A Lasting Legacy

THE QUEEN ELIZABETH
DIAMOND JUBILEE TRUST

Contents

A Lasting Legacy

To change the lives of people for the better right across the Commonwealth in just five years was an enormous challenge and one that could not have not been achieved without the heroism of all those with whom The Queen Elizabeth Diamond Jubilee Trust has been privileged to work.

From the staff and community volunteers in Africa and the Pacific who travelled by bike and boat to reach isolated villages so they could deliver the antibiotics essential for the elimination of trachoma; to the village health workers in India who are educating local people, one-by-one, about the devastating danger that diabetes might pose to their vision; to the ophthalmologists who have dedicated their lives to saving the sight of those who would otherwise go blind, our goals have been realised thanks to their determination to always go that extra mile.

The Trust leaves behind this astonishing workforce of health care professionals who span every continent of the Commonwealth, and who will continue to make eye care accessible to everyone, to ensure that no one in the future will be needlessly blind.

We also leave behind a network of vibrant, courageous young people, our future leaders, who are committed to changing the world, however they can – and who will do so with each other’s help.

We are proud – through this book – to present just some of their remarkable stories.

Foreword by Her Royal Highness The Countess of Wessex GCVO, Vice-Patron, The Queen Elizabeth Diamond Jubilee Trust

I became Vice-Patron of The Queen Elizabeth Diamond Jubilee Trust in 2015. Since then, I have had the opportunity to meet some of the people involved in delivering its programmes, and those who have benefited from them, across the Commonwealth, including some presented in this book. They are encounters I will never forget. The determination behind the smile of a young woman in India who is tackling head-on the stigma of menstruation, which too often leads to girls dropping out of school. The laughter in the eyes of a patient in Malawi who after suffering from blinding trachoma for decades is finally pain-free and able to see. The playfulness of a young girl in India who was born prematurely and developed a sight-threatening eye condition, but is now growing up as if nothing had happened. The humility of a remarkable Kenyan ophthalmologist, whose story is told in this book, quietly and selflessly transforming eye health across his region.

The Queen Elizabeth Diamond Jubilee Trust was created to mark and celebrate the extraordinary contribution made by Her Majesty Queen Elizabeth II as the Head of the Commonwealth. The association of her name, so greatly respected across the world, with the work of the Trust, has brought people together to deliver results which have exceeded all expectations.

The Trust's programmes lasted five years, and what an extraordinary amount was achieved in that short time. Two hundred and forty exceptional young people, chosen from 53 Commonwealth countries, became Queen's Young Leaders, and are bringing their courage, creativity and energy to bear to improve the lives of others. The Trust worked with Commonwealth governments to curb blindness from avoidable causes. The impact has been transformative, giving new hope to people across the world, releasing their potential to learn, to work and to lead fulfilled and productive lives. Great strides were made towards the goal of eliminating blinding trachoma, a painful and cruel disease.

Thanks to the Trust's work, 11 million people living in the Commonwealth are no longer at risk of going blind from trachoma. Two Commonwealth countries are soon to apply to the World Health Organization to be validated as trachoma-free and a further nine, previously classed as trachoma-endemic, are on track to eliminate the disease.

In every region of the Commonwealth, eye health services were strengthened, so that people – from premature babies to the elderly – do not lose their sight when it can be avoided. Thirteen Commonwealth countries now provide in their health systems regular eye screening and treatment for people at risk of losing their sight to diabetic retinopathy, a complication of diabetes and today the fastest growing cause of avoidable blindness worldwide. India has developed and implemented national health care guidelines to ensure that babies born prematurely whose eyesight is at risk receive screening and treatment as a standard part of their neonatal care.

With the support of the Trust, centres of excellence in eye health across the Commonwealth have joined forces to help build the capacity needed to deliver quality eye care in the Commonwealth's lower income member countries through training, research and innovation. With the Trust's support, new technology has been developed that is set to revolutionise the way eye care is provided, particularly to poor and remote communities.

With its programmes now complete, the Trust will close its doors in 2020. This book, through the stories of individuals, paints a picture of what the Trust, with the support of its exceptional partners, has been able to achieve.

The task of The Queen Elizabeth Diamond Jubilee Trust was to enrich the lives of people across the Commonwealth, in honour of Her Majesty The Queen. I believe it has done that. I am proud to have been involved in its work.

Message from The Rt Hon Sir John Major KG CH, Chairman, The Queen Elizabeth Diamond Jubilee Trust

The 60th Anniversary of Her Majesty The Queen's accession to the throne in 2012 also marked her Diamond Jubilee as the Head of the Commonwealth.

In 2011, at the Commonwealth Heads of Government Meeting in Perth, it was agreed that a Trust would be established to mark this historic event. Its purpose was to support charitable projects and organisations across the Commonwealth. Thus, The Queen Elizabeth Diamond Jubilee Trust was born.

I was honoured to be appointed its Chairman, assisted by a Board of eminent Trustees – including two successive Commonwealth Secretary-Generals – and a small, experienced team of professional staff.

Contributions poured in from every region of the Commonwealth: from governments of countries large and small; from businesses; foundations; communities; and individuals. The British Government generously matched the total contribution, thereby doubling the Trust's resources.

Our mission was to create a lasting legacy, owned by every single Commonwealth country, in the name of Her Majesty The Queen. We decided upon two separate, five-year, pan-Commonwealth programmes: to identify and nurture youth leadership; and to curb blindness from avoidable causes. As the Trust reaches the end of its five-year lifespan, our objectives – on both programmes – have been met.

The 240 Queen's Young Leaders – from 53 Commonwealth countries – are a truly remarkable and inspiring group of young people who have already achieved great things, and made a significant impact on the lives of others. I have no doubt that many of them will go on to excel in their chosen fields, or gain wider prominence in public life.

The Trust's programmes on eye health, delivered in partnership with Commonwealth governments and through some exceptional organisations, have strengthened eye care in the Caribbean, Africa, Asia and the Pacific.

These programmes have helped to curb blinding trachoma, with several Commonwealth countries now on the brink of eliminating it as a public health problem.

They have forged pan-Commonwealth networks which are driving up standards of eye care, and developing capacity where – if any was available – it was alarmingly scarce.

The Trust had cause for celebration when – at the Commonwealth Heads of Government Meeting in London in 2018 – our work was recognised, and the Heads committed to continue working towards quality eye care for all, including the elimination of blinding trachoma.

Not one of these achievements would have been possible without the quite extraordinary network of support we have received from all our partners and benefactors – too numerous to list. I would like to express my heartfelt and grateful thanks to them all.

Many lives have been touched by the Trust's programmes – and some have been transformed forever. The Trust has reached out to every corner of the Commonwealth, and has been inspired and energised throughout the process. For, although we live in different countries, with different languages, different cultures, different religions – and very different weather – there is one thing that binds us all: we are all part of the same family – the Commonwealth Family.

As one of our Young Leaders once said to me: "It takes many different flowers, of many different colours, to make a beautiful garden." How true that is.

As the impact of our work lives on, we will be proud to watch that garden grow and multiply, spreading its beauty, its energy and its positivity far and wide, in honour of Her Majesty Queen Elizabeth II.

Trachoma

Trachoma is one of the world's oldest known diseases and it remains the leading infectious cause of avoidable blindness globally. Although it has been eliminated in nearly every developed country in the world, it is a public health problem in 44 countries, with 142 million people at risk of infection.

Trachoma is a bacterial infection of the eye. It starts as conjunctivitis but gradually, with repeated episodes of infection, scarring of the eyelid turns the eyelashes inwards so that with every excruciating blink, they scrape and damage the surface of the eye. This causes irreversible blindness. Trachoma is spread from person to person and is most commonly found in remote communities that have poor sanitation and hygiene. Globally, 1.9 million people are blind or visually impaired because of trachoma.

In 2014, the Trust launched its Trachoma Initiative to tackle the disease in 12 Commonwealth countries: Kenya, Malawi, Mozambique, Nigeria, Tanzania, Uganda and Zambia in Africa; and Australia, Fiji, Kiribati, Solomon Islands and Vanuatu in the Pacific. The Trust worked with members of the International Coalition for Trachoma Control to implement the World Health Organization-endorsed "SAFE" strategy to provide people with Surgery to correct the position of in-turned eyelashes and prevent the scarring of the eye; Antibiotic distribution to reduce the spread of infection; Facial cleanliness promotion to reduce reinfection and to help to prevent transmission from person to person; and introduce Environmental improvements to increase access to safe water and sanitation.

As a result of the Trust's efforts, 11 million people who were previously at risk of losing their sight to trachoma are now no longer. Malawi and Vanuatu are on track to be validated by the WHO as having officially eliminated blinding trachoma. The Trust has also helped secure further funding – £20 million through the Commonwealth Fund – and has shared its learning to ensure that all the countries where its Trachoma Initiative has worked can continue their efforts to eliminate trachoma as a public health problem in the coming years.

Key achievements

104,020 people given sight-saving surgery.

Over 22 million people treated with antibiotics to stop the spread of infection.

277 surgeons trained to treat people with the blinding stages of trachoma.

More than 61,000 case finders trained to identify people in need of treatment, sweeping communities and visiting every household.

Over 81,000 latrines and washing facilities built or upgraded to prevent the spread of infection.

Retinopathy of Prematurity

India is home to the highest number of premature births in the world – some 24 per cent of all preterm babies are born in India. In 2007, the Government of India rapidly accelerated efforts to reduce infant mortality, setting up neonatal units all over the country to improve the outcomes of those born too soon. But as infants were surviving, more and more cases of blindness were emerging.

Retinopathy of prematurity (ROP) is the leading cause of infant blindness worldwide – and its incidence is increasing in low- and middle-income countries where services for preterm babies have vastly expanded in the past two decades. ROP is most often caused when premature babies are given oxygen when they are in an incubator, but too much oxygen is highly toxic and can lead to irreversible sight loss. ROP exclusively affects preterm babies, as the blood vessels at the back of the eye have not had a chance to develop fully before birth.

Some of these premature babies will develop only milder forms of ROP, which resolves without treatment, but up to 10 per cent develop the sight-threatening form, which, without laser treatment, can progress to retinal detachment and blindness.

Before the Trust's programme began in 2014, there were no national services in place to detect and treat ROP in India. There was little awareness of the condition or understanding of the need to screen and treat the condition within the first 30 days of a baby's life. Working with the Government of India, over five years the Trust has helped improve neonatal services across the country and, through its partners, has provided screening and treatment for ROP in hospitals across four districts in India, serving a population of nearly 50 million.

The Trust's programme helped introduce national guidelines so that other states could implement their own screening and treatment programmes. From Maharashtra in the west to Tamil Nadu in the south, ophthalmologists, nurses and health staff are now being trained to prevent, detect and treat ROP.

Key achievements

Services have been set up to screen for and treat ROP in 20 hospitals, across four districts in India, serving a population of nearly 50 million.

Through these new services, more than 13,000 babies have been screened for ROP and referred for treatment as needed.

Training has been provided to health care workers – paediatricians, ophthalmologists and nurses – in 86 special care neonatal units to improve outcomes for premature babies and reduce the risk of ROP.

Workshops have been set up to connect and support parents who have a child affected by ROP.


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CAUTION
BABY ID CARD
HOSPITAL

Diabetic Retinopathy

Diabetes is a global epidemic, and diabetic retinopathy, a complication of diabetes, is the fastest growing cause of blindness globally as well as the leading cause of blindness in working-age adults. It is estimated that by 2020 diabetic retinopathy will affect more than 3.2 million people.

Diabetic retinopathy is caused when high blood sugar damages the vessels at the back of the eye. If untreated, it can lead to a total loss of vision. Globally, more than half of those with diabetes are unaware they have the condition, and by the time their vision deteriorates it is often too late for treatment. But screening, early intervention and careful health management can reduce the risk of vision loss by 95 per cent.

Diabetic retinopathy is most prevalent in low- and middle-income countries where there is little public awareness of diabetes and its complications; and where there is a lack of screening services and of ophthalmologists, poor transport, long waiting times and a high cost for treatment.

The Trust has worked with partners in Bangladesh, India and Pakistan in Asia; Fiji, Kiribati, Samoa, Solomon Islands, Tonga and Vanuatu in the Pacific, and Belize, Dominica, Jamaica and Saint Lucia in the Caribbean to ensure that those at risk of diabetic retinopathy have access to screening and treatment services.

Key achievements

India

Established screening and treatment facilities across 10 states, in 53 health facilities, serving a total population of more than 28 million.

A national task force convened, bringing together experts in all areas of diabetes care to devise a national plan.

66,000 people screened for diabetic retinopathy and given treatment, if required.

Implementation of a study course to help improve the care delivered by physicians to those with diabetes.

Peer support groups established to help people manage their diabetes.

Pakistan

13,000 people reached through awareness-raising activities.

1,300 Lady Health Workers trained to identify and refer those with diabetes for screening.

More than 100,000 people screened for diabetic retinopathy and referred for treatment when necessary.

Equipment and assessment systems set up across 37 health centres.

Pacific

Screening and laser treatment now available across all six countries where the Trust is working.

Community health nurses in each country trained in diabetic retinopathy.

A total of 42,349 people screened and referred for treatment as needed.

Caribbean

More than 21,000 people screened for diabetic retinopathy and those in need of treatment have received it.

Bangladesh

Inspired by the work of the Trust, the Government of Bangladesh has rolled out a national programme to screen and treat all those at risk of diabetic retinopathy.

Commonwealth Eye Health Consortium

Worldwide there are 253 million people who are blind or visually impaired, but in 80 per cent of these cases, sight loss could have been avoided. For many people, good eye care is scarce, and those in greatest need have the most limited access to resources – 90 per cent of avoidable blindness is found in developing countries.

In the US, there are 60 eye doctors per million people. In sub-Saharan Africa, there is only one per million, and most of these specialists are based in urban areas, where less than 45 per cent of the population live.

The Commonwealth Eye Health Consortium was established in 2015 by the Trust, in partnership with the London School of Hygiene & Tropical Medicine, with the aim of bringing quality eye care to everyone in the Commonwealth.

This international network of leading training institutions set out to strengthen eye health systems across the Commonwealth by

- building human capacity through clinical fellowships and master's courses;
- increasing global understanding of avoidable blindness and finding ways to tackle it through research and the creation of global networks; and
- developing and deploying new affordable and accessible technology for eye care – most notably the smartphone vision-testing tool Peek.

Key achievements

More than 200,000 children in Kenya have had their eyes screened using Peek. This innovative smartphone vision-testing app has been downloaded and used by 50,000 people in 160 countries.

More than 23,000 people from 188 countries have taken the consortium's online courses in public health care.

The Government of Botswana became the first country in the world to commit to screening the eyes of an entire generation of schoolchildren using Peek smartphone technology.

140 eye health professionals from 19 countries have completed training placements in centres of excellence and hospitals across India, Bangladesh, Pakistan, Canada, New Zealand, Singapore, South Africa and the UK.

The introduction of new screening and treatment services for people at risk of diabetic retinopathy – a complication of diabetes which can lead to irreversible blindness – in 16 countries.

The introduction of new screening and treatment services for preterm babies at risk of retinopathy of prematurity in seven countries.

The Trust's Retinoblastoma Network is providing specialist training from the UK and India to partners in African countries. Survival rates for this rare childhood cancer are devastatingly low in Africa – 70 per cent of children do not survive compared to the 90 per cent in the UK who do. This network is changing that.

The number of ophthalmic clinicians in sub-Saharan Africa with research training at PhD level has doubled, helping to create significant new evidence to improve eye care.

The Queen's Young Leaders Programme

Today, more than 60 per cent of those living in the 53 member countries of the Commonwealth are under the age of 30. This is the largest population of young people the world has ever seen.

The Trust created the Queen's Young Leaders Programme as a four-year initiative to champion and connect young people who are addressing in new and imaginative ways the urgent challenges facing the Commonwealth – mental health, education, climate change, employment opportunities and gender equality.

Since 2014, 60 exceptional young leaders have been chosen each year from across the Commonwealth to become Queen's Young Leaders, with the last cohort awarded in 2018.

Every Queen's Young Leader received their award from Her Majesty The Queen at Buckingham Palace. They took part in a year-long leadership course run by the University of Cambridge's Institute of Continuing Education, which culminated in a residential programme during which they visited prominent businesses and social enterprises and met with senior leaders.

In addition to providing awards to young people, the Queen's Young Leaders Programme has given grants to youth-led and youth-focused organisations in Bangladesh, Jamaica, Sierra Leone, Solomon Islands, the UK and Zambia that are helping to solve the problems affecting young people in the Commonwealth and the communities in which they live.

Key achievements

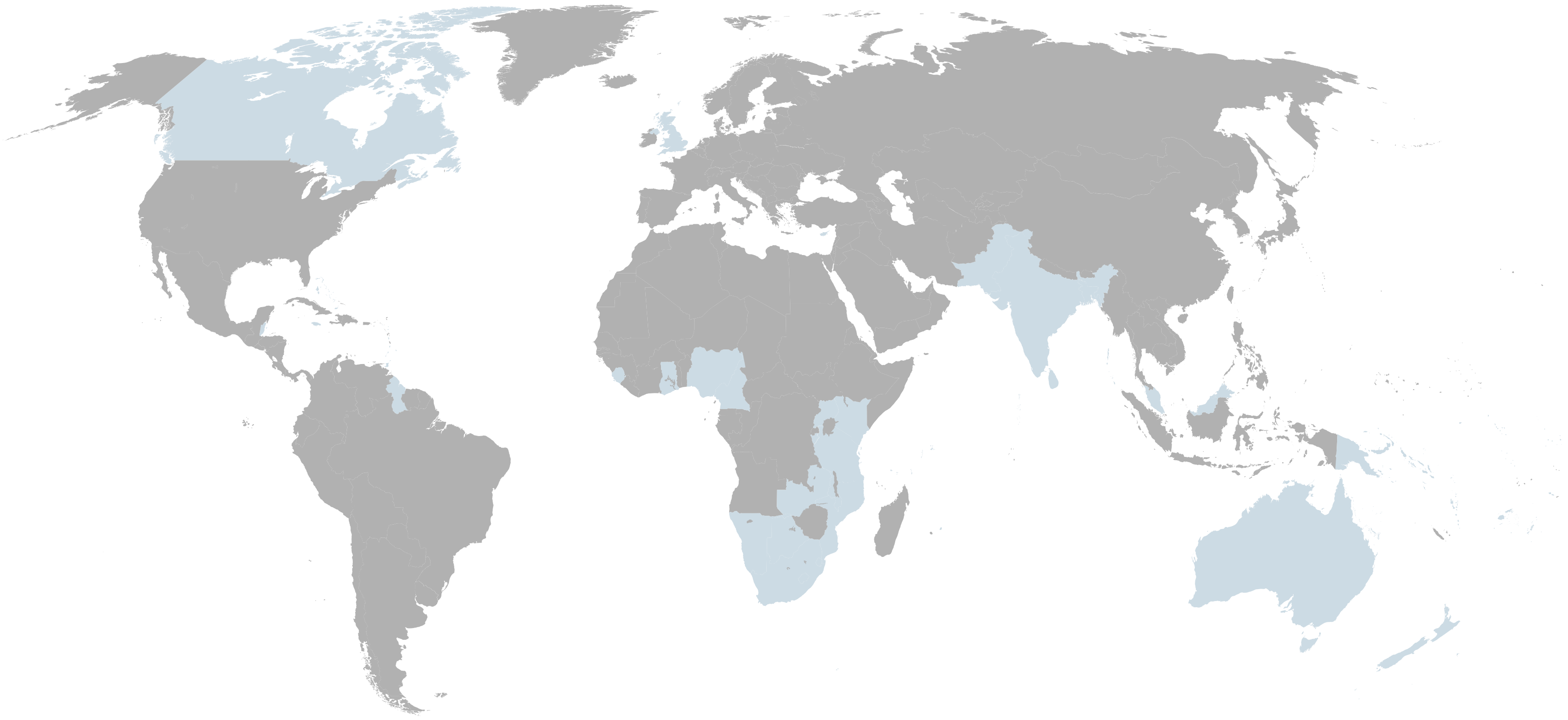
A network of 240 award winners and 282 highly commended runners-up has been created to form a unique, dedicated and powerful group of young people from 53 Commonwealth countries who will connect, collaborate and change lives together for years to come.

The Queen's Young Leaders Programme has become an internationally respected awards programme which helped inspire the creation of future youth programmes such as the Queen's Commonwealth Trust which discovers and funds young people whose ideas solve local problems in education, health, the environment and sport.

Area of Work	Total no. of QYLs
Education and the arts	49
Entrepreneurship	22
Environment	35
Health and disability	49
Human rights	28
Technology	21
Women's empowerment	36


THE QUEEN'S
YOUNG LEADERS

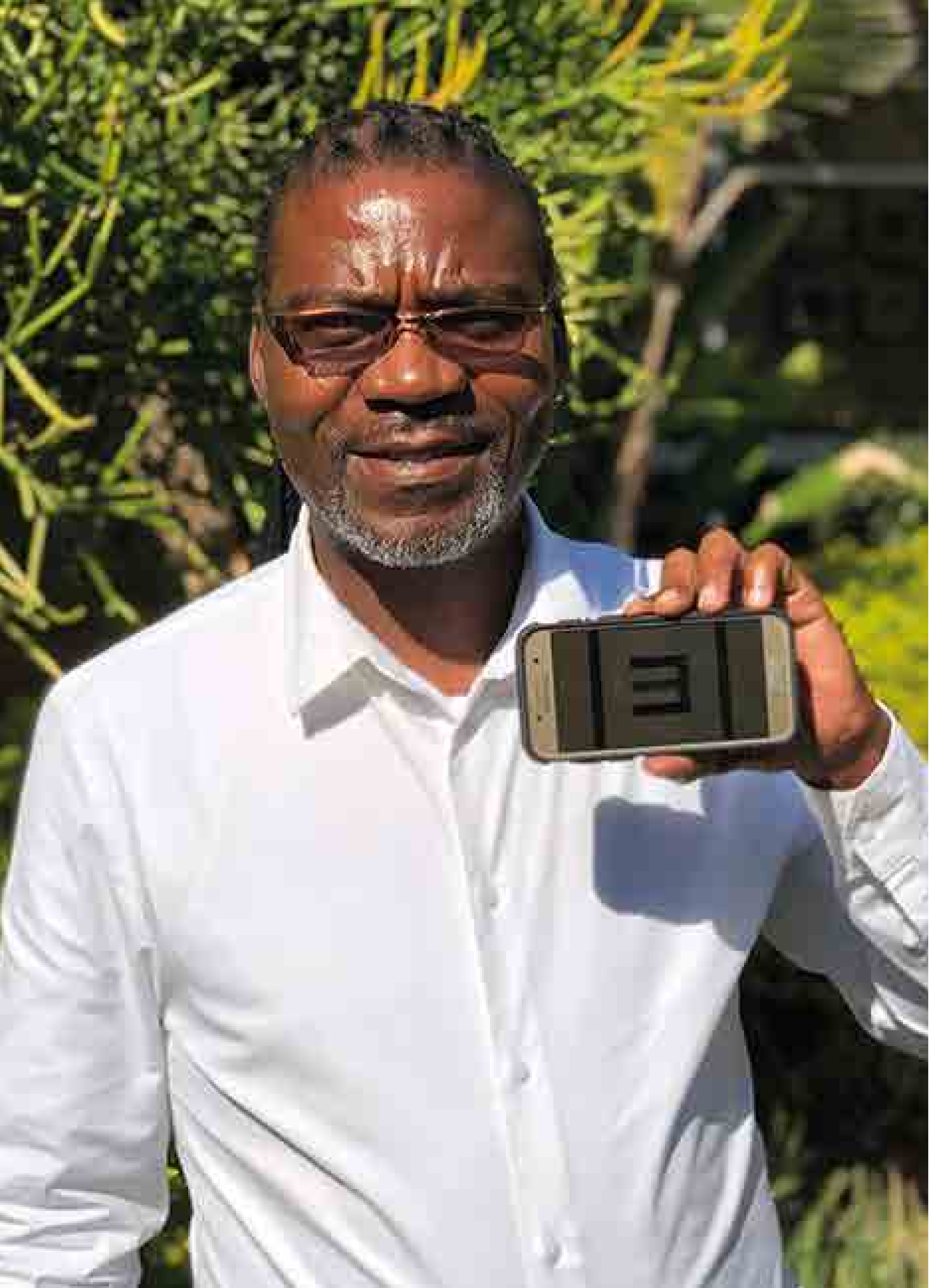
Where We Work



- Queen's Young Leaders
- Diabetic Retinopathy
- Hosting clinical fellows or providing scholarships
- Trachoma
- Retinopathy of Prematurity
- Individuals or teams participating in the Commonwealth Eye Health Consortium

	Queen's Young Leaders	Trachoma	Diabetic Retinopathy	Retinopathy of Prematurity	Hosting clinical fellows or providing scholarships	Individuals or teams participating in the Commonwealth Eye Health Consortium
Antigua and Barbuda	●					
Australia	●	●				
The Bahamas	●					●
Bangladesh	●		●		●	●
Barbados	●					
Belize	●		●			●
Botswana	●					●
Brunei Darussalam	●					
Cameroon	●					●
Canada	●				●	
Cyprus	●					
Dominica	●		●			●
Fiji	●	●	●			●
The Gambia						●
Ghana	●					●
Grenada	●					
Guyana	●					
India	●		●	●	●	●
Jamaica	●		●			●
Kenya	●	●				●
Kingdom of Eswatini	●					
Kiribati	●	●	●			
Lesotho	●					
Malawi	●	●				●
Malaysia	●					●
Malta	●					
Mauritius	●					●
Mozambique	●	●				●
Namibia	●					
Nauru	●					
New Zealand	●				●	
Nigeria	●	●				●
Pakistan	●		●		●	●
Papua New Guinea	●					
Rwanda	●					●
Saint Lucia	●		●			●
Samoa	●		●			
Seychelles	●					
Sierra Leone	●					
Singapore	●				●	
Solomon Islands	●	●	●			●
South Africa	●				●	●
Sri Lanka	●					●
St Kitts and Nevis	●					
St Vincent and the Grenadines	●					
Tonga	●		●			
Trinidad and Tobago	●					●
Tuvalu	●					
Uganda	●	●				●
United Kingdom	●				●	
United Republic of Tanzania	●	●				●
Vanuatu	●	●	●			●
Zambia	●	●				●

Africa



Botswana

Faruk Maunge

Mr Maunge is a principal education officer at the Ministry of Education in Botswana. “I started out as a secondary school teacher before joining the Ministry of Education in 1996,” he says. “I’m with the Department of Special Support Services which assists learners with disabilities.”

