything.

After almost three years of nearblindness, Beatrice is ready to get back to a normal life. The surgery allowed her to see her newborn child for the first time.

"I am able to take care of my children, to walk by myself, to go to the market, to sell, to do anything," she said. "I can [live] like before."



o check if the Ebola virus was still present in a survivor's eye, the surgical team performed anterior chamber taps by inserting a needle into the front part of the eye to sample fluid.

The taps were performed in a new isolation unit at ELWA Hospital, donated through a <u>USAID Grand Challenge Innovation</u> <u>Grant</u>, using all precautions to create a low-risk environment for the surgical staff.

They then took the fluids to the Liberian Institute for Biomedical Research for testing to determine the presence or absence of the Ebola virus genetic material. If pieces of the virus were not found, it was considered safe for the surgical team to proceed with cataract surgery.





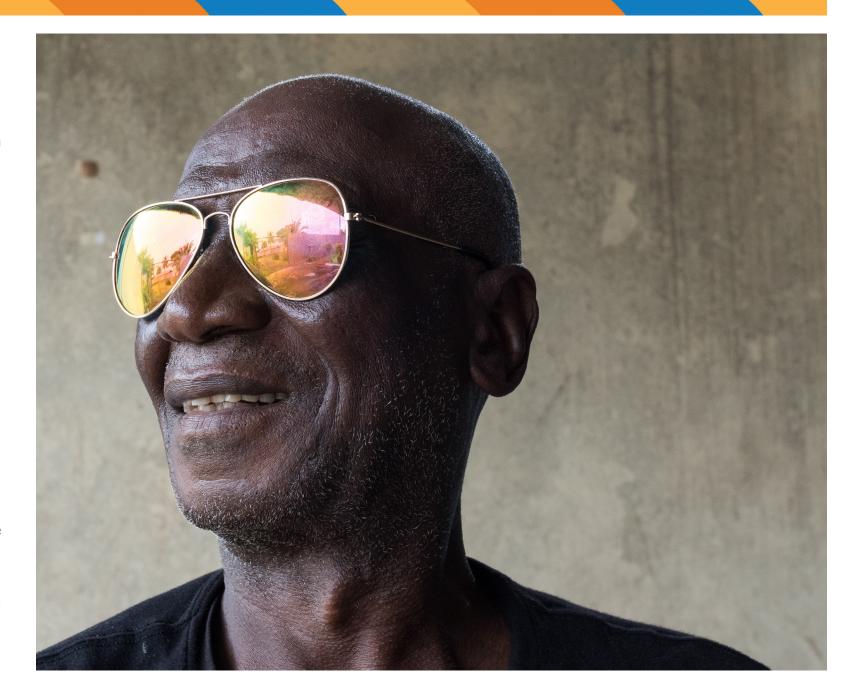


he day after their surgeries, William, Levi and Beatrice woke up with clearer vision and an eagerness to start living their lives as they had before they had contracted Ebola.

William was one of the few patients to receive cataract surgery on both eyes.

"I was a little bit afraid when I got in," William said. "I thought it was gonna hurt. Or I thought it was gonna bust my eye. Because that was the story people gave me, discouraging me. But that didn't happen. Now, this morning, I can see bright."

Levi urged other survivors who are suffering from cataracts to come in for surgery. "They shouldn't be afraid," he said. "They should come out. They should come and be free from darkness."



### **ABOUT THIS STORY**

The Ebola Transmission Prevention & Survivor Services program, funded by USAID and implemented by JSI's <u>Advancing Partners & Communities project</u>, supports recovery efforts in Sierra Leone, Guinea and Liberia. The program aims to address the risk of Ebola resurgence and to ensure access to the clinical and mental health care services needed by survivors. By engaging clinical specialists to train medical students, residents, interns, and mid-level health workers in three specialty areas: ophthalmology, rheumatology, and psychiatry, we aim to build a more self-reliant health workforce in Liberia.

In late September 2017, we partnered with Samaritan's Purse, ELWA Hospital, and the National Institutes for Health to bring in cataract surgeons, ophthalmologists and lab specialists from Emory University and Johns Hopkins University Hospitals, among others, to perform cataract surgeries for Ebola survivors in Liberia.



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