On November 3rd, 2004, three young students embarked on the adventure of a lifetime. They arrived in the small rural village of Humjibre in Ghana’s western region with open minds and suitcases brimming with hundreds of donated glasses. Sylvie Gardet, a medical student from Switzerland had advertised the Unite for Sight mission in a Geneva newspaper: to distribute eyeglasses, provide free cataract surgery and educate the inhabitants of a remote African village about eye health. The response was overwhelming. Over 500 donated glasses arrived at her doorstep, so many that she was forced to leave hundreds behind. Henry Li, a Taiwanese-born software engineer who discovered that his true passion was working with people and not machines, decided to take a hiatus from his job, with dreams of starting a career in medicine. The third member to complete the Unite for Sight team, Silvia Odorcic, wanted to do something out of the ordinary before starting medical school in Canada, something that would be as challenging as it was rewarding. Unite for Sight in Humjibre would prove to be that something, and so much more, for all three.

Between November 3rd and December 28th, 2004, Unite for Sight, with the aid of local volunteers and US-based non-governmental organisation (NGO) Ghana Health and Education Initiative (GHEI), managed to screen over 900 villagers for operable cataracts, distribute over 480 glasses, 300 sunglasses and helped restore the vision of 21 patients. Unite for Sight is a non-profit NGO devoted to improving eye health worldwide through the provision of comprehensive eye care, eyeglasses, and education. Founded in 2000 by Jennifer Staple, the organisation’s membership has since grown to encompass over 4,000 volunteers internationally. While Unite for Sight originally focused on improving the eye health of the medically underserved and uninsured in the US, it has recently established sight-restoring programs in 25 countries across Africa, Asia, Latin America, Europe, and North America. Many of the communities that Unite for Sight works with are small, remote villages that can scarcely be found on the most detailed maps. Humjibre in Ghana is one of these villages.

Humjibre is an African village in the purest sense — untouched, raw and surrounded by dense forest. The majority of men are cocoa farmers. They are weathered and tireless, sometimes working for months only to gather enough cocoa to fill a 50-pound sack. Although ‘Humjibre’ means ‘a place of rest’ in Twi (the most widely spoken Ghanaian language) the women, not unlike the men, seem to receive very little of it. Humjibre’s unpaved dirt roads are always abuzz with women: women selling bread, women meticulously wrapping groundnuts in small plastic bags, women frying plantain, women returning from the farm carrying chopped wood on their heads with babies strapped to their backs. A handful of homes have electricity. Water is pumped daily and carried steadily for long distances on the heads of children and women as there is no running water in the homes. It was into this community that Henry, Sylvie and Silvia were welcomed by a swarm of over 70 children joyously shouting ‘Oburoni!!,’ or ‘white person.’ For two months out of their lives, Humjibre would become not only a place of rest, but also a place of work and a second home.

Screening over 900 people for cataracts proved to be no easy task. Although the Unite for Sight team received two days of formal training at the Cape Coast Christian Eye Centre by Australian Ophthalmologist Dr Mark Whiting, running an eye clinic involved much more than noting the quality of a red reflex or checking for a relative afferent pupil defect. With the help of nine local volunteers, the team spread word of the clinic through churches and by beating the village gong-gong. A banner advertising the free ‘ete’ (cataract in Twi) clinic was draped in a nearby village between a cement and bamboo pole. Villagers started to file into Humjibre’s community centre in droves. The Unite for Sight team opened the clinic for nine full days of screening, at times working for seven consecutive hours in the stifling heat with no breaks. The clinic was housed in the recently constructed community centre, a project organised by GHEI and implemented by local community members who completed the construction. In clinic, patients registered, had their visual acuity (VA) tested, and their eyes examined with the aid of Ghanaian translators. Those patients with acuities of 6/60 or worse were dilated and referred for cataract surgery. The most common conditions encountered included pinguecula and pterygium, conjunctivitis, and refractive errors. Many patients, some of whom had not been to see a doctor in decades, presented with extensive corneal ulcers, end-stage glaucoma and chronic, untreated infections. Patients in need of sunglasses or reading glasses purchased them for a nominal fee of 10,000 Cedis, the equivalent of one US dollar. The money fundraised by the sale of glasses was re-circulated into the community through the provision of additional cataract surgeries. Some patients left clinic smil-
ing broadly and sporting new glasses; others left quietly reading the small print of their Bibles.

One patient left an indelible impression on the Unite for Sight team: his name is Abass Hausa, and today, he walks around Humjibre on his own. Abass Hausa was one of the 21 patients who received cataract surgery at the Cape Coast Clinic. He had entered the clinic on the arm of his son, his face placid and stoic. On November 15th, he boarded a van with other expectant patients for a six-hour ride to the nearest eye clinic. At the clinic, an efficient facility equipped with a refracting room, air-conditioned theatre and YAG laser, patients were welcomed and examined by visiting doctors Mark Whiting and Stanford Ophthalmologist Dr Peter Egbert. “Great job!” Dr Whiting exclaimed from behind the slit-lamp. “I’ve never seen so many hyper-mature cataracts before.” Abass Hausa’s patch was removed and Sylvie took her position in front of the Snellen chart. The day before surgery, his left VA measured HM, but on that morning, Sylvie continued taking steps back...CF 2M, CF 5M...6/60...6/36. “Hallelujah” one of the nurses shouted.

The results of the surgery were immediate and rewarding. The patients were ushered into the van and along with the Unite for Sight team, they headed back to the quiet life in Humjibre, taking a coastal route. Many of the patients had never had the opportunity to venture beyond the dense forests surrounding the farming village where they were born and had spent their entire adult lives. Most had never seen the Atlantic Ocean. Sylvie drew attention to Abass Hausa. He was staring outside the cracked van window, his eyes hidden behind P sunglasses, but his gaze steadily fixed on the views of the water that peeked through the thin, wiry trunks of palm trees. “Do you see anything out there?” Silvia asked. Finally, the reserved man that had come in on the arm of his son smiled. “The ocean,” he answered. “It’s beautiful.” Sylvie and Silvia caught each other’s gaze, both overwhelmed by emotion. It was for moments like this that three students from different parts of the globe who shared a common vision had left their homes to spend two months of their lives in a remote African village.

As the year reached its end, so did the Unite for Sight programme in Humjibre. With less than $2000 USD of Unite for Sight funds, 21 patients were given a gift on which no number can be placed: the gift of sight. For Abass Hausa and others, Unite for Sight restored more than vision; it restored confidence, morale and hope. Individuals from all over the world had donated their glasses, time, enthusiasm, dedication and expertise. On that day in December, when the Unite for Sight team rode away from Humjibre in an overcrowded taxi, they left the women pumping water, the children playing soccer in the red dust, and somewhere among the residents of this tiny, quiet village, they also left an 80-year-old man who was taking his morning stroll alone, without the aid of his wooden walking stick.