Mr Maunge has been a consistent advocate for and champion of Peek’s innovative smartphone-based screening programme since it launched in Botswana in 2016. “One of the things the ministry allows me to do is to come up with ideas to improve education,” he says. “I could see that Peek was quite an opportunity – we had kids who were struggling because of their vision.”

The pilot of the Peek programme in Botswana, supported by Standard Chartered Bank’s Seeing Is Believing programme, screened more than 12,000 children across 49 schools in the Southern District, 80 miles south of Gaborone, in just three weeks. Almost 1,000 children were found to need glasses or further treatment. “From the beginning, I tried to show those behind Peek how our schools operate, to facilitate the work,” Mr Maunge says. “I was pivotal once we got into the field – I called myself the Field Marshal!” Mr Maunge is delighted with how the pilot went. “When you look at the number of learners that we screened and the learners that we actually prescribed and helped with refractive error, it’s quite a big number.”

The Government of Botswana has now committed to screening every schoolchild in the country using Peek. “Almost 80 per cent of what children learn is through vision,” Mr Maunge says, “so if you correct the vision, obviously you will be correcting most of the problems that a child is experiencing.” Children who are struggling because of their vision also tend to drop out of school, “because they are not really enjoying it,” he adds.

Mr Maunge says that through Peek he has a greater understanding of sight and how it can affect a child. He is now advising teachers from a wider perspective. “I have a better understanding of the technical terms, and the benefit of correcting refractive error,” he says.

“When you look at a programme like Peek you can see how it links with our country’s inclusive education policy and really transforms our education for the better. Even today everybody’s talking about Peek. In some regions they call us – when is Peek coming to their region.”

> “Peek has helped me achieve some of my dreams. It can reach rural areas; everyone will have an eye test.”

Cameroon

Joannes Paulus Yimbesalu

Joannes describes himself as a "global education expert", working to ensure that every child is in school and learning.

Joannes is currently studying for a PhD in health economics and policy at Lancaster University with research emphasis on early childhood development, and is the lead consultant for Generation Unlimited, a multi-sector global partnership initiative with Unicef Nigeria in Abuja that connects secondary school education and training to employment and entrepreneurship.

Joannes is one of four boys brought up by a single mother in Kom, a village in north-west Cameroon. He founded Hope for Children Cameroon in 2011 with his twin brother, Joannes Yuh. "We just wanted to support 100 children, mostly orphans, who had dropped out of school in two communities in Kom," he says. "We helped with tuition, provided them with writing materials, textbooks, uniforms and shoes." It was immediately successful, and "huge numbers of children wanted our support," he adds.

Hope for Children Cameroon now works in five communities, Njinikom, Fujua, Njinikijem, Tinifoinbi and Twayongha, and has supported 3,000 children to stay in school. "We focus on quality learning, promote hygiene and sanitation, we challenge gender stereotypes and help with nutrition," Joannes says. Hope for Children also builds classrooms and toilets, and encourages school gardening hubs. In partnership with Book Aid International it has distributed 3,000 books to 15 institutions. "If school is safe," Joannes says, "then learning is better."

Joannes is particularly involved in the education of girls. "It is critical for achieving all the sustainable development goals." He addresses young men and boys, fathers and grandfathers in conversations about the challenges women and girls face. In July 2018, he provided the British Foreign Office with expert advice during its first meeting of the Platform for Girls' Education; he is a board member of the Women's Economic Imperative (WEI), a global initiative to promote women's economic empowerment; and in January 2019 was involved in the planning and facilitation of the Keeping Girls in School conference in Abuja.

Joannes was among the first cohort of Queen's Young Leaders. "It is great to associate with the Queen's Young Leaders Programme," he says. "It has opened so many doors for me, I cannot count." He has, he says, forgotten the exact question The Queen asked him at the awards ceremony. "Imagine the adrenaline when you are waiting for your name to be announced to meet The Queen. I do remember she smiled, and I know the question was on how we were supporting girls to stay in school and learn."

When the Queen's Commonwealth Trust was launched in 2017, Joannes was one of four Queen's Young Leaders invited to Buckingham Palace, and he is a member of its advisory board. "While I was greeting Her Majesty, she said, 'I think we have met before,' and I froze again."

> "How we ensure that young people are not only in school but learning 21st-century skills to achieve their fullest potential is what keeps me awake at night."

The Gambia

Dr Abba Hydara

Dr Hydara is a senior consultant ophthalmologist and the chief executive officer of the Sheikh Zayed Regional Eye Care Centre in Kanifing, which has a catchment area of 800,000 people, two-fifths of the entire population of The Gambia. His speciality is glaucoma, the leading cause of irreversible blindness worldwide.

"Three decades ago, cataract and infectious causes of blindness, such as trachoma, were the leading causes of blindness in The Gambia," Dr Hydara says. "A national eye care programme implemented in 1986 tackled those. But with a tripling of the population, common causes of blindness and visual impairment are high."

Dr Hydara was inspired to work in eye health after an encounter in Malawi when he was a senior ophthalmic medical assistant ("commonly called a cataract surgeon," he jokes). He operated on an elderly woman who had been blind for a few years and had "slipped into depression. The following morning when her eye patch was removed and she could see the faces of her carers and neighbours," he recalls, "she broke down singing in an unforgettably sombre, emotional tone. My trainer turned to me and said, 'Abba, whatever you do later in life, you must continue to bring this joy of sight to others.' I have a sense of responsibility, especially when I encounter eye health injustice."

Dr Hydara is the head of the Ministry of Health's National Eye Health Programme and, in conjunction with the Commonwealth Eye Health Consortium (CEHC), is conducting a national survey of eye health in The Gambia. (The previous one was done in 1996.) "The CEHC has given us the unique opportunity to gather scientific evidence using some of the most modern tools on the current state of blindness, visual impairment and their co-morbidities in The Gambia," he says.

The survey is 70 per cent complete and already Dr Hydara can see that there is a lack of awareness of the importance of regular eye check-ups. He recounts the story of a local Qur'anic teacher, aged 64, who was selected for an eye examination as part of the survey. "He was adamant that his eyes were absolutely all right," Dr Hydara says. "When he was finally convinced to have his eyes checked, his right eye was able to read all of the chart but his left was only able to detect the presence of a shone torchlight. He had very advanced glaucoma, and nothing could be done for that eye. But we could save the vision in his right eye. This story, and what was done to save his health, will spread in the community – saving the sight of one member of the community means the entire community gains!

"The hope is that the survey will identify eye health challenges," Dr Hydara says, "so that the country can develop strategies for the coming years."

> "My ambition is to inspire younger Gambians to continue the task of fighting avoidable blindness. I want to leave a legacy that champions blindness prevention."

Ghana

Elijah Amoo Addo

About 45 per cent of all food in Ghana goes to waste. A 2016 Unicef report found that 3.5 million children in Ghana live in poverty, and that 1.2 million of those do not have adequate food. Twenty-four per cent of childhood mortality is caused by malnutrition. Elijah decided to do something about this.

Elijah is the founder and CEO of Food for All Africa, which works with smallholder farmers, mostly in the Afram Plains in eastern Ghana, and urban chefs to collect food that would otherwise be wasted to provide "sustainable means of healthy nutrition for vulnerable communities," he says. "It was mind-blowing some time in 2012 to find that a lot of food goes to waste."

After the death of his parents, Elijah moved, aged 13, to live with an aunt in Lagos, in Nigeria. As an after-school job, he worked as a kitchen porter, which eventually led to catering school. He returned to Ghana in 2011. "Every morning I came into contact with a man who had a mental illness, who would pick leftover foods from the restaurant's bins to feed other vulnerable people," Elijah says. "His actions inspired me to start collecting the excess from my kitchen and others, and send it to orphanages, schools and other communities." This became Food for All Africa.

Elijah provides for nearly 6,000 people, collecting $12,000 worth of food each month. But he is aiming for much more, and is working with a parliamentary select committee on a National Food Donors Encouragement bill. "It will create a national food bank," Elijah says, "and centralise food donation, because a lot of businesses want to donate food. But who do they give it to? Do they have the time? No. Do they have the logistics? No. The willingness is there, but we need a central body."

In October 2018, Elijah launched an app that "enables the distribution of local food at discount," he says. His latest project is the Chef from the Street initiative, that trains unemployed youth in hospitality, and "by 2023, we will have set up a food innovation hub which will include a culinary training institute."

At the ceremony at Buckingham Palace, Elijah wore ceremonial chef's attire. "The Queen asked me, 'Are you a chef?' And I said, 'Yes, Your Majesty.' Then she followed it up with, 'Would I cook for her?' and I said, 'Yes.'"

Although he didn't cook for The Queen, Elijah has since hosted the British High Commissioner to Ghana. "Some of his staff came up to me afterwards, asking if the ingredients really were recovered," Elijah says, laughing.

> "The Queen asked me, 'Are you a chef?' And I said, 'Yes, Your Majesty.' Then she followed it up with, 'Would I cook for her?' and I said, 'Yes.'"

Ghana

Alimatu Bawah Wiabriga

"I come from a small tribe in northern Ghana called the Sissala," Alimatu says. "The wealth of a Sissala family is having lots of cows."

Alimatu put herself through school by rearing chickens – but, she says, "nine of my 16 siblings dropped out of school early due to economic reasons." Alimatu graduated from the University of Education, Winneba, in 2016 – "I spent seven years doing menial jobs to save for university," she says – and became a journalist. But she quickly decided to change career, to set up Cowtribe with her friend Peter Awin, to give rural farmers access to veterinary services that are otherwise almost impossible to find – and fund. "I wanted to do something that directly brings real change to people's lives rather than talking about the issues."

Seventy per cent of Africans depend on livestock for food and income. But a quarter of that livestock is lost to disease, much of which is preventable through vaccination. "Anthrax, Newcastle disease, brucellosis, tuberculosis, trypanosomiasis are all diseases that kill millions of animals each year," Alimatu says, "costing poor farmers across Africa over US$2 billion annually."

Initially Cowtribe's focus was on providing immediate care for animals when they were sick. But they have since tweaked that model to provide vaccines to protect from disease. "And that has worked for us," Alimatu says. "Now, we have very few emergency cases."

Cowtribe's community agents hold what Alimatu describes as "concept selling meetings", where interested farmers sign up to their app and pay a subscription fee. A farmer is issued with a card which holds their data. When this card is placed at the back of a smartphone, it calls up the farmer's file, allowing the community agent to read and update the information, including the number of animals and their vaccination history. Cowtribe reminds farmers when it is time for vaccinations, sends alerts if there are outbreaks of disease, and manages the logistics of vaccine delivery. It has 31,000 farmers signed up, with 60 per cent making repeat orders.

Alimatu is particularly keen to help women farmers. "I was raised single-handedly by a woman in her seventies in a rural community," she says. "I have that experience. Newcastle disease, a highly contagious virus, is responsible for 60 per cent of chicken mortality annually. We have delivered more than 100,000 vaccines to women this year. And we are delivering I-2 vaccines for free to help with this problem." Rural women keep chickens to put food on the table, pay for their children's schooling and health, Alimatu explains. "We are specifically training women to be agents for Cowtribe."

Cowtribe has recently received investment of US$300,000 from the Draper Richards Kaplan Foundation that will allow it to scale up the business. "A month after my selection as a Queen's Young Leader, I was made an Obama Foundation Leader and we made our first seed investment," Alimatu says. "2018 was a good year." She adds that the whole Queen's Young Leaders experience was "like a dream. The reality only dawned on me when I returned to Ghana."

> "Vaccines are one of the most important innovations in the history of medicine. With vaccines we can lessen the burden on farmers."

Kenya

Dr Hillary Rono

Dr Rono is an ophthalmologist at the Eye Unit of Kitale District Hospital in the northern Rift Valley of Kenya. He studied for his PhD through the Trust's Commonwealth Eye Health Consortium, a programme designed with the London School of Hygiene & Tropical Medicine to train and develop eye health professionals across the Commonwealth.

Dr Rono was five when he decided to study medicine after the death of his father, a teacher. "He had severe abdominal pain. I didn't understand what the problem was, and that's really what made me want to be a doctor; to find out why my dad died."

While he was at medical school, one of his professors organised community service in a rural area. "About 50 per cent of the 500 people there had eye problems," Dr Rono says, "but we didn't have an eye specialist in our group. That is when my journey to become an eye doctor began."

There are about 120 eye specialists in Kenya, most based in Nairobi. Dr Rono, who until 2015 was the sole ophthalmologist working in rural Trans Nzoia, West Pokot and Turkana with a responsibility for more than two million people, now works with two other colleagues. "People have to travel long distances to see specialists, and this contributes to blindness from preventable causes," he says, explaining why he has chosen to work and build his team in a rural community. "We have to find solutions that actually bring access to the population. And recently there have been developments in the field of ophthalmology, and one of these is Peek, a smartphone-based screening system. Someone with little training can use this technology to identify people with visual impairment wherever they are." Peek can be used to carry out various eye tests and connect disconnected people to those who can help them.

Dr Rono, who has been involved in Peek "right from the beginning", led a recent trial, the results of which were published in *The Lancet Global Health*, that shows how Peek can be used successfully in schools by training teachers. Children are shown a series of "E" shapes in different orientations and sizes. The child points in the direction the symbol is facing, then the teacher (who cannot see the screen) swipes the phone in the same direction. After their tests, the children are shown a split-screen simulation of how blurred their eyesight is compared with someone who can see clearly. And, crucially, their parents are given a printout, to show just how poor their child's sight is.

The Peek team recently won a prestigious African Union award for innovation, for having screened all 200,000 schoolchildren in Trans Nzoia in just three years. Six thousand children were treated, and a trial is now underway to screen all ages, approximately 120,000 people in 36 different local regions, using the same technology. "This could be a world changer," Dr Rono says.

> "We hope that what we are working to achieve in Kenya can inspire others to use innovation to improve the lives of people across Africa."

Kingdom of Eswatini

Nondumiso Hlophe

Nondumiso believes that education, equality (especially for women and those who are differently abled) and youth empowerment are key to shaping the world in the 21st century. “My challenge is how to make an impact that is felt on those issues,” she says.

Since 2011, Noni, as she is known, has been a One Young World ambassador for the Kingdom of Eswatini (its first female ambassador) and is the founding curator of the Mbabane Hub, the youth-led and -driven chapter of the Global Shapers Community, a World Economic Forum initiative. “Our mission is to have exceptional people passionately involved in improving Mbabane city and our country as a whole,” she says.

So far, the Mbabane Hub has been instrumental in the promotion of bilingual literacy, greater environmental awareness – one of its projects included the planting of indigenous trees – and, with its most recent initiative, My Health, My Value (a Queen’s Young Leaders legacy network project), addressing sexual reproductive health rights, the stigma of HIV and Aids, and holistic health interventions for young people. “The intention should be to make a difference in your world,” Noni says

Volunteering has always been a normal part of her life, Noni says. “Every community I have lived in, I have been actively involved in some way.” She began volunteering on a hospital ward for abandoned children with disabilities and HIV and Aids in Mbabane when she was still at school.

Noni attended Rhodes University in South Africa, graduating with a degree in political and international studies; believing that “young people should play a part in decision-making processes affecting their future”. While at Rhodes, she was elected chairperson of the university’s Amnesty International chapter and was a co-organiser, facilitator and mentor to young girls from underprivileged backgrounds with the Young Women’s Dialogue, a grassroots initiative in Grahamstown. In 2016, she was awarded the Emerging Old Rhodian award, “for her long-serving history of volunteerism and contribution to youth affairs in international relations.”

Noni was one of the inaugural winners of the Queen’s Young Leaders award. “The programme inspired me to set new goals for myself,” she says. “It also enabled me to meet fellow youth in the Commonwealth, to realise that we all had common issues and to plant the seeds for collaborating across country lines. My Health, My Value is an example of such work.” Since winning the Queen’s Young Leaders award, Noni has been named one of Africa’s Brightest Young Minds and one of the top 100 youth influencers in policy in the Southern Africa Development Community.

Meeting The Queen was, Noni says, “indescribable. The interest Her Majesty took in our stories, encouraging us to keep working for the good of the Commonwealth, serves as a motivator for me to keep playing a part in making the world a better place, in my own way.”

> “Start. Dream big but start small and lead with passion, with an overarching intention to do good in the world.”

Lesotho

Maletsabisa Molapo

In 2013, Maletsabisa co-founded Her Chance to Be Foundation, whose main project is a scholarship programme that identifies high potential girls from underprivileged families in rural Lesotho, and awards them a full five-year scholarship to Lesotho's best secondary schools. She also founded, in 2008, Women in Technology, which supports women studying computer science.

"When my father died in a mining accident when I was three, my mother struggled to educate me and my brother," Maletsabisa says. "She put all her hopes on us."

Maletsabisa has repaid those hopes with interest; she has a PhD in computer science from the University of Cape Town. "In my second year at university, a friend introduced me to the computer and to the internet," she says. "I learned that there is a massive body of knowledge on the web, with the potential to educate, improve lives and inform decisions." Maletsabisa decided to study computing, and in particular ICT for development, which focuses on building appropriate technologies for developing countries. She is now a research scientist at IBM Research in Africa, using artificial intelligence to develop Africa-centric solutions to education and health care.

Her Chance to Be covers "all expenses related to education, including fees, boarding, meals, stipends, clothing and costs related to mentoring," Maletsabisa says. "Our first cohort has completed school and are now at university."

Being a Queen's Young Leader has meant much more exposure for the foundation, and it is working with several companies to create scholarships. Maletsabisa is also working on another initiative that will launch in 2020. "It is focused on skills training and connecting youth to international jobs remotely," she says – effectively using the internet to reduce unemployment.

"I dream of using my energies, resources and my skills in technology to help someone – some woman, some little girl – to change an aspect of their life, of their health, of their education," Maletsabisa says.

> "What we do in our communities matters. It may look small when we begin, but it matters."

Malawi

Safira Mwale

Safira is 14 and lives with her father, two brothers and sister in Kasungu district in central Malawi. When she was 10, she was selected as a trachoma champion by her school, Chisuwe Primary, for her performance in class and in the belief that she would be able to lead others.

"I enjoy educating my Malawians and helping them know how they can prevent trachoma," Safira says. "Because this is the very big problem in Malawi. I knew I could avoid trachoma if I practised good habits like being hygienic." Simple changes, such as covering latrines, and hand and face washing, can prevent the spread of trachoma. "Before this programme, people were not washing their faces with soap or cleaning their toilets or their homes, and people drank water from the river," Safira says. "But now, people are trying their best to wash their faces with soap, cover their toilet holes and clean their houses."

In 2017, Safira met the Trust's Vice-Patron, The Countess of Wessex when The Countess visited Malawi to see the trachoma elimination efforts taking place. Safira remembers the day clearly because she felt so happy and proud. Referring to The Countess as "a role model", Safira says. "It is important that public figures like The Countess get involved because this can help us in Malawi understand that trachoma is indeed a dangerous disease so that we can join hands to eliminate it."

In 2014, eight million people were at risk of going blind from trachoma in Malawi. Today, Malawi is on the verge of officially eliminating trachoma as a public health problem, as certified by the World Health Organization.

"I feel happy about Malawi being in the new phase because this disease is dangerous," Safira says. "It is important to eliminate it because eyes are important. A person cannot work or do any job without eyes. But if a person is feeling well and the eyes are good, they can do anything."

> "I enjoy educating my Malawians and helping them know how they can prevent trachoma."

Mauritius

Deegesh Maywah

Deegesh, who was born in Quartier Militaire in Mauritius, has always sought ways to develop ethical programmes to address society's most pressing issues. While he was studying for his master's in public health at the University of Northampton in 2013, he came across a disabled person working in a supermarket. "In Mauritius, we see disabled persons being assisted and taken care of," he says. "I was amazed that a busy supermarket was able to integrate a person with disabilities in their business model."

On his return in 2014 to Port Louis, where he is a lecturer in public health at the University of Mauritius, Deegesh set up Employ-Ability, an organisation which addresses how disabled people are integrated into society through employment and empowerment. "Persons with disabilities have a hard time showing their professional capabilities," he says. "And it was tough rallying the first few employers to believe in the programme." The scheme has since trained almost 1,000 people to live independently and helped more than 400 people into employment.

Beelall Nunnoo, who is wheelchair-bound, was one of those trained by Employ-Ability. "I knew from day 1 that it would be different," says Beelall, who was given training in office management. "My parents were also told how they should let me be independent," he adds. "I am forever grateful to Employ-Ability and Mr Maywah who also facilitated for me to have a motorised wheelchair to allow me to perform better in my work."

And as a result of the Queen's Young Leaders award, Deegesh, who is currently studying for a PhD in critical disability studies, has "decided to maximise our impact and reach other Commonwealth countries such as Canada, and the US."

> "The best thing was when the first beneficiaries of Employ-Ability came to the school and offered us all lunch with their first salaries. It shows the impact."

Mozambique

Rosa Mustar

Rosa, a farmer from Namila village in Nampula Province in north-east Mozambique, lived with trachoma for five years. "I don't remember what happened," she says. "My eye started to hurt. I was always crying."

