



24 OCTOBER 2009

# IMAZ Second Eye Camp



"Allahu Akbar ! ... Allahu Akbar ! ...  
I can see! ... I can See!"

**Beneficiary**

**ZIMBABWE**

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**THE ISLAMIC MEDICAL ASSOCIATION OF  
ZIMBABWE**

**(IMAZ)**

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**Report on  
The Second Eye Camp  
Held At  
Richard Morris Hospital Bulawayo Zimbabwe.  
Bilateral Cataract Operations  
24 October 2009**

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Presented By **Hakim Asani** 2009

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**Cover Photo Dr. Sarkiss in theatre**

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### 1 INTRODUCTION

The Islamic Medical Association Of Zimbabwe (IMAZ) successfully conducted its second Bilateral cataract “**Save a Vision**” eye operation campaign at Richard Morris Hospital in Bulawayo fulfilling one of its strategic issues of establishing a social work policy that is in conformity with the spirit of mercy to humanity.

### 2 PROGRAMMING OF THE EVENT

1. The president of IMAZ Dr Hassan Ashmawy made arrangements by allocating responsibilities to individuals prior to the event.
2. Dr. Ayman Amer (Vice President) was responsible for procurement of drugs and Dr. Elsairy was responsible for purchase of food and supervision of preparation for lunch.
3. Dr Sarkiss, head of Richard Morris eye department, made arrangements with Authorities at Richard Morris Hospital eye unit.
4. Richard Morris Hospital provided premises (Theatre), staff and administrative rooms to facilitate operations.
5. IMAZ with the assistance of **AL IMDAAD Foundation** funded the project.
6. The Bulawayo Islamic Society members provided catering services as well as moral support.

### 3 ATTENDANCE TO THE PROGRAMME.

1. 20 patients were targeted for the project. They were all operated.

### 4 PARTICIPANTS

The following are persons that participated in the eye camp:

#### a. Key Participants

- i. Three Doctors conducted the operations. Representing Islamic Medical Association of Zimbabwe (IMAZ), Dr Sarkiss lead the operation and was assisted by Dr Jana as well as Dr Phiri.

#### b. Support Staff Medical

- i. In Theater were Sisters T Sibanda and C. Sibanda assisted by general hand Mr. Ndaukura.
- ii. In OPD were Sisters Ngwenya and Nyoni assisted by Nurse Aid Mr. Takawira.

#### c. Support Staff Non Medical

- i. The Bulawayo Islamic Society community assisted by providing refreshments for both patients and their relatives.

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- ii. Members of IMAZ were available all the time.

### 5 BRIEF REPORT OF THE PROCEEDINGS.

1. The programme started at 8:00 am on the 24<sup>th</sup> of October 2009 with clerking and preparation for theater first.
2. The atmosphere was Kind and friendly.

### 6 STATISTICS OF ATTENDANCE

1. A total of 20 patients with bilateral cataract eyes were targeted.
2. 20 were operated upon.

### 7 LESSONS LEARNT

The programme went very well and there were a lot of positive issues that were learnt from this camp.

#### 1. Branding of IMAZ

IMAZ was very visible

- a) By means of the mobile clinic and a banner posted at the entrance as well as the main foyer of the hospital.
- b) All medicine boxes that were donated by IMAZ were well labeled in ink.
- c) Gowns donated by IMAZ were labeled in Ink.
- d) An IMAZ Broacher was made available for those who wished to know more about the Association.
- e) A flayer notifying people where to get further Islamic information was available.
- f) Stationery used was clearly identified with IMAZ identification.

#### 2. Muslim community participation.

There was Muslim community participation which saw some members contributing towards this cause. We hope dialogue will open more hearts Insha Allah.

#### 3. Volunteer Participation

Effective communication made it possible for the Bulawayo Muslim Society members to actively participate in non Medical support activities such as preparing sandwiches and serving refreshments to patients and their relatives.

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### Limiting of Beneficiaries

Limiting the number of beneficiaries to 20 made it possible for the hospital staff to work comfortably and efficiently. This also resulted in beneficiaries obtaining adequate medical supply and it eliminated congestion or confusion.

#### 4. Beneficiary Survey / Comments

Most beneficiaries were dumfounded and did not speak a word at all. This could be attributed to the fact that they were recovering from the operation.

However the next day, after review, one patient managed to express himself by audibly saying ***“Allahu Akbar! Allahu Akbar ... I can see! ... I can see! ... May Allah bless these people!!”*** Beneficiary

On the review day there was a general feeling of celebration as beneficiaries could not believe they had gained their sight.

## 8 AREAS NEEDING IMPROVEMENTS

This camp was well organised and had very little areas that needed improvements. Success could be attributed mainly to lessons learnt from previous outreach programmes.

However for the sake of effecting continuous improvement and attaining excellence in service delivery, it is necessary to point out issues requiring polishing.

#### 1. Non Medical support Volunteers

A register of non medical support volunteers should be opened and the community advised accordingly. Participants must be drawn from all areas of Bulawayo metropolitan suburb.

#### 2. Report back to Community

- i. A report back to the community must be made as soon as possible after a project in order to appraise and motivate the community on the success and shortcomings of the project.



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## PHOTO GALLERY



**Figure 1 Beneficiary being lead from theatre**



**Figure 4 Serving Refreshments**



**Figure 2 Beneficiaries in waiting room**



**Figure 5 Lunch Time**



**Figure 3 Hoping to regain Sight**



**Figure 6 Jazakallah**

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**Figure 7 The IMAZ Three**

**From left to right Dr Ayman Amer (Vice President), Dr H. Ashmawy (President), and Dr C. Sururu (Director of Clinics)**