Before the Trust's Trachoma Initiative was launched in Mozambique in 2014, more than six million people in the country lived in trachoma-endemic areas and were at risk of losing their sight to this painful, infectious disease. Trachoma is most commonly found in poor, rural communities with limited access to clean water and sanitation. Repeated infection causes a build-up of scar tissue which can cause the eyelashes to turn inwards and eventually lead to irreversible sight loss.

Trachoma affects more than 1.9 million people worldwide, with 142 million living in trachoma-endemic areas. Women are four times more likely than men to contract trachoma. Trachoma traps affected families in a cycle of poverty as the disease passes from one generation to the next; and prevents people from working and contributing to their community. "When I wasn't able to see, I couldn't do many things, like going to the well, going to the farm," Rosa says. "There were many things I couldn't do."

The Trust's Trachoma Initiative trained surgeons in Mozambique to provide surgery to those with the blinding stage of the disease. Rosa is one of more than 5,600 people who received treatment.

The Trachoma Initiative has also trained over 3,300 case finders to go from house to house and identify those in need of treatment. "We were told by our leader who talked to us and advised us to go to the hospital," Rosa says. "He came and took us there. They tested us and found we had that problem and treated us. Now I can see."

Since having both eyes treated Rosa has helped to spread the word about trachoma in her community and has encouraged others to access treatment as she did. "There are three people who have the same problem. And we advised them, and they went to the hospital to be checked," Rosa says. "I worked with our leader. Those people, now they can also see. They can see, they are fine. I was the first, I got better, and now I'm helping others be able to see, so it makes me happy. I wouldn't like to lose my sight again."

> "My eye started to hurt. I was always crying. Our leader advised me to go to the hospital where they found I had the disease. Now I can see again."

Namibia

Mavis Elias

Mavis founded the EM Love Foundation, then known as the Love Is charity, in 2012 when she was 19, and “fresh out of school”. Its aim is poverty eradication in Namibia.

“Whether we find ourselves scrubbing floors in an orphanage, washing the feet of the elderly at an old people’s home or picking up litter at a children’s park in less advantaged communities, the work will be done,” Mavis says. She leads a team of seven directors and has more than 120 volunteers working with her.

The foundation hosts the largest charity pop-up shop in collaboration with Street Store, that enables the homeless to shop for free. “The Street Store was launched in Cape Town in South Africa and has spread across the globe,” Mavis says. “It looks to create a shopping experience for the less fortunate as opposed to simply donating goods; those who are living on the streets get to decide what it is they would like to take off a rack.”

In 2015, Mavis was “on Twitter, sharing thoughts on what I aspire to be, and Monica Geingos, now the first lady of Namibia, started interacting with me,” Mavis says. “I asked her to speak at an event I was hosting called Phenomenal Women Arise.” Geingos did, and as a result, she asked Mavis to joined her One Economy Foundation, launched in 2016 to make sure that no Namibians fall through the cracks, that everyone is given an equal opportunity. “I serve as the youngest director on the board to ensure I give the perspective of youth,” Mavis says.

Mavis, who works as a marketing executive, a television host, a radio presenter and newspaper writer as well as running an events company called Ehaveco, sees the Queen’s Young Leaders award as a game changer.

“I have become a pillar of strength in my community and have become a beacon of inspiration,” she says. She adds that the week-long residential programme offered her opportunities she couldn’t imagine. “I could not begin to comprehend the rooms we had access to,” she says. “Number 10 [Downing Street] felt unreal; we were meeting people I had only seen in magazines, people who felt light years away from my reality. It was all so surreal.

“I am still in sheer disbelief of this opportunity. It goes far beyond being chosen as one of the Queen’s Young Leaders, but rather the opportunity to be mentored and receive guidance to help foster my dreams is what I am most grateful for.”

> “I am going to change the world, one child at a time, one country at a time, one generation at a time.”

Nigeria

Isaac Ezirim

“The Queen’s Young Leaders award was like a validation,” Isaac says. “It helped build credibility and opened up opportunities.” Isaac is a computer programmer and the founder of Teens Can Code, an after-school club which teaches coding to teenagers in low-income communities in Lagos, Nigeria’s most populous city.

Isaac was nine when his father died, and his mother was forced to relocate to Ajegunle, known as one of Lagos’s most dangerous slums. “Most adults in our neighbourhood never aspired to much, most kids never went to school, only a few struggled to go, and then combined it with hawking on the streets,” Isaac says. “We were never prepared for the future, and that is why people who live in those communities will continually live in poverty.”

One evening, selling on the street, Isaac was called to a cyber cafe and “I saw a young boy like me on the computer typing very fast,” Isaac says. From that day he developed what he describes as a passion to learn computing. He “kept that desire burning for years,” he says, “and I finally got an opportunity in my late teens and early twenties.” He would spend whole nights browsing. “Those nights changed my life,” he says.

In 2016, Isaac won a hackathon. “I was so excited. As a birthday gift, I decided I would teach two or three kids computer programming,” he explains. A friend lent Isaac a space to use, and he taught eight students. “One day, someone asked me the name of our school. I never thought it could be something.” He started Teens Can Code in October 2016, one month after his birthday.

Today, through Teens Can Code, Isaac has taught 540 students aged nine to 20 from 28 centres in three states of Nigeria computer coding and web and app building, using the same tools used by tech industry professionals, HTML, CSS, JavaScript and Python. As well as providing free coding classes, workshops, events and after-school programmes, Teens Can Code is building a marketplace for its students, so that organisations and individuals can hire them, “at a reduced rate but get the same result they can get anywhere in the world,” Isaac says.

Isaac launched the first Teens Code Conference in November 2016 to show “how fun and exciting the technology industry can be. Our goal is to use coding as the catalyst that can take teenagers from their community and turn them into technology leaders who build positive society.” It has already reached more than 6,000 young people, and is now a biannual conference.

“As a young boy I could never have dreamed of being near a computer, let alone training hundreds of kids in the slum where I used to live in computer programming,” Isaac says. “Next, I want to establish a science and innovation centre for teens in Lagos where they can collaborate and build ideas to solve huge problems facing the continent.”

> “People can become somebody regardless of their background, and one sure way is to empower them with the skills of the future, to create opportunities for everyone to prosper.”

Rwanda

Priscilla Ruzibuka

Priscilla set up Ki-pepeo, a children's clothing line, in 2016, to create what she calls "transformation employment", working with women from disadvantaged backgrounds to enable them to find sustainable employment through tailoring.

When Priscilla was a baby, her parents employed a woman to care for her. After Priscilla started school, her parents sponsored that woman to learn a skill, in her case tailoring. "Today her life has been transformed," Priscilla says, "and she's a well-known designer with her own sewing studio in Tanzania."

Priscilla realised that she wanted to do the same for the many women and girls who have no higher education. "Too many women from poor communities run away from hard village life to work as house maids or street vendors," she says. "My aim was to create employment for these women, while also creating the first and only children's clothing brand in Rwanda." It is, she adds, difficult to find children's clothing in Rwanda, especially since a ban on the import of second-hand clothes came into effect last year.

Priscilla, who has a master's degree in project management, has trained 30 women in professional sewing. "We partner with other institutions that provide expert training from other parts of the world, so that the quality of the work we produce is high to attract more customers." The profits pay the women fair salaries and help the company to develop. Ki-pepeo now produces 200 pieces a month, and employs 10 women.

Priscilla also offers her employees microloans when they need them. "One of my tailors borrowed some money to buy her husband a motorcycle which he uses as a taxi service," she says. "The family now has two income channels, and all their children go to school, including her brother's child." Another moved to a better home where her young child would be safer. "All I want is for the women to have skills that allow them to make a decent living," Priscilla says, adding that, "The Queen asked how the women are doing. My women were so happy to know she had asked about them!"

Priscilla hopes to move into a bigger, industrial space and grow her team, moving into mass production and establishing a strong online platform. She is also negotiating a partnership to work with refugee women. "Becoming a Queen's Young Leader has really helped elevate my business and made more people aware of the story behind Ki-pepeo," she says.

"The greatest gift of being a Queen's Young Leader is the connections made," she adds. "We have learned so much from each other and supported one another as our projects grow. It truly is a gift that keeps on giving."

> "Being a Queen's Young Leader, I know that wherever I go across the Commonwealth, I have a friend."

Seychelles

Angelique Pouponneau

Angelique, who is a barrister, is a legal expert in climate change, oceans and the "blue economy". She was recently appointed the chief executive of the Seychelles' Conservation and Climate Adaptation Trust, which funds projects and businesses advancing marine protected areas.

Angelique likes to shock people by saying, "I am 26 years old, but in 30 years I will be homeless. I grab their attention to help them to understand why I am so passionate about climate action."

Angelique was born in the Seychelles. She studied at the University of London, gaining a master's degree in environmental law. In January 2015 she and another Queen's Young Leader, Anael Bodwell, founded the Seychelles hub of SIDS, the SIDS Youth Aims Hub – Seychelles, a network of youth activists working to advance sustainable development. "It is an advocacy and lobbying platform to ensure the role of young people in decision-making," Angelique says.

One of its first campaigns was A Seychelles Free from Plastic Bags, which successfully led to the ban of plastic bags, making their importation and use an environmental offence in the Seychelles. "It has had ripple effects in getting other single-use items, such as plastic cutlery and straws, banned," Angelique says. "We organise clean-ups where young people show their responsibility of cleaning coastal areas, and sourcing alternatives to plastic."

The Queen's Young Leaders Programme has, she says, "revolutionised my way of thinking. I have greater vision, more determination and perseverance to achieve that vision."

> "We often believe we are alone as youth leaders, but, as I looked at the other Queen's Young Leaders around me in London, I knew that together we are making a world of difference."

Sierra Leone

PJ Cole

PJ is the chairman of Lifeline Nehemiah Project, the organisation his late father, Richard, founded in 1996 to support former child soldiers in Sierra Leone. "My father rescued children from behind rebel lines," PJ says, "negotiating their release into his care. Then he set about rehabilitating them and seeing to their educational needs, insisting they attend school or vocational training."

PJ, who ran Lifeline Nehemiah Project (LNP) from 2012 to 2019, feels "it is time to hand the day-to-day operation to Prince Tommy Williams, one of my brothers, adopted by my father, and a former child soldier." PJ is now concentrating on strategic planning and oversight of LNP. This handing over of control will, he says, give him time to concentrate on his job as the head of project design and project delivery in the Directorate of Science, Technology and Innovation in the Office of the President. "I work with the chief innovation officer to support the delivery of the national development plan," he says, "using science, technology and innovation to turn Sierra Leone into an innovation nation. My work is quite exciting," he adds, "as it is cutting-edge and pioneering and looks to turn the president's vision into tangible outputs for citizens."

PJ is still very involved with LNP, reviewing works, providing input on strategy and assisting other LNP team members. LNP now runs schools in some of the poorest communities in Sierra Leone, a vocational training centre and a young offenders programme. It also works with farmers in remote provinces and villages, providing tools, skills, knowledge and enterprise; runs a mentoring scheme to support girls to access antenatal care and to learn how to run small businesses, and is at the forefront in the rebuilding of Sierra Leone. "We aim to empower individuals and communities to prosper and become self-reliant," PJ says. "We have seen this can be achieved through these diverse ways."

PJ credits the Queen's Young Leaders Programme with having made a "huge impact on our organisation. We went on to bring in more than £1 million; and it opened many doors by raising the profile of our work nationally and internationally." He has remained in touch with several other winners, and is working with two 2017 Queen's Young Leaders: Kumba Musa, who is on his team in the Office of the President; and Salton Massally, who is leading a financial inclusion and access project with Kiva, the online lending platform.

"I will continue the vision of investing in young people through LNP," he says, "while at the same time working with the exciting team implementing the president's vision of turning Sierra Leone into an innovation nation."

> "You are not too young to make an impact, and the work you do will form a major part of your story."

South Africa

Siposetu Sethu Mbuli

Siposetu was born in the Eastern Cape of South Africa. She has albinism, a lack of melanin, a pigment in skin, hair and eyes. "I'm hypervisible," Siposetu says. "I'm this black woman in white skin."

Siposetu grew up in a community with just one school, where everyone knew each other. After her parents died, she was raised by her grandmother, now 87. But when she was 14, she moved to Cape Town to stay with family there. "That required enormous adaptation on my end," she says. "I had to try explaining my condition to the new community."

Siposetu started Love, This Skin, with her friend Helen Webb, who also has albinism, in 2016. "We did an online blog," Siposetu says, "talking to famous Africans such as IK Ero, the UN expert on albinism, who have this condition – about their experiences, struggles in their profession and how they conquered that." Slowly, they began educating people about albinism. "We work with more than 100 learners with albinism, and through partnerships provide them with necessities such as sun care and eye care," Siposetu says, adding that the challenges she faced as a child were "mostly around my eyesight issues and accommodating that in the classroom."

Siposetu graduated in chemistry and oceanography from the University of Cape Town in 2018 and is currently studying for a BA honours in journalism at Stellenbosch University in the Western Cape. "I am a broadcaster, which is a space I entered at 15," she says. "What's the story? This was the most important question of our visit to the BBC," she adds, talking about the Queen's Young Leaders residential programme. "How do we succinctly state the message of the work we do, and who we are trying to reach, what stories do we use to conjure an emotional connection? It is my favourite visit thus far."

Siposetu was in the final cohort of Queen's Young Leaders. "Words fail me!" she posted on Instagram during her visit to London. "This moment will be with me forever. Never in my wildest dreams!"

In another post she wrote, "When I was a little girl I felt so discriminated against. But standing here, representing so many other people, feels like a true honour."

Siposetu wore a dress by the South African designer Hendrik Vermeulen to Buckingham Palace. "It had a large protea on the front and Xhosa patterns around it, as I am a Xhosa woman," she says. "It was the same colour as my skin.

"It was a great experience," she adds. "We spent three or four hours at the palace, but it felt like only 30 minutes. The Queen was very attentive. She was asking about which part of South Africa I am from and the work we have done. She was giving encouragement to continue doing the work we are doing."

> "The more I'm out there, the more people can recognise how normal I am and how much we're related as people."

Uganda

Wilson and Susan Katonda

Wilson, his wife, Susan, and their four children live in the Busoga region in eastern Uganda, in a village that has benefited from the work of Water Mission – one of the valued partners of the Trust's Trachoma Initiative.

"My home used to be a total mess," Wilson says. "We used to sleep in a grass thatched house that we didn't maintain, so whenever it rained, we would have to spend the night standing since our bedding would get soaked." Their animals slept in the kitchen – "but because of ignorance we would reluctantly not clean the animal dung before preparing meals," Wilson says. The Katondas also had a semi-permanent latrine that wasn't maintained, and which attracted flies that they didn't realise could be harmful.

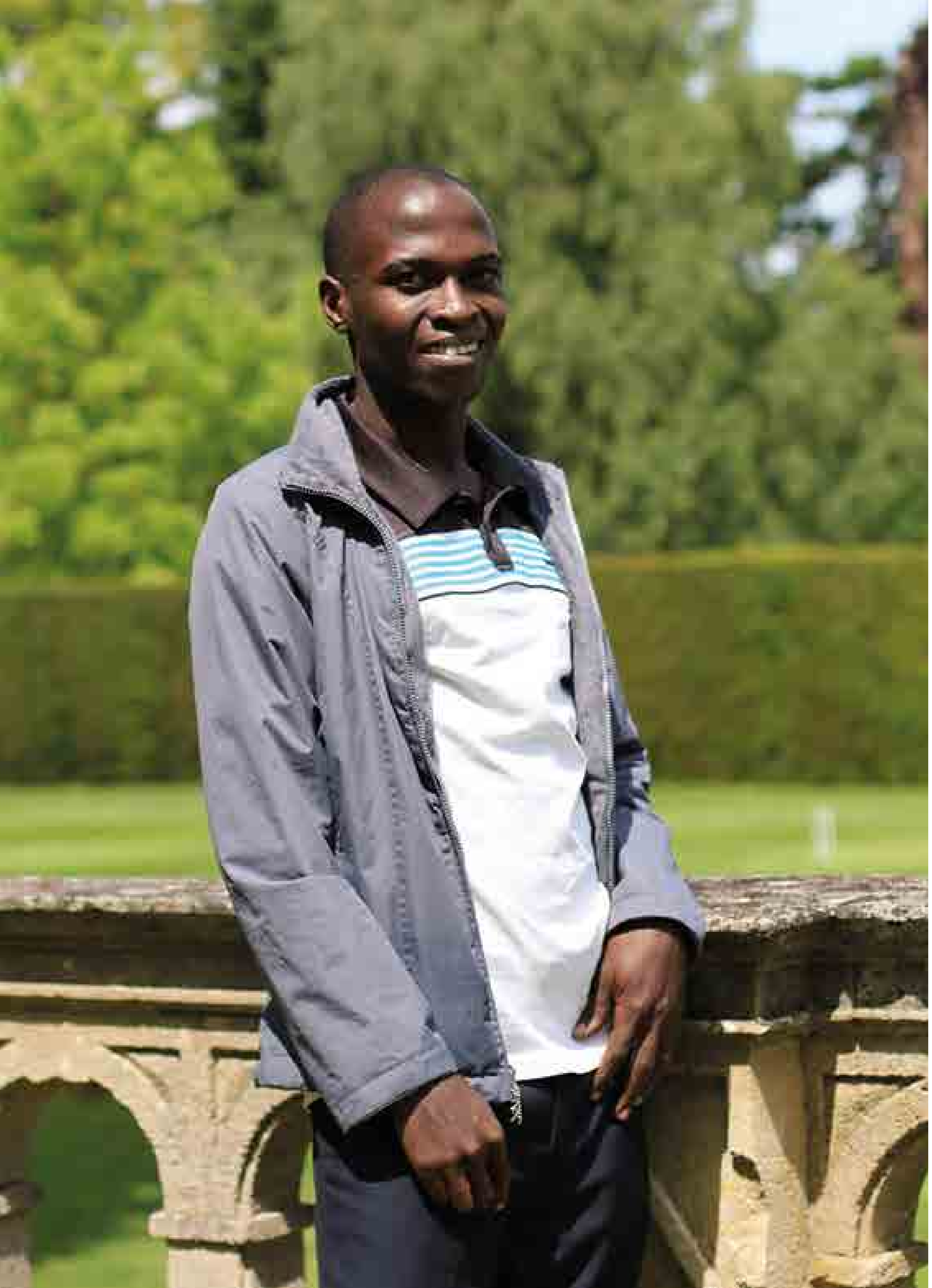
"When Water Mission Uganda came to our village to teach us about trachoma, I was blessed to be among the people selected to participate in the training to become an ambassador of change," Wilson says. "It was a very good eye opener to me. I got to learn about trachoma – a disease I and many people within my village used to associate with witchcraft and genes rather than poor hygiene and sanitation." The villagers were told about the causes of the disease, how it is transmitted, the signs and symptoms as well as about prevention. "I was surprised that flies were the main actors in spreading the disease," Wilson says, "yet they can be kept away from our homes through simple actions. That was my turning point."

Wilson constructed a brick, iron-roofed house, rehabilitated the latrine and even put up two permanent pour flush latrines. He also put up a hand- and face-washing station, a bath shelter, a dish drying rack, a rubbish pit, an animal house and, he says, "we clean our compound every day".

The Trachoma Initiative taught the villagers how people with the disease can be treated, and Wilson was able to take his elderly mother, who was losing her sight to trachoma, to receive treatment. She enjoyed her last days pain-free and with good sight.

"Changing our lifestyle has not only helped my family health-wise but has also improved our social status," Wilson says. "My home almost comes first on the list of the cleanest homes within Kiringa village. I even had the opportunity to host Lord Chartres in my home, which is something that I have never even dreamed about."

> "I and many people within my village used to associate trachoma with witchcraft and genes rather than poor hygiene and sanitation."



Uganda

Deo Sekandi

Deo found out that he has cerebral palsy when he was at university in Kampala in the early 2010s. "I wanted to make sure that people with cerebral palsy were given the same opportunities as everyone else," he says.

In January 2015, Deo started the Uganda National Association of Cerebral Palsy (UNAC) with the aim of "mobilising youth with cerebral palsy to be included in development programmes of the National Union of Disabled Persons of Uganda." Deo has since registered Cerebral Palsy and Autism Renaissance, to promote better education, living standards and welfare for people with cerebral palsy and autism.

Becoming a Queen's Young Leader was transformational for his work. UNAC gained recognition and support and Deo was connected by the British High Commission to various stakeholders who were able to provide more funding – from Denmark, Finland, the US and the Disability Rights Fund. As a result, UNAC now operates in most parts of Uganda. "We support people at the community level, where there is no awareness of the condition," Deo says, "and teach them life skills, build confidence and defend their rights."

"A lot" still needs to be done to enable people with cerebral palsy to enjoy their fundamental human rights, Deo says. He is now collaborating with another 2015 Queen's Young Leader, Edmund Page, who is the chief executive of Xavier Project, an organisation that offers education opportunities to refugees in East Africa, on "a programme called Tailored Education for Refugee Children in Uganda with Cerebral Palsy," Deo says. "We aim to identify 300 children in three refugee locations and provide them with individualised learning." Deo and Edmund hope to scale this up across Uganda, with community outreach, teacher training and the building of family support networks as the core components of the project.

"All these results come from becoming a Queen's Young Leader," Deo says. "I became a Chevening Scholar and gained a master's degree, and now I'm able to coordinate my organisation with more knowledge in human rights and social sensitisation. I also became a Mandela Washington Fellow – I was invited by Barack Obama to the US because of the work I do. I met Barack Obama! I give credit to being a Queen's Young Leader because if not I wouldn't have achieved all that's happened in my life."

> "One of the most important things I learned from being a Queen's Young Leader was to tell your story in an inspirational way."

United Republic of Tanzania

Martha Chapote

Martha had been an ophthalmic nurse since 1992. In 2007, she trained as a trachomatous trichiasis, “TT”, surgeon, to provide surgery to those with advanced stages of trachoma. When the Trachoma Initiative was started in Tanzania in 2015, she began doing surgery in trachoma camps supported by the Trust, moving from village to village, often on a daily basis. “I love this work because I help people regain their vision,” she says.

In 2014, millions of people in Tanzania were at risk of losing their sight as a result of trachoma. Since the Trust began working in the country, 22 sessions have been delivered to train, retrain and certify surgeons to provide surgery for trachoma, and 7,700 people have had their sight saved.

Trachoma is a bacterial infection, and without treatment can cause the eyelashes to turn inwards, and with every blink, irreversible damage is caused to the front of the eye. “At the beginning, trachoma feels itchy,” Martha explains. “Then the tears start, and red eyes, and after that severe inflammation. Women are affected more than men,” she adds, “because they tend to care for the children; washing their eyes or taking a piece of clothing and wiping them, and then wiping their own eyes. So, the infection may come from the child to the mother.”

A simple, 10-minute operation can correct the in-turned eyelashes and prevent any further damage to the eye. But helping people to understand surgery is one of Martha’s biggest challenges. “Some people don’t have education on how to prevent trachoma – you go to do surgery and they think perhaps you’re going to remove the eye,” she says. “So they refuse to come. They say they can do epilation, but epilation is more dangerous than the surgery because the new lashes grow sharper than the first ones and do more damage to the cornea.” Nonetheless, the message is gradually being heard, and Tanzania is on track to eliminate trachoma as a public health problem.

“You can do the surgeries anywhere – in church, in somebody’s house; as long as you get enough light, you can even do it under the tree,” Martha says. “You can help them to see again, to no longer feel pain – that makes you feel proud. It is about being human.”

> “You can do the surgeries anywhere – as long as you get enough light, you can even do it under the tree.”

Zambia

Gift Chansa

Gift grew up in the township of Chibolya, in Lusaka, known for its “criminality and drug abuse,” he says. There were no parks, libraries or youth centres so Gift and his friends amused themselves with acrobatic contests in the street. “It was something I was doing for fun,” he says.

In 2006, Gift joined Barefeet Theatre, an organisation that works with young people from the streets. “I was surprised, every time we performed people would smile and say amazing things.” The troupe put on shows around the world. Then, in 2014, Gift was invited to the birthplace of Chinese acrobatics, to train with the Wuqiao Acrobatic Art School.

Out of that visit, Gift and three others, also from Chibolya, collaborated with Charlotte Groen, now its executive director, to set up Circus Zambia. “I always had problems and challenges because of the place I came from,” Gift says. “When I started acrobatics, something shifted. It felt so good and we wanted to use that to address some of the issues, to change the image of our compound and get the ghetto mentality out of young people’s minds.”

Since its establishment, Circus Zambia has reached more than 5,000 young people, giving them tools to boost their self-esteem and help save lives. “We pick those kids that if you don’t do anything will end up in the street,” Gift says. “We pay for their school fees and we engage them in the acrobatics, performing, bringing them to blossom and reaching their full potential.”

By using circus skills, Circus Zambia not only tries to change the narrative of people’s lives, but also to provide information on issues such as HIV awareness, cholera and sanitation that would otherwise not be talked about. “It’s very effective,” Gift points out. “Our workshops are interactive and fun, and Circus Zambia has become a safe space for a lot of young people in Zambia.”

Gift says that the Queen’s Young Leaders award has “made me realise how much power one person can have.” Circus Zambia has recently found new premises that include a library, class room and training room, and it is raising money to finish building a theatre.

Gift is very animated about his meeting with The Queen. “It’s unbelievable! I remember standing, waiting for my name to be called out,” he says. “I remember that part – I don’t remember the rest! Everything just went so fast. It was magical. She asked me, ‘What it is that you do?’ and I was like, ‘Oh my gosh!’ I didn’t know what to say! It was so nice.

“It means so much. You just do something that you’re passionate about, and you care so much and you feel like nobody cares out there. And now we know people care, and The Queen herself cares and she’s invited you to the palace. This is quite amazing for me.”

> “Through circus we have the opportunity to speak and address issues that young people face in our community.”

Asia

Bangladesh

Musfeka Naznin

Musfeka, who lives in Barisal, became involved with the Trust's Diabetic Retinopathy Initiative in 2017. "I was curious to learn about the initiative," she says. "I thought that in the villages there are a lot of poor people who can't get their eyes checked properly."

Bangladesh has the second highest incidence of diabetes in the Commonwealth next to India, with one in 10 of the population affected, yet more than half of those who have diabetes don't even know they have it, which has led to an explosion of related complications. One of these is a huge increase in blindness – indeed diabetes is now the fastest growing cause of blindness globally. But sight loss from diabetes – through damage of the blood vessels in the retina – is not a given; early detection, treatment and follow-up can reduce the risk of blindness by 95 per cent.

The Trust is tackling diabetic retinopathy across the Commonwealth, bringing together professions to find solutions, and training health care workers to screen for and treat diabetic retinopathy. One of its initiatives is "cascade training", which involves individuals travelling to remote communities with little or no access to health care, and delivering presentations, often to women, many of whom rarely leave their homes, and who would not otherwise hear about diabetes and health care.

Musfeka was brought up by her grandmother after her parents died soon after she was born. She was supported in school by a local charity in the wake of Cyclone Sidr in 2007, and is pursuing a bachelor's degree at Bakerganj Government College in Barisal.

"I didn't want to do the cascade programme," she says. "I felt scared. I had never talked to 200, 250 people at once." But Musfeka now plays an important role in raising public awareness of diabetes. "People share information with family members and neighbours," she says. "It's a privilege to be able to work with these women. I love it when I can see they are engaged in my messages and participate in the sessions with enthusiasm. Everybody treats me as a doctor and calls me doctor/sister," she adds, laughing.

Alongside Musfeka's work, the Trust has helped to establish a specialist diabetic retinopathy zone at Sher-e-Bangla Medical College Hospital in Barisal on the bank of the River Kirtankhola in south-central Bangladesh. This is a rural area of close to 10 million people who now have easy access to eye care services which were previously a day's boat journey away.

"I was curious to know about diabetic retinopathy," Musfeka says. "And through the initiative I have met The Countess of Wessex who came to observe first hand the work we do. That was amazing."

> "In the field, everybody treats me as a doctor and calls me doctor/sister."

Brunei Darussalam

Ahmad Fadillah Sellahhuddin

Fadillah is one of the final cohort of Queen's Young Leaders. In January 2017, he co-founded Projek Bina Ukhwah with a group of friends. "It's a platform for businesses and the community to empower underprivileged families in Brunei Darussalam."

Projek Bina Ukhwah has so far provided capacity building training to more than 50 young people, including from marginalised backgrounds; engaged and trained 250 volunteers and helped some of them set up their own initiatives; assisted six families in starting their own businesses; and works with 26 partner organisations.

The project's ventures range from rebuilding homes to distributing food to providing consultants to develop businesses. "We built a house for a lady living in a dilapidated dwelling," Fadillah says. "She is 85, and had never had a decent house." For one family, the Ahmads, Projek Bina Ukhwah hired a farming consultant, Nurture Enterprise, to help them learn best-practice farming. "In just a year, he owns two stalls selling different varieties of vegetables and fruit."

The project runs training programmes under the initiative Community of Doing Good. It also finds innovative ways to raise funds, for example, it has collaborated with Upsykl Brunei to revamp second-hand clothes into new designs that can be sold at a higher price.

For the past two years, Fadillah has worked in the Information Department of the Prime Minister's Office, engaging villagers, listening to their problems and following up with the relevant agencies. He was previously involved in designing projects to strengthen village economies. "We want to see that every village can create opportunities within their communities to tackle the issue of rural poverty," he says.

Fadillah was just 11 when he volunteered at his first charity run. Since then he has been involved in countless initiatives. He has been a member of the Brunei Darussalam AIDS Council (BDAC) for 15 years, helping to organise the HIV and Aids awareness programme for Peer and Youth. In 2008 he co-founded LESTARI, a programme under the umbrella of BDAC that provides young people with life-skills training, focusing on helping them to realise their potential and overcome barriers. So far more than 800 have participated. He is also involved in its follow-up, TTYL, training on team-building and youth leadership.

Fadillah is working with Tian Sern Oon, another 2018 Queen's Young Leader, on initiating a community-based mental health support group.

Being a Queen's Young Leader has, Fadillah says, "helped me to design more impactful projects and be more innovative." For the future, he "hopes to engage more young people to work closely together with villagers to improve their community and find sustainable solutions for economic opportunities."

> "Being a Queen's Young Leader, I have learned how to turn ideas into actions and transform difficulties into opportunities."


Pawara Shobha Kolsing

India

Dr Subhadra Jalali

Dr Jalali, the director of the Newborn Eye Health Alliance at LV Prasad Eye Hospital in Hyderabad, is a world-class ophthalmologist who has led the way in tackling blindness in premature babies since cases were first identified in India more than two decades ago. “I am passionate about the babies and their vision and their eyes.”

India has the highest number of premature births in the world – 24 per cent of preterm babies are born in India. In 2007 its government committed to reduce infant mortality, setting up neonatal intensive care units (NICUs) across the country. But as premature babies survive, there are more and more cases of blindness – of the 28 million babies born each year in India, a third will be premature, and a third of those, more than three million babies, will develop retinopathy of prematurity (ROP), “a potentially devastating newborn baby eye condition that can lead to total irreversible blindness within a few months of birth,” Dr Jalali says. “ROP isn’t a historical disease; ROP blindness, retrolental fibroplasia, was reported in the US in 1942 after incubators were set up the previous year,” she adds.

Preterm babies are often given oxygen in an incubator. But too much oxygen is highly toxic to immature retinal blood vessels, and can worsen the ROP. “In 1997, I saw 12 babies who had become blind because no eye examination was done in the neonatal period,” Dr Jalali says, “and it was obvious that there was going to be a huge epidemic of ROP in India now that it was on the path of reducing neonatal mortality.

“Our journey began in October 1998 when Basant Sahney hospital in Secunderabad and Fernandez maternity hospital in Hyderabad agreed to give me entry to their NICU for ROP screening,” she continues. “Soon 12 other hospitals joined. Every Friday at 8am, I would load the equipment in my car and criss-cross the Twin Cities. By 7pm, I would have examined 20 to 30 babies, and identified one or two that needed laser surgery. Then at 10pm, by which time the sole laser machine in our operating room would be free, I’d load it in my car to go to the babies who needed treatment. Often it was 2am before I got home.”

Dr Jalali calls ROP a good disease because a child is not born with it. “Disease evolves over a week or more, while the child is still under medical care, and this provides such a rare opportunity for the prevention of blindness,” she says, adding that there is a “definitive window where the disease is mild enough to get treated resulting in really good preservation of vision.” Dr Jalali’s slogan is “*Tees Din Roshni Ke*”, 30 days to vision, highlighting the critical time to have the first retinal examination.

What Dr Jalali started in Hyderabad has been replicated in many cities in India and Asia. And since 2014, the Trust has partnered with the Government of India to form the National ROP Task Force. Dr Jalali has been instrumental in its delivery. “Our programme got a big boost through the Trust’s programme,” she says. “In Telangana, it helped build a partnership with the government hospitals that for the first time made routine ROP screening in two large hospitals and two rural districts far from the city.

“I am very optimistic. We are already achieving spectacular results in the prevention of ROP.”

Dr Jalali sees the “digital revolution having a huge impact. At a basic level, with mobiles in every nook and corner of India, I can immediately call up a patient who missed an appointment; two decades ago it was impossible to reach such parents,” she says. “Low-cost, hand-held retinal imaging devices can revolutionise ROP screening. We don’t want any child to be deprived of its right to sight.”

> “ROP is a ‘good disease’ because it is not present at birth, so we have an opportunity to preserve the potentially good vision that a child was born with.”

India

Suhani Jalota

Suhani was just 20 when, in July 2015, she set up Myna Mahila Foundation to improve women's health in India. "Since the age of 15, I had been spending time with women in slum communities," she says.

"They told me horrific stories about living on the railway tracks, children dying in front of them, not being able to walk to the public toilets without being sexually harassed." Suhani met the community leaders and began brainstorming. "We became very chatty," she says. "That's where the name comes from – myna, from the chatty South Asian bird, and *mahila*, which means woman in Hindi. We found that sanitation and hygiene were clear signals of dignity for women, so we jumped on that."

Myna Mahila Foundation employs women from those slum communities, "the jobs just happen to be making menstrual pads!" Suhani exclaims. "Menstruation in India is a taboo topic," she adds. "Girls skip school, women are excluded from sports and shunned from places of worship while they're menstruating." This didn't deter Suhani. "I started with four women and trained them to describe how pads work so they could sell them door-to-door to women who would normally not leave their homes or go to a pharmacy to buy them from male clerks." She now supplies pads to 10,000 women in 15 slum communities on a monthly basis.

Suhani is doing a PhD in health economics and policy at Stanford University in the US at the same time as studying for an MBA at Stanford Graduate School of Business. "My PhD work is very closely aligned with the mission of Myna Mahila," she says. "The two reinforce each other."

In 2017, Meghan Markle, now HRH The Duchess of Sussex, named Suhani as one of the women who had changed her life. The two met at *Glamour* magazine's 2016 College Women of the Year awards lunch, and Meghan later accompanied Suhani on a trip to Mumbai.

"During my time in the slum communities," Meghan said, "I shadowed women who are part of a microfinance system where they manufacture sanitary napkins and sell them within the community. Ninety-seven per cent of the employees of Myna Mahila live and work within the slums, creating a system which is the key to breaking the cycle of poverty and allowing access to education."

The following year, the Myna Mahila Foundation was one of seven charities, and the only one outside the UK, chosen by The Duke and Duchess of Sussex to benefit from donations received in place of wedding gifts. Suhani attended their wedding, accompanied by three women from the foundation, "two of them live in slums and hadn't travelled outside Mumbai, let alone the country," she says. "All of us wore saris; we felt we represented India at the event and that's a great feeling."

Suhani's organisation is run by this network of women. "We want to build women leaders in management," Suhani says. "One of the supervisors is 23 years old, she grew up in the same slum, and she is managing the entire company's operations. She now supports her family financially."

Suhani acknowledges that "people know us as the organisation that met The Queen of England, which matters a lot, especially to the older generation. We got a lot more volunteers after the news was released. And it legitimises the work we do.

"In the next five years, we hope to have one million women supported through our programmes," she adds.

> "The residential programme was a life-changing experience for me. It motivated me to focus all my energies on the things that mattered."

India

Ganta Suseela

Suseela, who lives with her husband and children in Gajularega in Andhra Pradesh, south-east India, is one of India’s 860,000 accredited social health activists, “ashas”.

In 2005, the Ministry of Health & Family Welfare, as part of its National Rural Health Mission, introduced village-level female health workers to act as an interface between the community and the public health system. Ashas provide basic health education; conduct home visits; take pregnant women to hospital for check-ups and to give birth, and children for immunisations; provide basic first aid and help to improve village sanitation.

Suseela is the first point of contact to the health system for more than 3,000 people in her ward. “If anyone is sick in the village,” she says, “they won’t call the doctor, they will call me.”

Suseela left school at 16, and worked as a tailor. She became an asha in 2006. “Each day I go from door to door to meet all the people in my ward,” she says. “My main focus is on pregnant women and newborn babies. I note down if anyone is pregnant and will then call on them every month. It is the same for people with tuberculosis or leprosy.” Since the establishment of asha workers infant mortality rates in India have fallen dramatically.

As part of the Trust’s Diabetic Retinopathy Initiative 5,586 asha workers across 10 districts were trained in diabetic retinopathy to help ensure that those with diabetes – an estimated 72 million people in India – are aware of the risks to their eyesight and how they can prevent blindness.

“I learned about the basic parts of the eye and what happens when you don’t control your diabetes,” Suseela explains. “We were told that any diabetic patient who has been suffering for more than five years needs to have their eyes screened for diabetic retinopathy.”

As she does her rounds, Suseela now asks people if they have diabetes. “If they are unsure then I’ll ask them if they have any symptoms like, ‘Do you pass urine very often?’ or, ‘Are you losing weight drastically?’,” she says. “If someone has diabetes and needs their eyes checked then I will take them to the district hospital in Vizianagaram.”

More than half of all those with diabetes are unaware they have the condition. Some people may have lived with diabetes unknowingly for 25 years, and by the time they notice damage to their eyesight, it is too late for treatment. “Unless I tell them, people with diabetes don’t know that they need to get their eyes tested,” Suseela says.

“It is a 24-hour job. But I am being helpful to my own people in my village and that makes me happy.”

> “If anyone is sick in the village, they won’t call the doctor, they will call me.”

Malaysia

Heidy Quah

Heidy established her charity, Refuge for the Refugees, in April 2012 with a school friend, Andrea Prisha. When Heidy and Andrea were 17, they had had six months free before going to university. They spent four of them teaching English at the Chin Children's Education Centre, a refugee school in Kuala Lumpur funded by UNHCR, the UN refugee agency. "The school is now parked under the RFTR umbrella," Heidy says.

There are more than 170,000 refugees in Malaysia, but they are currently unable to go to school. "Our aim is always to bridge the gap between the refugees and locals," Heidy says, "as well as provide access to formal education."

RFTR operates 35 schools, 25 of which are in Myanmar ("people we help here have connected us to families in Myanmar who don't have access to education," Heidy explains), two safe houses and an orphanage. "So many of our kids who couldn't read, write and speak a word of English are now graduating with excellent results," Heidy says. "Some are studying medicine and engineering!"

Heidi graduated in 2017 with a degree in accountancy and finance, and now runs RFTR. Its next project is a social business school where refugees can learn skills such as cooking, baking, sewing, barista-training, barbering, tailoring, coding and language classes. "It's a safe place, a refuge," Heidy says. "We have a toy library where mothers can drop off their kids while they pick up a new skill; people can seek advice." RFTR also has an in-house prenatal clinic, offers a monthly dental clinic for refugees, and has recently partnered with mental health professionals to provide weekly therapy sessions. "And we have just been instrumental in getting UNHCR to reverse its policy on Chin refugees, which will affect 160,000 refugees globally," Heidy says. "It's a big win. But what was most exciting is that we made sure the refugees themselves were at the forefront of making this happen."

Heidy herself has become more involved in "all things human trafficking, focusing specifically on exposing baby-selling in Malaysia," adding, "it involves dealing with agents and syndicates and the black market – it gets quite dangerous at times." She takes Thai boxing classes for self defence.

The Queen's Young Leaders award has allowed RFTR "to grow in leaps and bounds," Heidy says, and adds that, "never in my life did I think I will be meeting The Queen. This was my third time visiting London. Every time I go to London, people say, 'Hey, you're off to meet The Queen?' This time I told them, 'Yeah... I am meeting The Queen.'"

> "The Queen's Young Leaders award works very much as a launch pad. Young people have a voice and a vital role to play. The fate of the next generation lies in our hands."

Pakistan

Dr Irfan Khattak

Nearly 90 per cent of people affected by avoidable blindness live in developing countries where there is little or no access to eye health care. The Trust established the Commonwealth Eye Health Consortium in partnership with the London School of Hygiene & Tropical Medicine in 2014 to strengthen eye health systems across the Commonwealth and to train and develop eye health professionals. Dr Khattak is one who has benefited from this association.

After completing a master's degree at the London School of Hygiene & Tropical Medicine (LSHTM) in 2015, Dr Khattak returned to Pakistan where he is a consultant ophthalmologist and a lead in the teaching faculty at the Pakistan Airforce Hospital in Islamabad. Dr Khattak's motivation for doing his master's had been, he says, "to develop and strengthen the eye care system in Pakistan, and to establish a dedicated retina clinic at my workplace." At the time, Dr Khattak was a surgeon at the Al-shifa Trust Eye Hospital (ASTEH) in Kohat, and he proposed that ASTEH expand its eye care services to include clinics in oculoplasty and paediatric ophthalmology and a diabetic eye clinic equipped with a retinal laser facility. These clinics have now opened.

The association with LSHTM allowed Dr Khattak to broaden his field and gave him international exposure. "It helped in many ways," he says. "I can work with stronger persuasion for the cause." The challenges in Pakistan are, Dr Khattak says, great but he is advocating for the establishment of a regular screening programme for diabetic retinopathy; diabetic retinopathy training for ophthalmologists, regular examinations for known diabetic patients, and efficient screening for those recently diagnosed with diabetes. "Continuous association with LSHTM through the Commonwealth Eye Health Consortium, even after four years of graduation, has been a constant stimulus," he says.

> "Long-term, I am working to establish a dedicated screening programme for diabetic retinopathy – first for my organisation, then the region as a whole."

Pakistan

Lady Health Workers

More than seven million people live with diabetes in Pakistan, with an estimated further four million unaware that they have the condition. As the incidence rises, more and more people are at risk of the associated complications – and one of the most devastating is blindness. With rates of diabetes so rapidly on the rise, the Government of Pakistan has identified prevention and health promotion as one of the most effective interventions for tackling the disease.

Since 1994, Pakistan has been developing an army of Lady Health Workers, now more than 100,000 strong, to bring health care directly to women in their homes. They are the backbone of the health department, as one health sector consultant recently put it. Lady Health Workers have unprecedented access to their communities – the poorest, mainly rural, communities in Pakistan – in which they live in "health houses". Lady Health Workers are the first point of contact for millions of people across Pakistan, raising awareness of health conditions, administering a programme of immunisation to children (particularly for polio) and referring people to services. And it is the Lady Health Workers who are on the front line in raising awareness of diabetes.

Through the Trust's partnership with the Fred Hollows Foundation, more than 1,300 Lady Health Workers have been trained to raise awareness of diabetes. In Sindh province, in the south east, the Lady Health Worker curriculum now includes the study of diabetes, including diabetic retinopathy – a major endorsement by the Pakistani government of the Trust's Diabetic Retinopathy Initiative.

The District Health Authority of Lahore in Punjab will also include the chapter on diabetes in its curriculum, while also making its existing Lady Health Workers aware of diabetes and its complications.

By educating its Lady Health Workers about diabetes, Pakistan has taken a huge step forward in tackling the disease. And it is thanks to the commitment and diligence of these women that more than 100,000 people in Pakistan have already been screened for blindness caused by diabetes.

> It is the Lady Health Workers who are on the front line in raising awareness of diabetes.

The Republic of Maldives

Safaath Ahmed Zahir

Safaath set up Women on Boards in 2015, the year she received her master's degree in finance. "After graduating, I didn't want a white collar job," she says, "life has more purpose." But, she says, it was nonetheless shocking that there were so few female directors in state-owned enterprises and corporate boards in the Maldives. "We need to do more for women, and we can do more for women."

The aim of Women on Boards was to bring about sustainable change. "It has made a difference," Safaath says. "It was the right push at the right time to advance women's rights." Safaath also founded Women & Democracy, to work towards women's economic and political participation. Its first project was a Gender Equality Manifesto, "aimed at putting gender issues into prime focus and ensuring that future policy makers address those issues." Women & Democracy is currently conducting confidence building workshops for women running in the 2021 local council elections, and "brainstorming on a project to empower women to run for parliament".

The Queen's Young Leaders Programme has, she says, "had a lasting impact on me. Like I say to my fellow Queen's Young Leaders, it's not just an award, it's an encouragement that we are on the right path. It assured me that nothing is impossible."

> "Whenever I get stuck in anything, I know I can reach out to my Queen's Young Leaders family. That has always helped me."

The Republic of Maldives left the Commonwealth in October 2016.

Singapore

Tian Sern Oon

Tian is using technology to help people access mental health support. He is the founder of Acceset, a platform for people to discuss mental health issues and seek help anonymously. “Here’s the thing: from when I was seven, my mum was schizophrenic,” he says. “There was very difficult access to care when I was growing up, and I think it had a huge impact.”

Looking back, Tian says, “I realise that I couldn’t do anything about the mental health problem, but I could do something to solve the structural problem of access to care. I wanted to solve the problem that affected my family.”

Tian’s main aim is to overcome the stigma attached to mental illness. But it is not enough, he says, to raise awareness; that leaves the burden of seeking help on the individual, and, he points out, in Singapore that is especially problematic. “It often takes four to six years before someone with depression decides to seek professional help, and only one in five do so,” he says. “I am hopeful that, with technology and a trained volunteer community, Acceset can reduce the time taken for those who need help to seek it.”

Acceset has recently developed a training module that will, Tian says, equip 610 students who are taking counselling courses on how to manage high-risk cases, such as self-harm and suicide, as well as how to craft replies for a range of problems that students may face as a result of exposure to stressors in their lives. “We pair these e-befrienders with school counsellors to tackle issues,” he says, “providing support online to peers who face socio-emotional issues.”

Tian says that being selected as a Queen’s Young Leader was “life-changing”, because it recognised the potential of his project. “It gave me confidence to take myself more seriously and believe in myself a lot more.” It also gave him the skills to be a better leader. “I am a risk-taker, but I give my colleagues the opportunities they need to succeed. I believe in their potential, and work with them to identify their strengths through work, just as the Queen’s Young Leaders Programme has done for me.”

> “I want anyone who is going through a tough time to have a ready listening ear that can relate to their problems.”

Sri Lanka

Rakitha Malewana

"My aim is to help people achieve better health and wellbeing," Rakitha says, and he has done so much to accomplish that. Rakitha is a medical researcher and inventor, entrepreneur and youth activist with a special interest in HIV and cancer. He is also an award-winning dancer, a freelance dubbing artist and a television presenter. He is currently studying for his BSc, majoring in biology, at Husson University in Maine, USA, and has already received accolades for his scientific research. Rakitha won two gold medals at International Science Olympiads.

In 2011, when he was 15, Rakitha, as he puts it, "moved into medical research". "As the youngest medical researcher in the history of Sri Lanka, I successfully designed a preliminary stage HIV drug," he says. "With the exposure to the international research arena, I got to know a lot of things, and that exposure led me to boost my potential, from designing water conservation methods to continuing research on an HIV vaccine."

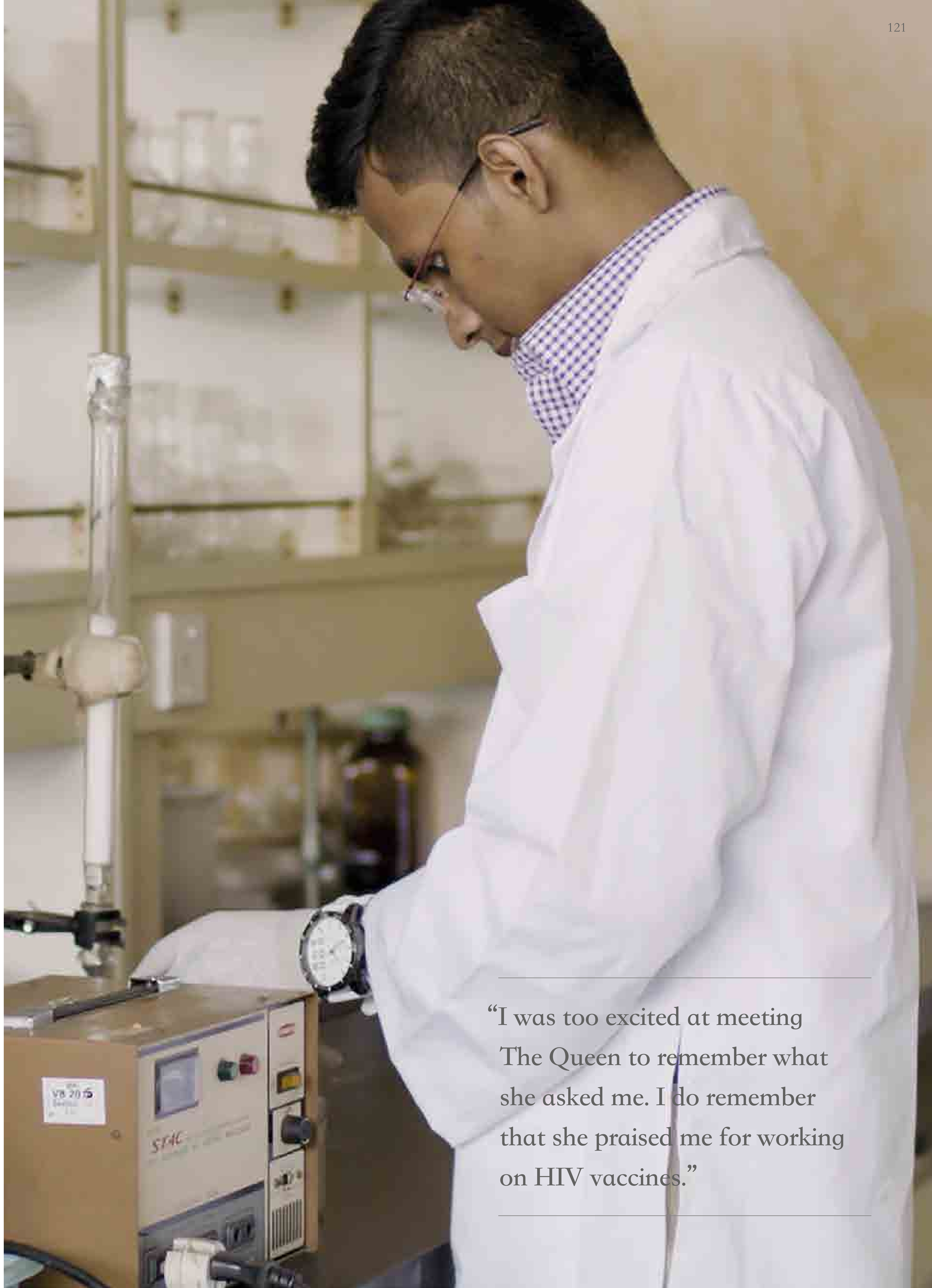
Rakitha had been visiting slum areas in Colombo to try to interest six- and seven-year olds in science, maths and English. He quickly discovered that many of the parents, as well as some of the children, were HIV positive. "The journey to those places changed my life," Rakitha says. "Stigma and discrimination against HIV-positive people is sky high. It is the major motivating factor for me to continue my work on behalf of that community."

In 2012, aged just 16, Rakitha established Ideanerd Sri Lanka which "popularises science. Its sole intention was to help children like me to establish a research and innovation culture." He later expanded its remit to address sexual and reproductive health (SRH) issues. Ideanerd has produced "a number of internationally recognised young trailblazers and changed the way marginalised young people are perceived," Rakitha says. "Most of the kids of HIV-positive individuals miss many years of school, often because of their backgrounds. We are truly optimistic that we can change the viewpoint of our people."

Three years later, Rakitha co-founded with Prashani Goonathilake United Youth Consortium to raise awareness of SRH – "With the traditional culture of my country, talking about subjects such as SRH, HIV/Aids and LGBT is taboo," he says – and provide support and counselling to families living with HIV. It now has about 80 members. "Since we work directly with affected communities, we can understand their immediate problems and tailor solutions accordingly," Rakitha says.

The Queen's Young Leaders award has allowed Ideanerd to collaborate with many government and non-governmental institutions, Rakitha says. "We have engaged more than 50,000 young people by conducting island-wide advocacy programmes, counselling and information sessions." Rakitha is now working to establish an HIV research and advocacy centre that will open in 2020.

And the best thing about the residential programme? "Meeting The Queen, of course."



"I was too excited at meeting The Queen to remember what she asked me. I do remember that she praised me for working on HIV vaccines."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Caribbean and Americas

Antigua and Barbuda

Lia Nicholson

“Those who knew me growing up were surprised I didn’t develop gills,” Lia says. “I spent my childhood exploring tidal pools and underwater crevices, establishing a connection to the natural world that shaped who I wanted to become.”

Lia was born in the United States but returned with her family to Antigua when she was six. Her father, who passed away in 2013, was, she says, “a hobbyist tree planter; he taught me about the environment, which is what I do now.” Lia studied environmental policy at university and has a master’s degree in environmental management from Yale. “I started volunteering with the Environmental Awareness Group after finishing my degree in 2009, monitoring beaches near my house for sea turtle nests, collecting data,” Lia says. “I helped with the census of the critically endangered Antiguan racer snake. A few months later, they were hiring for the post of executive director; I applied for the job, so I was able to turn my passion into my work.”

Lia moved to the Department of Environment after completing her master’s degree. “I helped secure funding for local projects – from solar and wind projects, to agriculture, potable water, hurricane preparedness,” she says. “There are many excellent, innovative solutions at the community level being pioneered by inspiring and committed leaders. In Antigua, the Association of Persons with Disabilities is installing solar power and hydroponics farming with disability access; a Freetown village community leader is restoring a water catchment to combat drought.”

Lia is now working as a technical advisor for C40 Cities in Lagos, Nigeria, to develop a climate action plan by 2020. “How can billions of people around the world have an improved quality of life while keeping global temperature below a 1.5°C rise?” Lia posits. “When enough people and companies are answering this question with investments, research and technology, it will start to have an impact on island states like Antigua and Barbuda that have small populations, small emissions and huge climate exposure.

“The Queen’s Young Leaders Programme helped me to refine my goals,” Lia says, “and this continues to influence my decisions.”

> “The Queen commented that climate change is a big challenge for the Caribbean. I’m paraphrasing here; I would like to have recorded the exchange since it passed in a rapid, exhilarating blur.”

The Bahamas

Alicia Wallace

Alicia started Hollaback! Bahamas in 2014. “I had experienced street harassment for many years, and was completely fed up,” she says. “I had started to respond, catching the harassers off guard because they were accustomed to being ignored. A friend saw a video about street harassment and the practice of responding – the holla back – and sent it to me.”

Alicia is now the director of Equality Bahamas, “promoting women’s rights as human rights. I organise monthly dialogues, manage social media, plan campaigns and engage in public dialogue,” she says. She is also a freelance writer, researcher and consultant. “I write a weekly column in the national daily newspaper, *The Tribune*, develop curricula, conduct research on gender, LGBTQ+ and youth issues, design strategic plan processes, among other services.”

Alicia, who read economics at Saint Mary’s University in Halifax, Canada, had thought that she would “end up launching start-ups, managing large investment portfolios or within a government agency focused on economic diversification.” But while she was at university, she was a “youth live-in” – living in a house with three women aged between 16 and 22 who were at risk of homelessness. “They were not quite ready for independent living,” she says. She helped them with budgeting, grocery shopping, meal planning, goal setting and other skills essential for independent living.

“That experience changed the course of my life,” she says. “I knew that what I really wanted and needed to do was create change in our social systems.”

Alicia was one of the first cohort of Queen’s Young Leaders in 2015. “The days in Cambridge were great,” she says. “It was wonderful to hear from experts and practitioners.” Alicia was part of the first legacy panel, “we started plans for the post-Queen’s Young Leaders Programme network,” she says. “Being a Queen’s Young Leader has given me access to a large network of people with expertise in many different fields. It is fantastic to know there is someone I can call on if I need information or want to make a connection for someone else on climate change, entrepreneurship or agriculture. There is tremendous potential for partnership and collaboration within the network and beyond.”

The Queen’s Young Leaders Programme, she adds, “brought a group of dynamic young people determined to create change for themselves, their peers and their countries together, and gave us a buffet of opportunities.”

> “Build a network, and nurture it. There is always information to share, paths often cross more than once, and another perspective can bring tremendous value.”

Barbados

Jamilla Sealy

Jamilla, who works for the Ministry of the Environment and National Beautification, has been involved in environmental protection in Barbados since she was 11, "mainly clean-ups around my school and at the beach."

Jamilla has a master's degree in environmental and natural resources management (climate change) from the University of the West Indies and, from December 2014 to September 2019, was the regional chairperson for the Caribbean Youth Environment Network, which empowers young people to address sustainable development and environmental issues.

The Duke of Sussex announced that Jamilla had been made a Queen's Young Leader during celebrations for the 50th anniversary of independence for Barbados at the Kensington Oval in Bridgetown in November 2016. "Jamilla is passionate about the environment," he said. "She teaches environmental science to children and helps communities here in Barbados to understand the threats posed by climate change."

"I'm a pretty introverted person," Jamilla says, "so being the centre of attention was terrifying. All I was thinking was, don't trip up and remember the protocols! We talked after the announcement. Prince Harry said, 'Sorry for embarrassing you like that.' But he also said that being internationally recognised helps with national public image. He was so down to earth and relatable."

Jamilla has recently become involved in sickle cell advocacy, joining an online sickle cell support group in March this year. "When I met The Queen, I told her how the residential week had made me want to work on sickle cell disease." Jamilla was diagnosed with haemoglobin C sickle cell disease when she was four. "I have finally started a blog about the disease and my journey, called 'Walk in my Joints,'" she says. "I look back on an experience I had, about how I was treated. It didn't seem like an emergency; the nurses and the staff did not seem knowledgeable about sickle cell disease. I want to change that in Barbados, for there to be better care for sicklers; more empathy at school and in the workplace; and better awareness.

"I am much more confident since being selected as a Queen's Young Leader," she adds. "My platform has grown, and I can reach more people to raise awareness about the environment, and to help sicklers and their parents."

> "It was very exciting to be in London, not only to collect my award. I saw it as a proud moment for Barbados."

Belize

Deidra Smith

Deidra was in junior school when the seeds for her scholarship programme were sown. "One of my best friends was very smart, but couldn't attend high school because of lack of finances. There are many brilliant, hardworking young people in Belize, and I wanted to give an opportunity to further their education."

Deidra set up her scholarship programme in 2012. The goal was to award a scholarship to one student every four years to enable them to finish their education, at the Cayo Christian Academy. "We have been able to do a little more than that," Deidra says, and the programme has been able to offer assistance to university students.

"A lot has changed since I started the programme. In 2016, I set up a leadership camp that runs every summer for a week." She is now working to tie the two programmes together, and choose students for scholarships from the camp. "It will give us a week to get to know applicants," Deidra says, "and give us a better judge of character and work ethic." She also plans to move away from school to university scholarships. "And we have extended the programme to include mentorship of those who have a business idea, and have already helped six people with their small businesses," Deidra adds.

Deidra received a partial scholarship but took out a loan to fund her degree in tourism and hospitality management at Galen University, which she was able to pay off a year after graduating. "I worked while doing my master's in business administration and marketing," she adds. She is now the creative director of the design company Deidra Deandra, which she founded in 2016, and the director of ID Seven, a clothing company that funds her youth projects.

Being a Queen's Young Leader "reminded me of the importance of the work I do," she says. "It's easy to think that what you do is not really making a difference." The experience also helped in shaping her scholarship programme. "Mentorship during the Queen's Young Leaders Programme was priceless, and I now want to include more mentorship for our students.

"Being recognised by Her Majesty The Queen was an encouragement and then some. Sometimes we feel that only big organisations can have a real impact, but if everyone gave something, like a scholarship, we can help so many people."

> "My experience getting an education made me want to give an education to others who worked hard but do not have access to the things I did."

Canada

Midia Shikh Hassan

Midia, who was born in Syria and grew up in the United Arab Emirates, moved with her family to Canada in 2009 when she was 17. While still at the University of Ottawa, where she was studying engineering, she co-founded Dextra, to provide low-cost 3D-printed prosthetic limbs for refugees.

In 2015, some 20,000 Syrian refugees had arrived in Canada, "and after working with them, my team and I realised that access to health care products in camps is a huge issue," Midia says. "There is a need and demand for a more affordable way to produce prosthetics."

Some 40 million people in developing countries need prosthetics yet only about 5 per cent have access to them. Midia and her colleagues produce prosthetic hands for $20 instead of the usual cost of between $2,000 and $20,000. The Dextra hand is mechanically-activated, meaning that the user is able to handle a phone or a drinks cup. "It is strong enough to hold light- to medium-weight objects," Midia says. 3D printers basically melt plastic and material to build one layer on top of the other. The prosthetic hand is made from several parts, the two main components located around a moving joint. "So when the amputee moves the joint, the wires inside the prosthetic hand bend the fingers so that the amputee can hold objects," Midia says. "If someone is amputated along the palm, there is a sleeve with wires inside it that will pull the fingers of the prosthetic when the amputee bends the wrist."

Printing doesn't take long – 16 to 24 hours. The main challenge is to customise the fitting remotely using pictures of the amputation and modelling software. "Then you have to retrain the brain to move the arm in a different way to be able to hold objects. The ability to perform such simple actions can help with self-esteem; it really makes a difference in someone's life." Dextra also uses and modifies other open-source prosthetic hands to cater to different amputation needs. By the end of 2019, Dextra will have provided 20 prostheses, including a prosthetic hand for an amputee in Canada and one for a child in the Middle East, both currently being built.

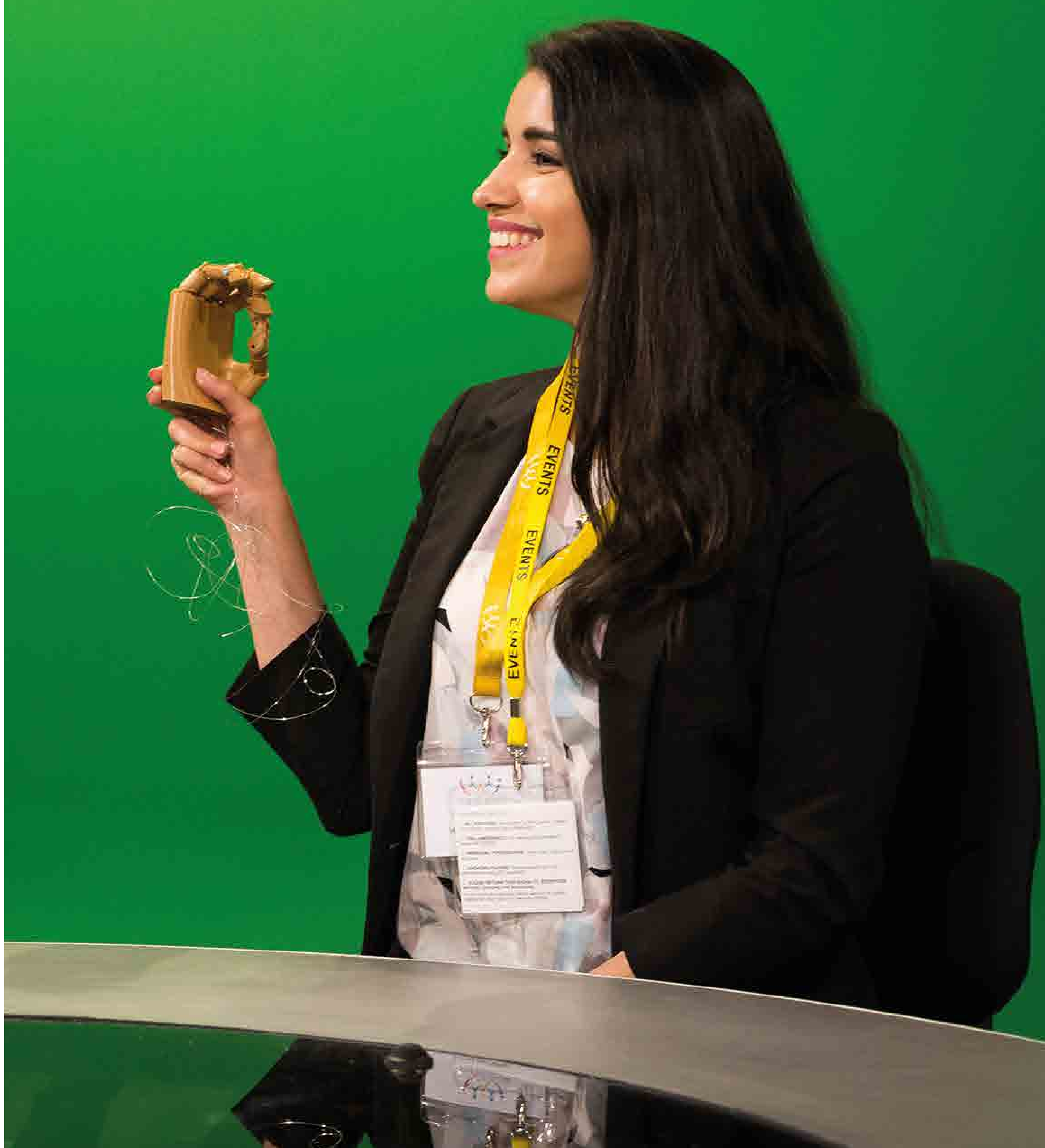
Midia also runs MakerLaunch, a programme at the University of Ottawa that helps start-ups develop, and she continues to work with Syrian refugees in Ottawa. "I speak the language, come from the same culture," she says. "I knew that I could connect on a different level." In 2016, she led a team of 15 engineering students that ran tech-based workshops for Syrian newcomers, "to help them feel at home," Midia says. "We offered workshops, to expose the kids to science, maths and 3D printing. Many hadn't been to school for over five years; it was phenomenal seeing them change and grow."

Midia was not only the recipient of a Queen's Young Leaders award, but was also chosen to represent the Queen's Young Leaders Programme at the Commonwealth Heads of Government Meeting in London in April 2018. "I met The Duke and Duchess of Sussex," Midia says. "Prince Harry spotted the prosthetic hand I was holding and asked a few questions. We ended up having a great conversation; I was very impressed by their genuine interest."

Two months later, "Meeting The Queen was amazing," she says. "While I was walking up to her to receive my medal, I felt like everything went silent. I couldn't hear the music, all I could see and hear was her. I remember her saying, 'Well, Canada is doing quite well today!'"

Midia's next project is a collaboration with another 2018 Queen's Young Leader, Derick Omari, who runs Tech Era in Ghana. "We received a Queen's Young Leaders legacy grant to train youth in Ghana," she says, "so they can use MakerSpace technologies to create affordable assistive devices to help people with disabilities in their community."

> "I think the best thing that has happened with Dextra is receiving videos of a child using the prosthetic hands."



Dominica

Dr Hazel Maria Shillingford-Ricketts

Between 1996 and 2018, when she reached retirement age, Dr Shillingford-Ricketts was the only ophthalmologist in Dominica, and remains the only person in the country trained to treat diabetic retinopathy – a major cause of avoidable blindness, with rates growing faster in the Caribbean than anywhere else in the world.

"As a child, I loved sciences," she says, "and I loved dissecting small insects, so my mother always thought I would be a good surgeon." Dr Shillingford-Ricketts did indeed study medicine, and in 1987 her first job as a medical officer was in general surgery at the Princess Margaret Hospital in Roseau. "But when I returned to work in 1989 after the birth of the third of my four children, I was assigned to work in the ophthalmology clinic – most of the time by myself."

Dr Shillingford-Ricketts was soon "in love with ophthalmology", and in May 1992 began her postgraduate studies at the University of Ottawa Eye Institute in Canada. By the time she returned four years later, the Roseau clinic, with her as its one ophthalmologist providing care to premature babies up to the oldest person, had a waiting list of a year. "I recognised persons with diabetes may have vision-threatening retinopathy," she says, "and by the time they get to me, their vision may have been lost without a chance of restoring it."

In 2015 the Trust launched its Diabetic Retinopathy Initiative across four countries in the Caribbean. "Screening for diabetic retinopathy island-wide in Dominica was pioneered in 2005 using a portable hand-held fundus camera," Dr Shillingford-Ricketts says. "Our experience was useful for establishing the Trust's initiative." With the Trust's support Dr Shillingford-Ricketts' team was able to train another screener "so we have two screening units – one at the hospital and the previous mobile unit." A new laser unit was also provided by the Trust.

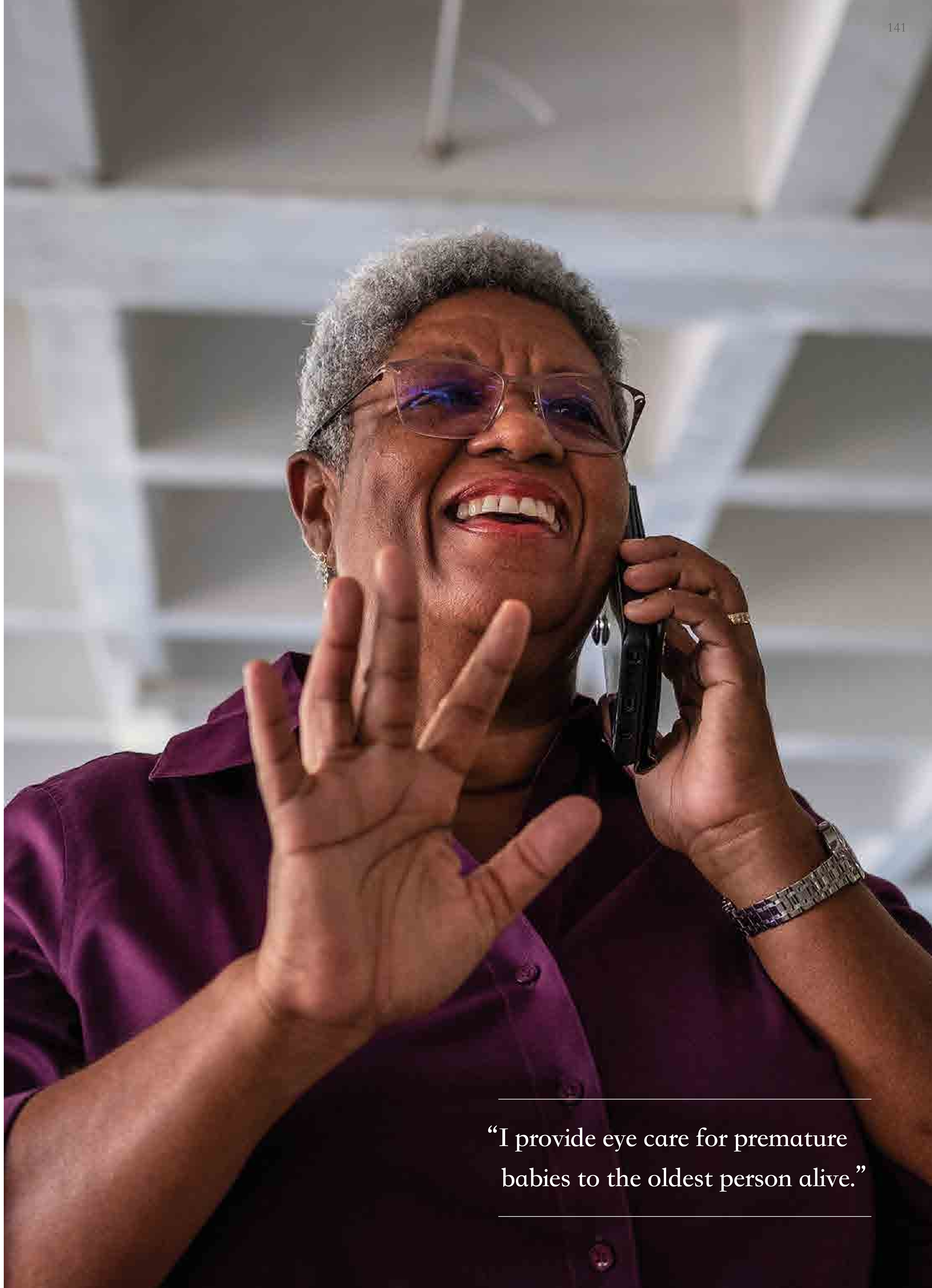
In 2017, Dominica suffered a devastating hurricane that "greatly affected hospital and primary health services, including for diabetes," Dr Shillingford-Ricketts says. "Roads and clinics were damaged so people couldn't get to doctors, they couldn't get medication and many people suffered complications."

The following July, through the Trust's programme alongside the Ministry of Health and Social Services, a workshop was convened to discuss the prevention and control of diabetes. "It's very expensive to manage diabetes complications," Dr Shillingford-Ricketts says. "Diabetic retinopathy is the leading cause of blindness in the working population – our economic base. Prevention of the complications by controlling diabetes is less costly for our developing nation.

"At the workshop I told them, 'I am an ophthalmologist working in the eye clinic. I do not know who the diabetics are – nurses and doctors in primary care are the ones on the frontline with patients with diabetes. It is their responsibility to refer them for annual screening.'"

As a result, health promotion activities, including village meetings and radio broadcasts, were developed. "This really worked in mobilising diabetics to come in for screening and treatment," Dr Shillingford-Ricketts says, stressing how important it is to continue liaising with those physicians managing diabetic patients.

Dr Shillingford-Ricketts continues to work in her private practice, and is still a member of the managing advisory committee of the National Diabetic Retinopathy Screening and Treatment Programme. "So, I continue to perform laser treatment for all diabetics," she says.



"I provide eye care for premature babies to the oldest person alive."

Dominica

Rianna Patterson

"I came up with the idea for Dominica Dementia Foundation after my grandfather passed away in 2013," Rianna says. "He had deteriorated before my eyes. It was life-changing for me." Rianna knew how emotionally and physically draining it can be to have a family member who has dementia. "I had a few therapy sessions and it was really helpful to talk to someone who understands," she says. "So I wanted the foundation to be a source of hope and a resource provider for the families who are going through this. I knew I had to do something."

Dominica Dementia Foundation (DDF) raises funds, provides emotional support for families and caregivers, and facilitates research towards dementia. "It's not just to assist those coping with dementia but also to raise awareness of what dementia is," Rianna says.

Dominica is, she says, a small island, but dementia is a global epidemic, with no cure. Rianna set up DDF at the start of World Alzheimer's Month in September 2016. It is the only dementia charity in Dominica, providing not just support, but offering a platform to speak openly about the challenges people face in caring for those with dementia. "There is stigma surrounding mental health, not just in Dominica but in the Caribbean," Rianna says. "People need to be aware of what dementia is."

DDF has helped more than 200 people in Dominica. "I remember there was a lady from England who came to see her mother, and I was able to provide resources, emotional support and point her to professionals with whom she could speak," Rianna says. "I was only 19, and it helped confirm that what we are doing is so important." Alisha Alexander was also supported by DDF when her grandmother started to decline mentally. "Before the foundation, it was left to us to find out what was going on with my grandmother," Alisha says. "People thought she was just crazy and senile." Rianna, she adds, is "awesome".

Rianna is studying psychology at the University of Kent, and is now involved with dementia organisations in the UK, as well as fundraising for DDF. She is launching an education fund named after her grandmother, the Evelyn Vidal Education Fund. "It will be a sort of emergency fund for students," she says. "My grandmother, who recently passed away, was paying for my tuition, she believed in my dreams. I want others to have that support.

"The Queen's Young Leaders award has changed the way I view my capabilities," she adds. "I never considered myself a leader until I was chosen to be a Queen's Young Leader. Now I do things differently – when there is an opportunity to speak, create or network, I am eager to get involved."

> "Although dementia affects the elderly, it can also affect people in their forties and fifties. It's a global issue."

Grenada

Michael Thomas

Michael is an active champion for the LGBTQ+ community in Grenada. “I’ve been harassed, scorned, physically assaulted and even been denied job opportunities because of my identity,” he says.

The difficulties Michael faced led him in 2007 to join GrenCHAP, an organisation that promotes sexual reproductive health and human rights. Michael saw this as the beginning of his “quest to ensure the voices of the LGBTQ+ individuals and other individuals who identify outside of what is classified as acceptable within the country of Grenada are heard not only on the local level but also regionally and internationally.” His focus is on HIV/Aids prevention and education, and sexual reproductive health and rights.

Michael is now one of GrenCHAP’s co-directors and serves as an advisor to the board. He is also involved with Love Without Fear, GrenCHAP’s ongoing anti-stigma campaign that seeks to challenge common myths and misconceptions surrounding HIV and Aids and other issues facing the LGBTQ+ community in Grenada. “The aim is to spark much-needed dialogue on sexually transmitted infections and HIV prevention, education, stigma and discrimination,” Michael says.

GrenCHAP has, he says, become his safe space, where “I can be expressive and be myself, without being judged.” And being a Queen’s Young Leader has also, he says, helped him grow and develop, personally, mentally and professionally. “It’s never easy to make changes to what you have instilled in you as an individual,” Michael says. “This experience opened my eyes to other possibilities of leadership which has governed the way I’ve approached situations that have an impact on who I am as a person and the type of leader I am.”

Now in his last year of a psychology degree at St George’s University, he hopes it will “equip him with the knowledge to better help LGBTQ+ and HIV/Aids communities not only on a physical level, but also on an emotional level.”

Michael was one of 15 people to receive a Queen’s Young Leaders legacy grant. This extra funding will allow GrenCHAP to deliver an outreach programme to increase HIV testing and sexual health awareness to LGBTQ+ communities, sex workers and people living with HIV. “In a context where sex work and homosexuality are frowned upon by the local communities, this project will provide a hugely important service to these groups in Grenada,” he says.

> “Did The Queen comment on my work? Yes! She congratulated me on doing a great job within the LGBTQ+ community here in Grenada.”

Guyana

Leroy Phillips

Leroy has been blind since he was six. One day, having walked home from school, his grandmother met him on the porch and handed him a Popsicle. It slipped out of Leroy's hands and he couldn't find it. His grandmother noticed something strange in his eyes. "Can you see me, Leroy?" she asked.

"It didn't register in my mind that something about me was different," Leroy says now. "I kept doing the things sighted kids would do. My grandmother took me to dozens of doctors but to this day we are unaware what or how it was caused." Leroy transferred to a school with a unit for the blind where he learned braille. But, he says, "we felt separate, as though we had been cast aside. My teachers didn't think I could cope with my workload and, gradually, they gave me less and less."

A 2014 report released in conjunction with Unicef found that as many as 15 per cent of people with disabilities in Guyana have never attended school. For children in their teens, the out-of-school numbers are nearly three times as high. "In my country, it is not easy growing up with a disability," Leroy says.

For Leroy, everything changed in 2006, when some older boys at school told him about a new sport, blind cricket. "I didn't believe it existed," he says. "I thought they were being lied to. Then they told me that they were taking a team to Barbados to compete in a competition. I thought, 'Who's going to take a team of blind people out of this country to play a sport no one has heard of before?'"

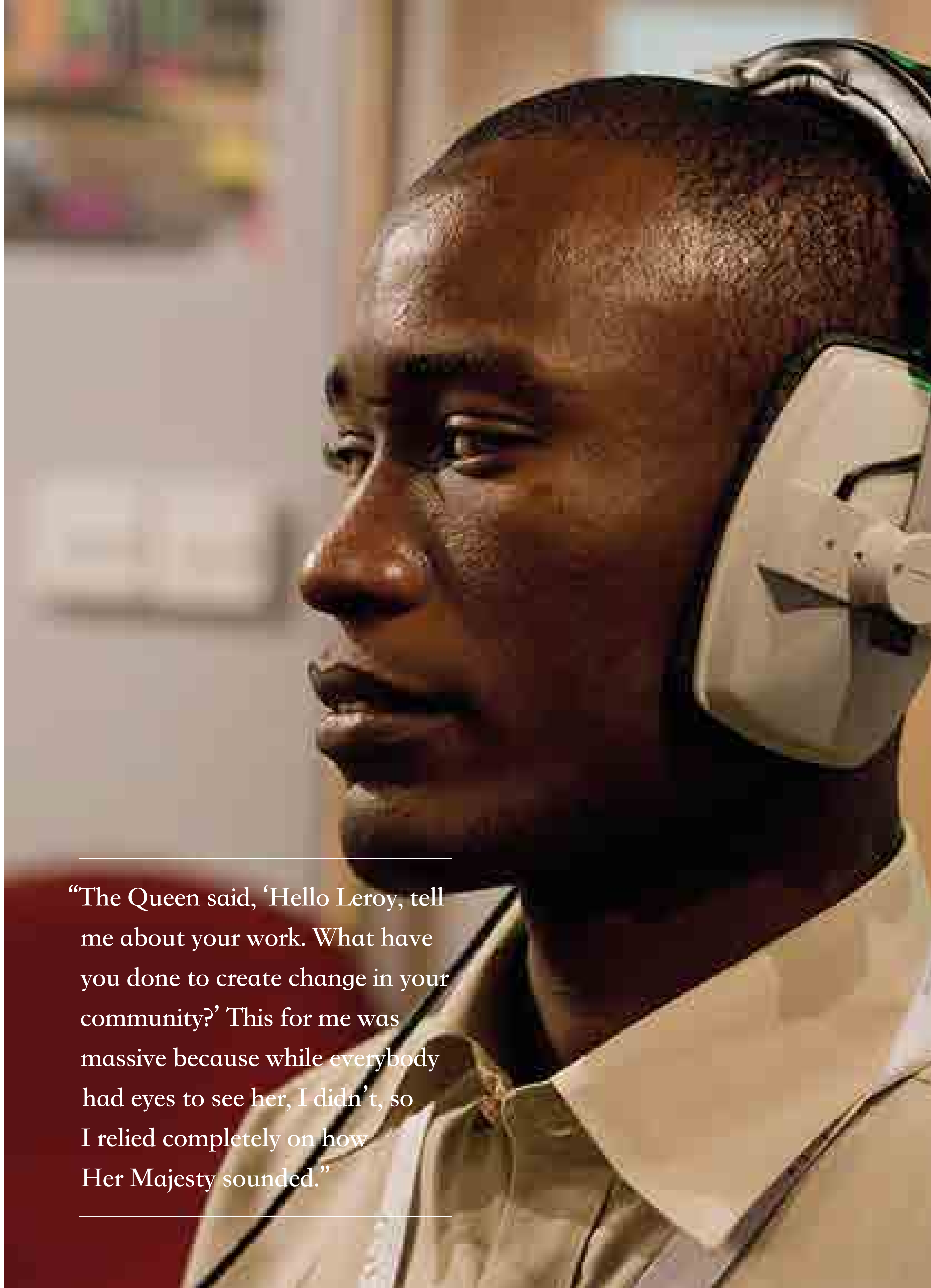
Blind cricket became the key to his future. "It has certainly had a monumental effect on my life," he says. Sports for anybody with a disability may be the only opportunity where they get to feel they are part of society, Leroy believes. "It is amazing how much confidence you gain by just playing sports," he says. "It is this that contributed to my decision to attend university in Guyana, something I never expected to do."

Leroy's experience of being a Queen's Young Leader was, he says, a memorable one. "I learned how to be resilient, how to network and when to press for the things I feel strongly about," adding that the residential programme was carefully designed and delivered and has had a huge impact on his work.

In 2017 Leroy completed his diploma in communications at the University of Guyana, and currently works at the National Communications Network as an announcer and producer, with a weekly radio programme, Reach Out and Touch. "I use the show to speak out about issues that are important for people with disabilities," he says. "And I still think finding my way into parliament would be a super accomplishment."

Guyana has, Leroy says, significant accessibility and job discrimination challenges. While a national law on disability was signed in 2010, Leroy believes there is more to be done to enforce it. "I can count on my hands how many people with disabilities are employed in Guyana."

He plans to change that. "I refuse to be seen in the lesser light of society," he says. "My advocacy is spurred by one question: when millions of children with disabilities are being marginalised and are not able to access quality education, can we afford to stand by and watch?"



> "The Queen said, 'Hello Leroy, tell me about your work. What have you done to create change in your community?' This for me was massive because while everybody had eyes to see her, I didn't, so I relied completely on how Her Majesty sounded."

Jamaica

Kellicia Brown

In Jamaica's male-dominated farming industry, one young woman is working to inspire others to enter the profession. Only 8 per cent of the female working population in Jamaica are employed in agriculture – a decrease of 50 per cent since 1991. "Everywhere I go, I see men; I don't really see women that much," Kellicia says. "It's still a men's thing; but women can bring so many new ideas to agriculture. We can do the same work, too. Whatever they can do, we can do as well."

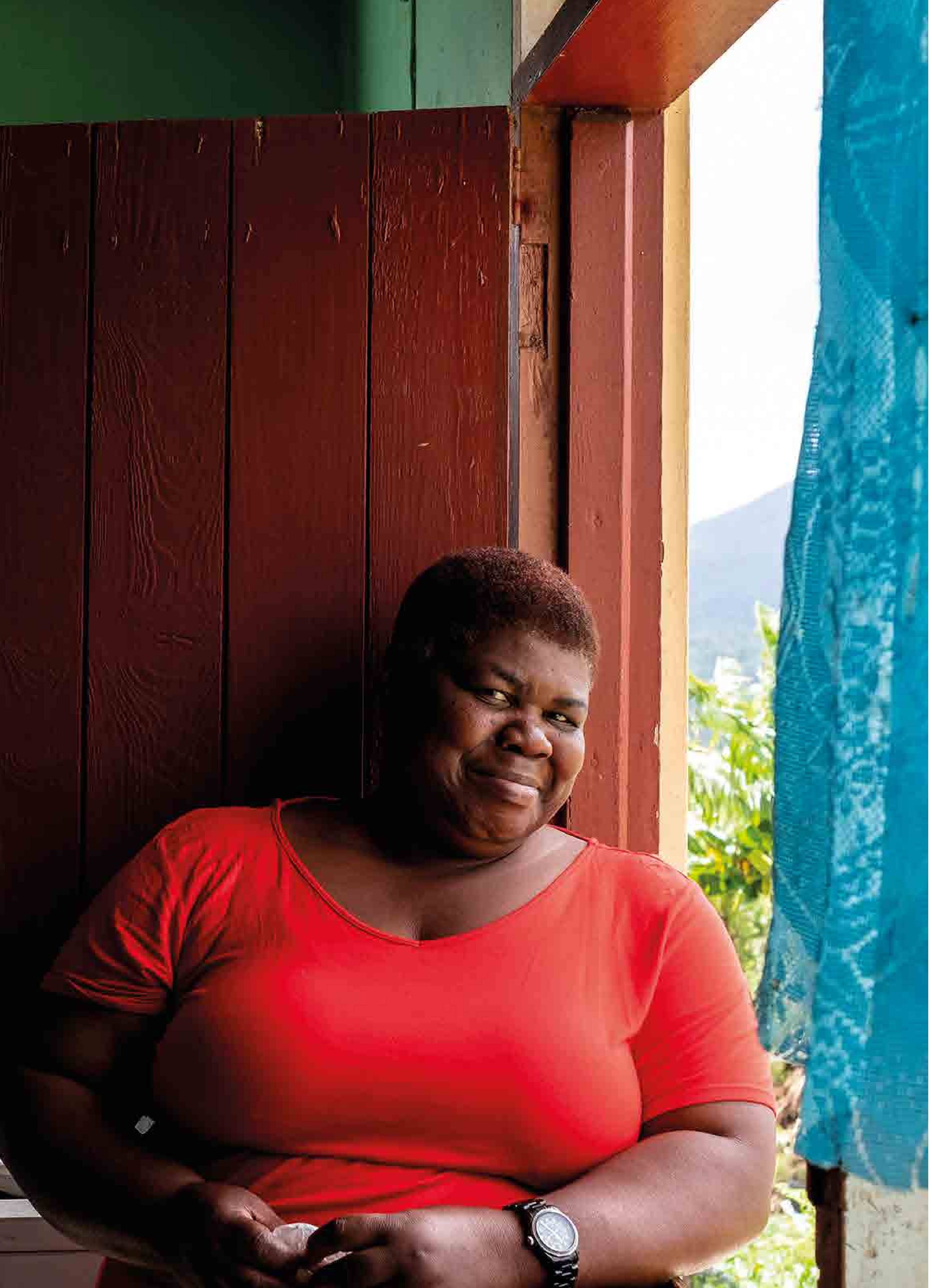
Kellicia grew up in Kingston, in Denham Town. "It was known for violence, killings, rape and all that madness," she says. "It wasn't easy. We were mostly kept inside." A career in agriculture wasn't Kellicia's first choice. "I didn't like agriculture," she says. "I didn't want to know anything about it." But then she left school without the qualifications needed to do what she wanted to do, medicine, and unemployment – an all too familiar situation faced by more than a quarter of 15-24 year olds in Jamaica – seemed a real possibility.

Kellicia learned about the Village Academy, an organisation supported through the Queen's Young Leaders Grants Programme, during a visit to church. "I was walking around the churchyard when I saw a flyer for the Village Academy on the ground," Kellicia says. "It seemed interesting. I realised I really needed to do something."

The Village Academy aims to get Jamaican youths back into a sector they have almost entirely turned their backs on. According to the country's Ministry of Industry, Commerce, Agriculture and Fisheries, a career in agriculture would not only provide employment but is also key to building the nation as a whole. Its Youth in Agriculture programme will, it hopes, lead to increased food security (Jamaica is heavily reliant on food imports), reduce rural to urban migration, modernise farming techniques and help in the fight against youth unemployment.

"Mum always spoke to me about farming," Kellicia says, "but I didn't pay that much attention. I thought, that's their thing, not mine." But Kellicia has been given the opportunity to learn skills – "I've reared bees for honey, chicken for meat and eggs, planted crops ready for harvest. I've learned such a variety of things, it's amazing" – and she is now continuing her studies. "I'm doing two courses, general agricultural and animal and natural science. My long-term goal? I see a farm, my own business and working in hospitals. That's where I see myself, I just dream big."

> "It's still a men's thing; but women can bring so many new ideas to agriculture. We can do the same work, too. Whatever they can do, we can do as well."



Saint Lucia

Sarah Jules

Sarah grew up eating whatever her parents had planted in their yard, largely heavy, starchy foods such as yams and sweet potatoes. "In those days, we didn't know that eating that way led to diabetes," Sarah says. "We ate what we had. We were getting all the nutrients, but it wasn't in the right portions. Like when it was mango season, we ate mango non-stop. Breakfast, lunch and dinner. The change is in the balance."

Sarah was diagnosed with diabetes in 2008. In Saint Lucia, more than 11 per cent of the population has diabetes. Diabetic retinopathy, a complication of diabetes, can lead to permanent blindness – but there are no early warning signs; and diabetes is now the leading cause of blindness in working-age adults.

With the prevalence of diabetes in the Caribbean almost 50 per cent higher than the global average, the Trust began working with partners in the region in 2015. Until then, there were no eye screening and treatment services for diabetes in Saint Lucia, and awareness of both diabetes and diabetic retinopathy was low. Those with advanced stages of diabetic retinopathy who required laser surgery had to travel as far as Trinidad or Barbados for treatment.

Through the Trust's Diabetic Retinopathy Initiative under the leadership of the Government of Saint Lucia, health care professionals have been trained and equipment provided, and eye health has been integrated into the standard care of people with diabetes. Sarah had her eyes screened in 2018 and discovered that she had moderate diabetic retinopathy. At the Castries Wellness Centre, where she is treated, there is information about diabetes and its complications; and counselling and advice on disease management – such as managing sugar levels – are offered, as well as eye screening and treatment.

Sarah now has her eyes screened annually, and her most recent test showed an improvement in her condition. She puts the change down to further modifications to her diet. "Nowadays, we are educated that our plates can't be only carbohydrates and meat. Now, the plate should be balanced with vegetables, protein like peas or meat and some carbs." Sarah has, she says, "altered what we farm as we learned what was healthy and what was selling at market", and has made sure that her two sons have had a more balanced diet.

"My weakness is rum cake," she adds, laughing. "There are times when I see that and have to cheat."

> "Nowadays, we are educated that our plates can't be only carbohydrates and meat, and have altered what we farm."

St Kitts and Nevis

Trevis Belle

"As the last of five children, raised by a single mother in the community of McKnight, one of the most impoverished areas in St Kitts and a community normally associated with crime, I had dreams and aspirations to not become a product of my environment," Trevis says.

In 2014, Trevis founded Making a Difference Everywhere (MADE), to raise awareness of the importance of voluntary work, but also to "diminish the idea people have about my community," he says, "to make them realise McKnight does have talent and excellence." MADE creates opportunities for young people to partake in volunteering activities, trains and mentors them, and also helps those who are struggling at school so they are not left behind.

MADE's next project is a scholarship programme to support at-risk students. It will cover the cost of textbooks, uniforms and exams. "We want to award scholarships to two potential high school students," Trevis says. "Once we award the scholarships, we will incorporate the students into professional and personal development mentoring sessions as well. They can pay it forwards and help future young people who are coming into the scholarship programme and it keeps recycling, recycling and recycling." MADE now has chapters in Trinidad and Tobago and Saint Lucia.

Trevis is also working with Xuxa Garroden, a 2017 Queen's Young Leaders runner-up, on her programme to provide breakfasts to children at school. "It has so far helped more than 100 primary school students," Trevis says. "When you wake up, you get up, you shower but then many might not have the opportunity to have breakfast, so having this knowledge that, OK when I go to school I get breakfast free of charge, this is something I want to continue around the island."

For Trevis, meeting other Queen's Young Leaders was the highlight of the programme. "That's the thing," he says, "you can learn from these people and take the advice they give you and implement it in your organisation and then there is a domino effect and you can do this for someone else. I got a lot from the Queen's Young Leaders, sitting down with them face to face. Those types of interactions are the ones that matter the most."

The impact of his award on MADE has, Trevis says, "been tremendous. It has given us a lot more credibility, and businesses are more inclined to sponsor and partner with our different projects."

> "Learning from other Queen's Young Leaders and implementing that learning in my organisation is wonderful."

St Vincent and the Grenadines

Kenville Horne

In 2010, Kenville founded the Kenville Horne Sports Academy, which teaches cricket and football to disadvantaged young people "to prevent idleness, provide much-needed support and develop life-learning skills," he says.

Kenville was himself an at-risk child. "At the age of 13, I slept on the streets for a while," he says. "I befriended guys who were part of a crew called Bitter Bush. One day I was attacked by another crew because of something between them and Bitter Bush that I knew nothing about. I thought, this could have been worse. I realised I needed to pull myself together and make something of my life."

Kenville was, he says, missing a lot of school, but when he was 14, he won the award for most wickets in an under-15 cricket competition. "That gave me a sense of self-worth and motivation. I started turning my life around." He is now a reporter on the *Vincentian*, the national newspaper.

After finishing school, Kenville began working for the ministry of sports, teaching at his old primary school, Rose Hall. "I realised a lot had changed," he says. "Many young people were not finishing secondary school. That's when I started the Kenville Horne Sports Academy. I didn't want these kids to go through what I had been through." So far more than 300 young people have passed through his sports academy. Kenville describes one student, Vennick Stapleton, who could, he says, "have chosen a different life. His mother has mental health issues and his father has not been present in his life. But he chooses to be part of the programme, and is at one of the top boys' schools; he plays football and does athletics for the school."

Kenville's immediate plans for the academy are to expand into other communities and to establish a reading club. He is also increasing its remit, having recently donated young chicks to a poultry programme at the Westwood Methodist School. "It is a very important project for our youth to learn about business and being responsible," he says. "I want to encourage a business mindset within our young people. If we can find some way of teaching these kids to be independent, to be responsible, then that can go a long way in changing their life prospects."

Kenville was one of the original cohort of Queen's Young Leaders, and in 2018 he was the recipient of a Points of Light award. "The Queen is one of my main motivators," he says, "and has inspired me to make positive changes, help others, develop my community, maintain self-worth and respect and to achieve great things."

> "Receiving the Queen's Young Leaders award gave our youth hope that they can accomplish great things."

Trinidad and Tobago

Dr Desiree Murray

Dr Murray, an ophthalmologist and lecturer in ophthalmology at the University of the West Indies, developed an interest in eyes while still a medical student. “I was fascinated by looking at the blood vessels of the eye,” she says. “I was initially motivated by the possibility of restoring sight. Over time, I came to recognise that most blindness is avoidable. I’m quite passionate about blindness prevention.”

In 2014, Dr Murray was awarded a scholarship by the Commonwealth Eye Health Consortium (CEHC) to study for an MSc in public health for eye care at the London School of Hygiene & Tropical Medicine (LSHTM). She analysed the existing glaucoma services in Trinidad and Tobago, looking at the number of people affected and the stage at which they present at hospital, with the aim of using her research to develop a national plan for glaucoma services.

“Glaucoma is a leading cause of blindness in the Caribbean,” she says. “It is the most common cause of blindness in Barbados and Trinidad and Tobago and the second leading cause of blindness in Suriname.” She was also introduced to Peek, developed in conjunction with LSHTM, that uses digital smartphone technology to perform eye examinations in remote communities. “Peek could be used for glaucoma and possibly diabetic retinopathy,” Dr Murray says. “It could detect patients with undiagnosed potentially blinding eye disease.”

Recently Dr Murray became part of the university team that discussed the National Eye Survey of Trinidad and Tobago policy-friendly report. “The Minister of Health stated that ‘the heart, kidney and eyes are the three organs of the body that are most commonly affected by non-communicable diseases’, and made a public commitment to treating those three major organ systems.”

Her Excellency Paula-Mae Weekes, the president of Trinidad and Tobago, is a keen supporter of Dr Murray’s work. She was the patron of the Volunteers for World Sight Day’s Dîner dans le Noir in June and agreed to join Dr Murray for World Sight Day’s Walk for Sight in October 2019. “Her Excellency is a strong advocate,” Dr Murray says.

Dr Murray is extremely positive about the CEHC, seeing it “as a time that was very special. A lot of us arrive at a crossroads because of the consortium. It’s changing our way of thinking and our approach to medicine, our approach to public health and made us realise that one person can make a difference but also with partnering and collaborating we can make an even greater difference at a national level, regional level but more importantly at an international level through shared experiences from like-minded individuals all over the world.”

> “It’s something that draws you in, this ability to prevent blindness or restore the gift of sight.”

Europe

Cyprus

Katerina Gavrielidou

Katerina set up the European Cyprus Society four months after receiving the Queen's Young Leaders award in 2016.

"I had interned at the European Parliament in Brussels as I wanted to apply the theory I had learned at the London School of Economics, where I did a master's in politics and government, and it was truly fascinating," Katerina says. "I set up the society to empower young people in Cyprus and give them a voice on topics that directly concern them."

So far, more than 500 young people have taken part in the European Cyprus Society's activities, meeting politicians and decision makers. "It opens door for youth," Katerina says, "and gives them direct involvement in active citizenship and public life."

"The Queen's Young Leaders award gave me a great boost – it was much easier to get support after I received it."

Malta

Annabelle Xerri

Annabelle, who is from Ghajnsielem in Gozo, is Deaf, having lost her hearing when she was six. “I can’t hear the rain on the window, but I like to feel it on my skin. I can’t hear the music, but I like to dance. I can’t hear you laugh, but your smile tells me that you are happy.”

“It’s never been clear how I became deaf. I could hear perfectly well but then I became about 90 per cent deaf in both ears,” Annabelle says, adding, “the majority of people do not know anything about the deaf community, because deafness is an invisible disability.”

Deafness is the third most common disability in the world, but the opportunities for those who are deaf are severely restricted. Annabelle, who has a degree in communications with psychology from Malta University and is now studying for a master’s in disability studies, struggled to find employment. She puts it very baldly, “I was unable to find employment due to being deaf.” A friend encouraged her to do something positive to start increasing awareness, and that led to A Silent World, Annabelle’s blog about deaf awareness which she made public in February 2013. “The feedback was overwhelming,” she says.

In 2006 Annabelle had moved from Gozo to mainland Malta, and she started to learn sign language in 2013. “I was 26,” she says, “and when I made new friends from the Deaf community using sign language to communicate, I immediately felt like I had arrived home, a place I belonged. I started to set different, achievable goals as a Deaf person.”

Annabelle is a vice president of the Deaf People Association (Malta) and was appointed the chairperson of the Maltese Sign Language Council by the government in 2016. She is passionate about the need for people to learn sign language (the first thing she did on meeting her QYL cohort in London was teach them to sign “Queen’s Young Leader”), for sign language to be integrated into everyday life, including in schools. “When children learn to speak, they still cannot hear,” she points out. “It is very important for deaf children to learn this language as it will help them access education more easily, giving them the opportunity to develop their potential like their hearing peers.”

Annabelle herself uses a sign language interpreter for her master’s, “and my grades are far better than the ones I had as an undergraduate,” she says. She also adds that sign language had been essential when she met The Queen – “Thankfully, the interpreter was with me, otherwise I would not have been able to understand a thing The Queen was saying,” she says, laughing.

Annabelle spoke at the first-ever International Day of Sign Languages held at the UN in Geneva in September 2018, advocating for sign language – “a Deaf person’s natural language. It is very important to me to know that I’m making a change, even if it’s just in one person’s life,” she says. “I try to show families that deaf people can do anything – there will be challenges, but that doesn’t mean it’s impossible.”

> “Receiving the news that I had been selected as a Queen’s Young Leader was amazing. I thought I was misunderstanding the sign language interpreter!”

United Kingdom

Dr Andrew Bastawrous

Dr Bastawrous was diagnosed with severe visual impairment when he was 12, and was given prescription glasses to wear. “I’ll never forget the moment I tried them on,” he says. “For the first time, I saw leaves on trees. Later, I saw stars in the night sky. It was breathtaking.” That simple pair of glasses changed his life – “my education, social life and hopes for the future changed dramatically, as did the entire trajectory of my life.”

Dr Bastawrous became a doctor and then an eye surgeon, working for the National Health Service in the UK. Then, in 2012, he and his wife and their baby son moved to Kenya, to the Rift Valley. “It was tough,” he says. “We’d work day and night examining and treating everyone we could in remote locations, but it soon became clear it would never be enough. Something needed to change.”

What Dr Bastawrous noticed was that, even when there were no roads, no electricity, even no water, there was nearly always a phone signal. He wondered whether there was a way to harness that connectivity to deliver eye care in a new way. “So, with our team in Kenya, we began to build smartphone apps and devices that made it possible for a non-specialist to measure someone’s vision, see inside their eye and connect them to the right services,” he says. “In effect, a portable eye examination kit, which we called Peek. Our first trial in 2015 saw 25 teachers screen 21,000 children, identifying 900 with visual impairment, in just nine days.”

Dr Bastawrous and the team were able to replicate and refine this work in India and then in Botswana. There, with support from the Trust, the Government of Botswana will now deliver a programme to screen the eyesight of every schoolchild and teacher using Peek Vision – half a million children and 26,000 teachers – and, where necessary, provide treatment, thereby transforming their chances in life.

Dr Bastawrous is an associate professor of international eye health at the London School of Hygiene & Tropical Medicine, and remains the chief executive of Peek.

“Our work wouldn’t be possible without collaboration from our friends and partners in Kenya, India, Botswana and beyond,” Dr Bastawrous says. “That is why the Commonwealth is so important, we have a shared history, but more importantly we have a shared future. And for the first time in human history, it is within our power to eliminate avoidable blindness and poor vision, for everybody, everywhere.”

> “For the first time in human history, we have the opportunity to ensure that nobody suffers from avoidable blindness or vision loss.”


STREET FOOTBALL ASSOCIATION

United Kingdom

Harry Phinda

Harry, a civil servant, was born in Zimbabwe. He came with his family to the UK in 2007 as a refugee to escape the political violence. They settled in Croydon, south London. “I was always so cold,” he remembers. “I saw snow for the first time, and could throw snowballs, like they did in the movies.”

When he was just 15, and only three years after he came to the UK, Harry was chosen as a delegate for the G8 summit in Rome. “The way I got involved in advocacy was odd,” he says. “It was through an inspiring young teacher who came to my school. She taught us citizenship.” Because of that class, he says, some friends applied to represent the UK at the summit. “Out of 400 groups, we were chosen.” That led to him serving on the board of Unicef UK for five years; in July 2015 he was made a lifetime honorary fellow.

On his 21st birthday, in 2014, with four others, Harry founded Youth for Change. “At the time, young people weren’t at the top table to discuss issues that affected them,” he says. “We hoped to create the most youth-led organisation there had ever been, with young people making all the decisions. I believe it was.”

In July 2014, Youth for Change was part of Girl Summit, organised by the UK government, to end female genital mutilation and early forced marriage. Justine Greening MP, then the secretary of state for international development, committed to ending both practices. “That was a great moment,” Harry says. Two years later, in October 2016, Youth for Change organised the first-ever national schools conference on gender-based violence, “where we trained 200 school teachers, administrators and police to make schools a safer place.”

Having turned 25 in 2018, Harry is now an advisor at Youth for Change – “to keep it authentically youth-led, once you turn 25, you become an advisor” – and has started working on a new project, 56 black men. “Its focus is to change the societal narrative of black men,” he says.

Being a Queen’s Young Leader, Harry says, has made him realise that anything is possible. “The stories I heard from the other Queen’s Young Leaders were mesmerising. I will forever be inspired by this group of people.”

He jokes that he “forgot the whole Your Majesty bit” when he met The Queen, but says. “It was such an honour to receive my award from The Queen. She asked me what I do, and I explained that I’m involved in female-based violence. She told me, ‘You need to keep doing it. It’s really important because men need to be involved.’ It was very emotional.”

> “Being born in Zimbabwe was a precondition for wanting to make change in our world.”

United Kingdom

Leanne Armitage

Leanne is a medical student at St George's University of London, and the co-founder of the Armitage Foundation – a charity which runs Leanne's Amazing Medics, a programme that was set up in December 2016. "My sole ambition was to run a simple, small-scale programme to inspire students who wanted to study medicine."

"Leanne's Amazing Medics [LAM] is a six-session programme designed to inspire, equip and increase the self-confidence of students who come from under-represented backgrounds," Leanne says. The sessions are, she adds, part-theory and part-practice.

Leanne is the second youngest of five who grew up in a single parent home on a housing estate in Peckham, south-east London. At the age of 15, she witnessed an event that changed her life. "One evening a helicopter landed on a grass field in the middle of an estate where I live," Leanne explains. "A young man had been stabbed. That evening I went home feeling quite distressed. Lots of people had gathered to watch, but none of them were going to work towards a solution." Leanne also felt powerless. But that night she decided to become a trauma surgeon. "That would give me a platform to go into environments where young men are victims of knife and gun crime and inspire them to be and do better," she says.

Less than 5 per cent of medical students come from deprived backgrounds, and half of schools across the UK do not produce a single medical applicant. Leanne was the only person she knew in the entire five years of secondary school in Tulse Hill who wanted to become a doctor. "Personally, I believe statistics like this are shocking," she says. "The health care profession should reflect the society that it's serving." LAM, which is run by medical student volunteers, is designed to get students "thinking like doctors, doing activities that doctors would, learning communication skills," she says. So far, LAM has worked with 70 students, and the Armitage Foundation is developing two new programmes to support students from Year 9 up to medical school application.

Leanne says that the best thing about her career has been "receiving the Queen's Young Leaders award. Never in my wildest dreams did I think that such an amazing gift would come as a result of the programme. I set it up to help tackle an injustice. I had no idea that through this I would have an opportunity to meet Her Majesty The Queen.

"She said, 'You were the girl in the video weren't you?' – I was in the video they showed before the presentation – and I replied, 'Yes, you noticed me!'"

> "All of the Queen's Young Leaders are people who saw something they wanted to change and rather than just talking about it, decided to do something."

Pacific

Australia

Hunter Johnson

In 2014, Hunter set up the Man Cave with his friend Jamin Heppell to tackle what he describes as the “toxic masculinity” responsible for the suicides of six Australian men every single day. “We wanted to give young men a safe space to talk.”

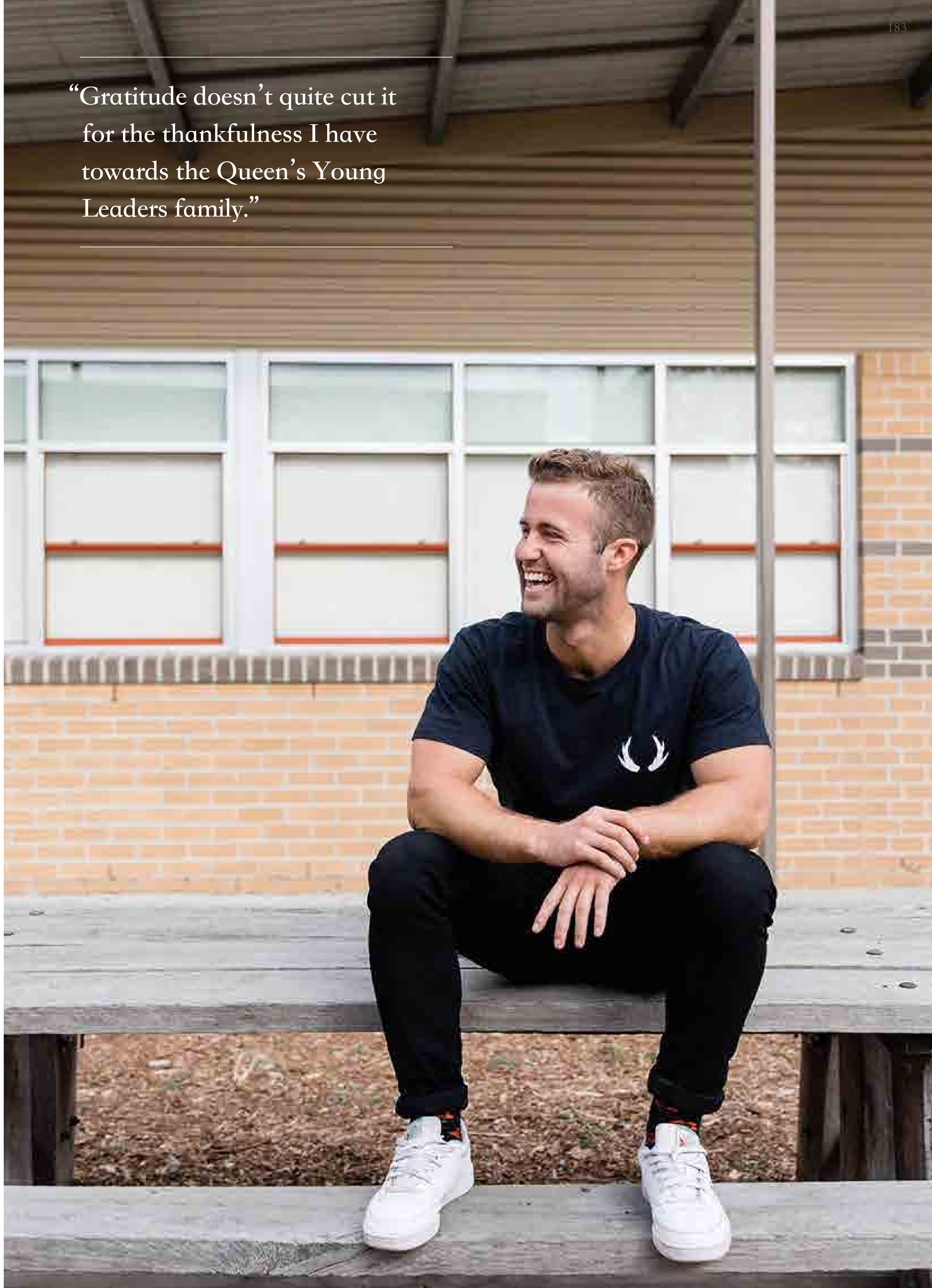
Working with schools and parents, the Man Cave programme is attempting to change attitudes about what men are. “Our work is not about telling men to throw away their masculine traits,” Hunter says, “it’s about getting boys to explore more of their humanity. We’ve created this model which is really just about working with and understanding the human condition, and creating space to care for these teenage boys who often haven’t known it’s possible to talk, or had the language to talk or the permission.”

The Man Cave runs workshops in schools with male facilitators that explore “healthy masculinity, respectful relationships and men’s role in gender equality,” Hunter says. One of the discussions they always have is what it means to be a real man. “From the top private schools to some of the lowest socioeconomic areas, the answers are always the same,” he says. “Be buff, crack a cold one, don’t be gay – all this stuff. And they’re laughing their heads off. So I’ll say, ‘Who’s ever felt pressure to be any of these things before?’ Fifty hands go up. And they’re like, ‘Whoa’ as they look around. For the first time they question their social conditioning. A lot of boys get trapped in that identity and don’t know how to get out.” The Man Cave facilitators create a space where there is no moralising. “They feel held and safe,” Hunter says, “but also challenged in a way where they know it’s for their benefit.”

At 16, Hunter was preparing for a future as a professional rugby player when he suffered a broken leg, that, “turned out to be a little more complicated than first thought,” he says. “In the end, it was six operations, a metal rod, four screws, two skin grafts and two blood infusions. And six months on the couch.” He describes this as “one of the most challenging times of my life. My identity had been ripped away.” Hunter recovered and went on to play rugby again. But there was, he says, a shift, prompted by something his grandfather said. “Basically, he asked, if I could get through this setback and develop my resilience, imagine what I could do if I shifted my passion, commitment and discipline into meaningful social change.”

The Man Cave has so far worked with 10,000 boys, young men, parents and teachers across Australia. The Queen’s Young Leaders award has, Hunter says, “been an absolute game changer for us. To have the global platform and support from the Royal Family who see and value our work so highly is a once-in-a-lifetime opportunity. It has given us an unprecedented level of credibility, but most importantly it has given our team an unshakeable belief that we are onto something very special.”

Hunter’s goal is to have the Man Cave accessible to every young man and parent in Australia by 2022. He is the recipient of a Queen’s Young Leaders legacy grant which will, he says, train a new group of volunteer male facilitators to allow the Man Cave programme to reach rural communities. “Meeting The Queen was by far the coolest moment of my life,” he says. “And nothing I ever imagined I would say.”



> “Gratitude doesn’t quite cut it for the thankfulness I have towards the Queen’s Young Leaders family.”

Fiji

Swarika Lata

Swarika started work at the Pacific Eye Institute in Suva, Fiji, in 2012 as a diabetes eye screening nurse. “With each patient, there is an opportunity to learn. It has been a challenging journey.”

Pacific Eye Institute (PEI), established by the Fred Hollows Foundation NZ in 2006, is leading the charge to prevent avoidable blindness, not only by training eye health professionals across the Pacific, but also by seeing patients at its state-of-the-art diabetes eye clinic that opened in 2011 after research found that 40 per cent of adults over the age of 40 in Fiji had diabetes.

Since 2015 PEI has been supported by the Trust’s Diabetic Retinopathy Initiative, which has provided equipment to allow health professionals such as Swarika to screen patients for diabetic retinopathy and refer them for treatment. The iniative has trained doctors, nurses and community health workers to identify patients at risk of losing their sight to diabetic retinopathy.

Swarika studied for a postgraduate certificate in diabetes eye care when she first joined PEI. “We learned about the diabetes eye, and had practical sessions to demonstrate competent skills in photo screening, at the same time gaining more experience,” she says. “Each patient has different eye complaints presenting with different signs and symptoms. I treasure the moments when I am able to detect patients early with diabetic retinopathy and refer them for proper management.”

As part of the clinic’s screening team, Swarika does outreach visits to urban and rural health stations in Fiji’s Central Division, to make the service accessible to those communities. These outreach visits help patients who are not able to come to the clinic in Suva for eye screening. “I provide individual in-depth counselling about proper management of diabetes and diabetic retinopathy to prevent blindness and other diabetes-related complications,” Swarika says.

For the past two years, Swarika has been the team leader at PEI’s diabetes eye clinic. “This has provided a new dimension to my work,” she says, “managing the clinic on a daily basis and still being available for outreach visits.”

In August last year, Swarika was part of the PEI team that travelled to Auckland in New Zealand to attend a Trust-funded health promotion workshop about raising awareness of diabetes and diabetes eye diseases. There, they developed a simple, extremely effective, flip chart that “will be used by community health workers and nurses,” Swarika says, “and can provide guidance to patients and their families on how to manage diabetes to prevent eye complications.”

Swarika is currently studying at PEI for a postgraduate diploma in eye care, awarded by Fiji National University. “I firmly believe that these further studies will enhance my career path but, much more importantly, equip me with the competencies to provide better and improved eye care nursing services,” she says. “It has been a very exciting career path for me.”

> “I treasure the moments when I am able to detect patients early with diabetic retinopathy and refer them for proper management.”

Kiribati

Raebwebwe Taoaba

Raebwebwe, the Ministry of Health's trachoma coordinator, is at the forefront of the trachoma elimination effort in Kiribati. She is a registered nurse who has since become a medical assistant and practitioner, responsible for supporting the training of nurses and health workers, developing educational materials and organising the complexities of distributing antibiotics for mass drug administration.

Trachoma is still endemic in the remote Pacific island nation of Kiribati. Blindness from trachoma is irreversible, and eliminating it in Kiribati is a delicate mix of logistical challenges and medical and environmental intervention – Kiribati is a collection of 33 mainly atoll islands in the central Pacific Ocean, with the population spread over more than a million square miles of ocean.

Kiribati's trachoma initiative was funded through the Trust and managed in partnership with the Fred Hollows Foundation under the Pacific Trachoma Initiative. The aim is to achieve the elimination of blinding trachoma as a public health problem in Fiji, Kiribati, Solomon Islands and Vanuatu through implementing the World Health Organization's SAFE strategy (surgery, antibiotics, facial cleanliness and environmental improvement).

There are many barriers to success in Kiribati. "We have scattered islands, including Christmas Island, and we have to travel extensively," Raebwebwe says. "In the capital, Tarawa, water distribution is OK, but it is overcrowded and people live in extended families. In the outer islands, there is better access to water and sanitation but still we need to work on changing behaviour."

When the Trust's Trachoma Initiative began in 2016, Kiribati had the highest prevalence of trachoma in the region. To date two rounds of mass drug administration (MDA), as well as environmental improvements and facial cleanliness and hygiene education, have been completed. "When we first started we trained the MDA supervisors, who are the medical assistants on each island," Raebwebwe says. "We had to bring them all together and that's difficult because some islands have only one flight a week." But the biggest challenge was distributing medicines. "With some of the outer islands we had to send everything by boat."

Following the completion of the second round of antibiotic distribution in November 2018, an impact survey is now being undertaken. "We may need to do another round of MDA if prevalence is still more than 5 per cent," Raebwebwe says. "But we are building on our Water Sanitation and Hygiene (WASH) programme by integrating face washing and strengthening hygiene practices. We now have three surgeons; we can eliminate trachoma."

> "I am very happy and proud. My family hear that I run the programme and they give me all the support."

Nauru

Unique Harris

Unique, who has a seven-year-old son, Yonazi, is keen to support other working mothers, particularly because Nauru has a high rate of teenage pregnancy. "Many of those teenagers end up dropping out of school," she says.

Initially Unique worked with small groups of women that included young mothers and those who wanted to achieve financial independence "to help realise their aspirations through the creation of small businesses that they could sustain – handicrafts, small food vendors, that sort of thing."

Unique has always had an interest in international relations and politics. She began working for the Department of Foreign Affairs and Trade in 2010 and has recently completed her first overseas posting, as assistant director, in Brisbane, Australia.

In December 2018, she was awarded a special Hammer DeRoburt scholarship in honour of Nauru's 50th anniversary of independence, and is now studying for a degree in public policy and international affairs at the University of Queensland.

As a keen rugby fan, Unique is a founding member and secretary of the Nauru Rugby Union, the only woman on the executive board. She is also the first woman to be recognised by World Rugby in Level 1 coaching, and is working towards Level 2.

Unique says that the Queen's Young Leaders award is helping her to continue "improving women's lives in Nauru. I am always trying to help young women capitalise on their strengths and strive to reach their full potential," she says.

> "I have made lifelong connections, and keep in touch with the awardees from the 2016 cohort. Oh, and the coaching session in Cambridge was amazing!"

New Zealand

Valentino Wichman

Valentino, known as Valery, is an LGBTQI rights advocate in the Cook Islands, home to about 18,000 people and spread across 770,000 square miles in the South Pacific. She remembers growing up feeling like a "Cook Island boy who was different and felt that being himself was not normal. Stigma and stereotyping from the people around him sometimes made him live in fear of not being a perfect normal person," she explains.

Valery is a trained barrister and solicitor, who studied law and the arts at the University of Auckland. She started her working life at Ora Fiduciary Ltd before moving into the public sector as the manager of policy and research at the Ministry of Health. She is currently the director of the Central Policy and Planning Office at the Cook Islands Office of the Prime Minister, providing strategic advice to the government and developing the National Sustainable Development Plan (Te Kaveinga Nui) which is up for renewal at the end of 2020.

Valery is well-known for supporting LGBTQI rights as the secretary of the Te Tiare Association, the Cook Islands' only LGBTQI association. In 2018, she met New Zealand's prime minister, Jacinda Ardern, when she visited Te Tiare in Rarotonga. "It provided comfort to know that there are people in high places who support our community and our causes," Valery says.

"I see myself as a catalyst in leading the fight to decriminalise homosexuality in the Cook Islands," she continues. After helping to draft various Cook Islands national policies, Valery is now very involved in the Crimes amendment bill, which if passed into law would decriminalise homosexuality for men, and is currently at the consultation stage with the select committee of the Northern Cook Islands.

Valery says she was "pretty surprised when I got the Queen's Young Leaders award, shocked and humbled." It has catapulted her work to the fore in many public forums – "people take me seriously now," she says. And what did The Queen have to say to her? "Your dress is beautiful!"

> "The networking aspect of the Queen's Young Leaders Programme has definitely helped my work. I can message someone and they can help me with tricky situations."


DUZV

> “We are trying to offer a solution. Without affordable, accessible eye care, communities suffer.”

Papua New Guinea

Dr Jambi Garap

Papua New Guinea has one of the highest rates of blindness in the Pacific, and much of it is preventable. Dr Garap, an ophthalmologist working in Port Moresby, is leading efforts to increase access to eye health care nationally. One of the fundamental problems, she says, is that “many of these needlessly blind people don’t know that their problems can be fixed.” She adds that “everyone should get an eye test, and get their sight fixed!”

Dr Garap had planned to take up obstetrics but her brother John encouraged her to specialise in eyes. “I did general ophthalmology with a special interest in medical retina.” Dr Garap completed her training in 1998, and went on to become the deputy chief ophthalmologist at Port Moresby General Hospital, a position she held until 2016. “Eye health is a low priority in PNG,” she says, “simply because of other, more pressing issues, such as child and maternal health, TB, HIV, Aids and malaria.”

In 2008, Dr Garap co-founded PNG Eye Care, “an initiative of all the ophthalmologists in PNG, and some international friends with close collaboration with the Brien Holden Vision Institute,” she says. She became its president in 2008, and remains so to this day. PNG Eye Care’s vision centres have screened more than 25,000 patients with 15,000 receiving low-cost glasses. “We are trying to offer a solution, because without affordable, accessible eye care, our people will continue to be needlessly blind from uncorrected refractive error.”

Through PNG Eye Care, vision centres have been established on Buka Island, in the mountainous region of Mendi and in Rabaul in New Britain to provide free eye examinations and affordable glasses, staffed by what Dr Garap calls “spec-techs”, ophthalmic clinicians trained to cut, fit and dispense spectacles. These centres are now run by the local hospitals.

Dr Garap is also the president of the National Prevention of Blindness Committee, which brings together all stakeholders in the eye care field. The committee has produced a national eye plan, aligned to the national health plan.

Dr Garap became involved with the Commonwealth Eye Health Consortium in 2015, when she had oversight of the global trachoma mapping project that surveyed 17,000 people in PNG. Subsequently, she was a contributing author to the curriculum review produced by the Royal Australian and New Zealand College of Ophthalmologists that will inform future ophthalmology training across the island. “The review gave interesting insights,” she says, “particularly in how we train an ophthalmologist to tackle the specific eye conditions in PNG.”

Dr Garap believes PNG needs more eye doctors and sees the curriculum review as a key step in attracting more people to the profession. Keen to pass on the baton, she is looking to take up an academic position at university (she already assists in the postgraduate ophthalmology programme at the University of Papua New Guinea). “It was never a dream,” she says, “but I can see a big need to lead the teaching, and I’m looking forward to leaving a legacy of future ophthalmologists.”

Samoa

Erna Takazawa

"The way we think about eye care is wrong: it is a human right, not a luxury." Erna became, at the age of 23, Samoa's first – and only – optometrist. "Samoa is where the greatest need for eye care is," she says. "It is one of the most beautiful places on earth, but the drawbacks are the same as any Pacific island nation – the tyranny of distance, lack of skilled human resource, lack of funding and large-scale exodus as people seek better opportunities overseas."

Erna became an optometrist because of her sister, who, as a child, had needed glasses. At the time they cost 350 times the Samoan minimum hourly wage, making them prohibitive to many Samoans. But Erna noticed in her own practice, 15 years later, "that many parents who brought their children for an exam were either not buying glasses or not returning with their children for follow-ups. The issue was always the same – they could not afford it."

Erna proposed a policy which allowed free glasses for children, people with disabilities and pensioners. "Being the only place in Samoa to buy glasses," she says, "implementation was easy."

She tells the story of seven-year-old May. "She was coming last in her class, was very withdrawn and was suspected of having some form of autism." After examining her, Erna found that May was severely short-sighted. "As soon as I put the glasses on, she smiled. A year later she was second in her class, was playing netball and was very sociable. It dawned on me that if I hadn't come back to Samoa she would have been labelled as disabled. A pair of free glasses changed the course of her life."

Erna is the national eye health coordinator for the National Health Service. Her focus is early detection, and developing the skills of ophthalmic nurses in district health centres and rural hospitals across Samoa. "So, instead of coming to me, they can see eye nurses in their district centres," she says. She is also a teaching optometrist spending two months every year in Fiji training nurses specialising in eye care.

Erna was one of the first cohort of Queen's Young Leaders. "I remember the day I met The Queen," she says. "When it was my turn, Her Majesty congratulated me on my work in Samoa. Later, my fellow Queen's Young Leaders and I discussed what The Queen had said to us and found that her comments were unique to us all and specific to our country of origin."

The residential week was, she says, "a blur of wonderful experiences and networking." Becoming a Queen's Young Leader has helped her establish a broader network. Without it, she says, she would "still be chipping away" at the work she is doing.

Erna has big ambitions. "One of the themes of the Queen's Young Leaders Programme was to pay it forward. We had the opportunity to learn from inspiring leaders, now it's our turn to motivate other young people."

"Winning the Queen's Young Leaders award opened doors. It was the stepping stone towards expanding my personal growth and also drawing attention to the importance of my mission."

Solomon Islands

Tackling diabetic retinopathy

The Pacific has some of the highest rates of diabetes in the world. In the 1990s, the incidence of diabetes was low – it is a new threat to Pacific island nations. A change in diet from traditional foods to imported, highly processed foods and limited access to health services has increased the damaging impact of diabetes.

Solomon Islands has a population of about 650,000, spread over more than 300 inhabited islands across hundreds of thousands of square miles of ocean. Some of these islands are very remote and accessible only by boat, creating immense challenges for health services providers.

Since 2015, the Trust has been working with the Fred Hollows Foundation NZ in Solomon Islands to train health care workers, provide equipment and raise awareness of the threat to sight caused by diabetes. It is also training eye doctors and nurses across the region.

With the Trust's support, Edith Fanega, the national diabetic retinopathy coordinator, is leading activities to promote the importance of eye health for people with diabetes. She has trained nurses and community health workers throughout the country, explaining the need for eye screening, and significantly increasing the numbers of patients attending annual eye exams.

In August 2018, a Trust-funded workshop took place in Auckland, New Zealand, to look at ways in which Pacific nations are addressing issues such as diabetes. "This is the first-ever training to involve community leaders," one health worker who attended the workshop says, "and the first time I have learned about diabetes and diabetes eye disease."

The group discussions were particularly useful, Edith says. "The workshop has equipped us with a clear focus, and the confidence to step into communities to apply our knowledge and get the message across." The flip chart that was developed during the workshop is especially helpful.

"The simplicity and level of information is easy for the community to understand," Edith says. "They are willing to own it, to keep implementing it in neighbouring communities."

Edith is based in the Ministry of Health, testament to the importance given to eye health care by Solomon Islands Government, which has also been running successful radio campaigns to raise awareness of diabetes and how it can affect sight.

And through the Trust's Diabetic Retinopathy Initiative more doctors and nurses on Solomon Islands now have the expertise and equipment to screen for diabetic retinopathy and to treat diabetes. Indeed, since 2015, Solomon Islands has become a recognised leader in eye health care, and nearly 8,000 people with diabetes have had their eyes screened, and more than 1,000 who were at risk of losing their sight have had laser treatment.

> "There was great learning in the workshop – it equipped us with a clear focus and the confidence to step into communities to get the message across."


CLINIC

Tonga

Joshua Isikeli Sefesi

Joshua works to raise awareness of what he calls "sexual related issues". These include STIs, youth pregnancy and women's rights. "It started when a schoolmate had an STI and we ended up at the Vava'u Family Health Clinic," he says. "We met another student who was pregnant. It was a sad encounter." So, Joshua decided to educate himself. "It's an issue everyone can relate to but quite sensitive, there are a lot of taboos."

Joshua has been a full-time youth volunteer for the past eight years. He has been a board member of Tonga Family Health Association (TFHA), a member of the governing council of the International Planned Parenthood Federation, and he educates his community about issues such as teenage pregnancy and gender-based violence. "There are 30 teenage pregnancies for every 1,000 girls in Tonga, and we get at least one case of teenage pregnancy every week at the Tonga Family Health Association clinic," he says. "Women must be empowered to be aware of their choices and the support that they have." Almost 80 per cent of women and girls in Tonga have experienced physical and sexual violence, he reports.

Joshua also holds sessions with men, "as they are part of the core problem. Men, especially young men, are often forgotten." On Friday evenings, Joshua helps the TFHA distribute condoms to young people in Nuku'alofa. "They call me Mr Konitomui, Mr Condom," he says, laughing. "Let's just say I talk about it everywhere I get the chance to – social gatherings, with church youth, work-out partners, sometimes at a party."

Joshua is also working with two previous Tongan Queen's Young Leaders award winners, Aiona Prescott and Elizabeth Kite, to promote healthy living in Tonga, focusing on diabetes, "the leading cause of mortality here in Tonga". They are working with the Ministry of Health, "doing outreach programmes, and raising awareness through advertising."

Joshua describes the Queen's Young Leaders residential programme as, "mind-blowing, such an incredible opportunity and privilege to represent my country and receive an award from The Queen herself," adding that after he explained to The Queen what he did, "She politely leaned forward and said, 'Sounds like you have more to do, young man.'"

> "Receiving the Queen's Young Leaders award isn't the end, it's a catalyst for the change I want to make."

Tuvalu

Easter Tekafa Niko

“Most people never leave Tuvalu,” Easter says. “It is one of the most isolated countries.” But his ambition was always to do so, to receive a better education and return to help others do the same.

Easter is now a senior accountant with VMware, Inc in Palo Alto in California, USA, but he hasn’t ruled out returning to Tuvalu to enter politics.

Easter has been actively involved in his community for as long as he can remember. “I know very well the problems that the youth of Tuvalu face,” he says. “Many people in Tuvalu know who I am, they know what I do and what is possible.”

Easter represented Tuvalu in football at an international level and, as a result, won a scholarship to study accounting and Chinese at Brigham Young University in Hawaii. In his first year, he set up the Tuvalu Project to raise funds to help other young Tuvaluans receive an education. “My brother and I came up with the idea while we were in school,” Easter says, “long nights talking about how fortunate we were to have the opportunity to go to university. We wanted to find a way to give more kids from Tuvalu the same opportunity.”

The Tuvalu Project has raised the money to build a school, using local contractors and providing all the teaching materials. “In 2012, we built the Olave Ockey preschool,” Easter says. “It’s the largest preschool in Tuvalu, with more than 40 children attending each year.”

Now Easter is setting up a “Great Ideas” competition for secondary school students, “to encourage young people to start a business,” he says, “helping them set up their business as well as providing them with the prize money.”

Easter is working closely with other Pacific Queen’s Young Leaders but at the moment is focusing exclusively on his Great Ideas project. “I’ve made really good friends with the Queen’s Young Leaders from the Pacific,” he says. “I’ve made new friends across the world.”

> “When The Queen asked me what I did, I think I mumbled something like, I build schools. I was so nervous.”

Vanuatu

Dr Johnson Kasso

Dr Kasso is Vanuatu’s first and only ophthalmologist – though he originally trained in obstetrics and gynaecology. “That was in 2002,” he says. “Then some of my colleagues approached me to see if I was interested in ophthalmology. At the time we had an overseas team from Australia and New Zealand who came once a year to provide eye care to people living in Vanuatu. But a year is a long time, and I remember thinking we can’t wait that long.”

Dr Kasso did a diploma in ophthalmology at the University of Papua New Guinea in 2004 followed by a master’s in Fiji at the Pacific Eye Institute, an initiative of the Fred Hollows Foundation NZ. “Now I am back on the ground,” he says, “I believe things will change.”

Dr Kasso was trained through the Trust’s Diabetic Retinopathy Initiative. Just a generation ago, diabetes was uncommon in most Pacific populations, but its prevalence has increased dramatically in recent years, and in Vanuatu diabetes now affects 22 per cent of the population. “My thesis was on sight-threatening diabetic retinopathy,” he says. “I analysed the data to try to find the prevalence, and it turns out it is quite high; it is 36 per cent. We need to improve the level of treatment in diabetic patients.” Diabetic retinopathy can cause irreversible blindness, but early interventions and appropriate follow-up can reduce the risk of severe vision loss by 95 per cent.

Dr Kasso serves a population of nearly 300,000, widely dispersed across the islands of Vanuatu. He travels to outreach camps, providing screening for diabetic retinopathy and for cataract, and, where necessary, performs surgery to stop further vision loss. “We have six provinces, and I need to go to all six to do surgery each year.”

Dr Kasso’s training has already had an enormous impact on the people of Vanuatu, and he is now training others. “Through the Trust we have set up equipment in four provinces. With the diabetic outreaches, I will help the nurses on the ground – midwives, children’s nurses who know nothing about eyes – to use the lens so they can diagnose patients and give appropriate treatment or referrals in a timely manner.”

Clerence Natnaur is one of Dr Kasso’s patients. She is 23 and has type 1 diabetes, and her vision was, she says, “blurry”. In late February 2019, Dr Kasso treated her at the Port Vila clinic where he is based, and just the day after, Clerence declared that her vision was “more than clear”, and that she was “very happy” to have been offered the chance of surgery.

The eye clinic in Port Vila is newly equipped with state-of-the-art equipment provided by the Trust’s Diabetic Retinopathy Initiative. “Now we are able to make quality diagnoses, that’s a good thing,” Dr Kasso says. “If you are not able to make quality diagnoses on diabetic retinopathy, you are not able to provide an accurate treatment. That’s the change, that’s the impact that the Trust has had.”

> “The impact of the Trust on diabetic retinopathy is huge. We have equipment, we have a building; I want to use this opportunity to train doctors, to train nurses.”

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The Queen was presented with a Roll of Tributes in 2013, documenting all the individuals, associations and organisations from across the Commonwealth and around the world who have donated to the Trust. The Roll of Tributes was updated as further contributions to the Trust were made, and it will be archived at Windsor Castle in perpetuity upon the occasion of the Trust's closure.

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Dr Astrid Bonfield CBE

Chief Executive

It has been an honour and a privilege to work for the Trust. With our remarkable partners, we have helped to transform the lives of millions of people across the Commonwealth by preventing them losing their sight.

Effie Blythe

Director of Communications

I am truly grateful to have had the chance to learn from such diverse, dedicated partners and to create a legacy that will change lives for years to come.

Diana Campbell-Smith

Personal Assistant to the Chief Executive

To have played a role in celebrating Her Majesty's Diamond Jubilee through our work at the Trust has been a humbling experience.

Dr Andrew Cooper

Director of Programmes

Seeing the lives of people across the Commonwealth change for the better because of the Trust has been incredibly fulfilling.

Eleanor Fuller OBE

Director of Advocacy and Commonwealth Engagement

They say that everyone in their lifetime should aim to make a dent in the universe. We made ours. I am proud to have been part of it.

Matt Little

Programmes Manager

The dedication, passion and expertise of our partners throughout the Commonwealth has been a constant inspiration.

Rachel Mckenna

Digital Communications Officer

I feel privileged to have worked with such inspiring people so wholly committed to improving the lives of others.

Rosemary Mitchell

Director of Strategy and Operations

To have played a role in transforming people's lives across the Commonwealth fills me with pride.

Aabida Mohmed

Director of Finance

That individuals, communities and countries have become trachoma-free because of the Trust's programme will be an inspiration long into the future.

Annike Spiller

Communications Manager

It has been an honour to have been part of the Trust and to share with the world the achievements of our kind, dedicated and brilliant partners.

Samantha Wood

Communications Manager

I will never forget meeting some of the amazing people whose lives have been touched by the programmes set up by the Trust, with our partners, across the Commonwealth.

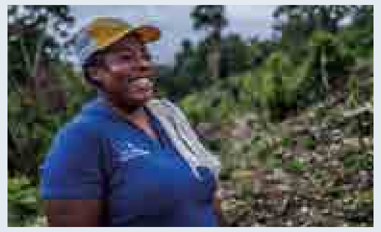
Captions


Children at Kalenyang Primary School in Kenya wash their hands and faces at a water station as part of their trachoma prevention education.


Dr Rani prepares to screen a baby for ROP in the neonatal intensive care unit in Fernandez Hospital, Hyderabad.


George has his eyes screened for diabetic retinopathy at the Regional Eye Centre in Honiara, Solomon Islands.


Dr Andrew Bastawrous uses the Peek smartphone app to check a woman's vision. She has cataracts in both eyes.


Zandra on her farm in Saint Thomas, Jamaica. The farm is supported by the Queen's Young Leaders Grants Programme.


A woman is screened for diabetic retinopathy at the Mayo Hospital in Lahore, Pakistan.

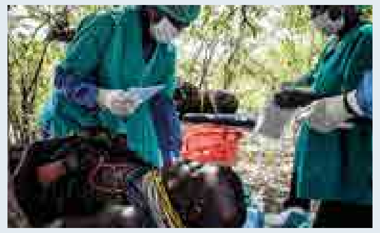

A man awaiting screening for trachoma at a mobile clinic in Bahi Makulu, Tanzania.

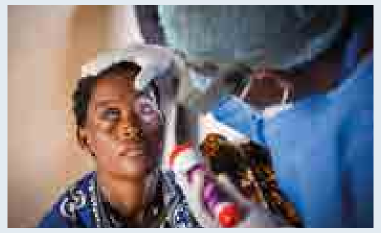

Matilde at home in Nacaroa district, Mozambique. She had surgery for trachoma and her sight has been restored.


Safira Mwale, a "trachoma champion", shows how to wash her face with a "tippy tap" near her home in Kasungu, Malawi.


The visual acuity test at Eleta Eye Institute in Idadan, Nigeria, is a simple process – a card is held up for a patient to read.


Dr Ndalela, an eye surgeon in Senanga, western Zambia, addresses the community in Lui River village.


Drs Michael Samal and Maurice Oduor, both Kenyan eye surgeons, often perform trachoma operations at mobile clinics under trees and in schools.


Martha Chapote, a surgeon attached to a mobile trachoma clinic in Tanzania, during a follow-up with a trachoma trichiasis patient.


Maria had surgery for trachoma, and now has her sight back. She was photographed at home in the Nacaroa district, Mozambique.


A nurse in the neonatal intensive care unit of Fernandez Hospital, Hyderabad, with a premature baby she has just fed.


Ganta Suseela, a community health worker, known as an asha, in Andhra Pradesh, travels with locals on their way to be screened for diabetic retinopathy.


Two people with diabetes identified by Lady Health Workers visit the eye ward of the Mayo Hospital in Lahore, Pakistan, for screening.


Every Monday men and every Tuesday women with diabetes are given free insulin and medicines on so-called "insulin days", before being screened for diabetic retinopathy.


Omarsha displays a pak choi she has just harvested at the Village Academy School of Agriculture, a Queen's Young Leaders grantee, in Jamaica.


Dr Shillingford-Ricketts, the only ophthalmologist trained to treat diabetic retinopathy in Dominica, with a patient, post surgery.


Julie and her boyfriend of 26 years, Alick, at the Castries Wellness Centre, Saint Lucia, after being screened for diabetic retinopathy.


Linchris collects eggs at the Village Academy in Jamaica. The college is supported by the Queen's Young Leaders Grants Programme.


Bernadette before laser treatment for diabetic retinopathy at the Babonneau Wellness Centre in Saint Lucia.

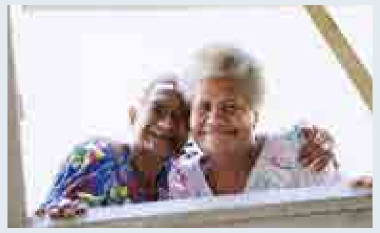

Queen's Young Leaders taking part in a team-building workshop during the residential programme in 2017.


David Beckham, a supporter of the Queen's Young Leaders Programme, at the 2015 awards ceremony at Buckingham Palace.


Children at school in Solomon Islands learn about trachoma and eye care.


General eye screening at the Fred Hollows Foundation NZ's mobile eye clinic at Navua Hospital in Fiji.


Annie, a nurse who treats people with diabetes at Kukum Clinic, Honiara, Solomon Islands.


Louise and Noematau attend a clinic in Mele, Port Vila, Vanuatu, to be screened for diabetic retinopathy.

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