Acknowledgements

The International Centre For Eyecare Education would like to thank

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- Lord Mayor’s Charitable Foundation, Australia
- AusAID; The Australian Government’s Agency for International Development

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- Aboriginal Health and Medical Research Council, Australia
- African Council of Optometry
- African Vision Research Institute
- Anyanginyi Health Aboriginal Corporation, Australia
- Australian Council for International Development
- Australian Government Department of Health and Ageing
- Bausch & Lomb School of Optometry, Hyderabad, India
- Caribbean Council for the Blind, Antigua
- Christian Blind Mission
- Centre for Eye Research, Australia
- Danila Dilba Health Service, Australia
- Department of Education, KwaZulu-Natal, South Africa
- Department of Health, KwaZulu-Natal, South Africa
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- Miwaji Health Aboriginal Corporation, Australia
- Mongolian Optical Association
- Mount Hagen General Hospital, Papua New Guinea
- Mizu Central Hospital, Malawi
- Mizu University, Malawi
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- Nossal, South Africa
- NSW Department of Community Services, Australia
- NSW Department of Technical and Further Education, Open Training and Education Network, Australia
- NSW Government Rural Aerial Health Service, Australia
- NT Government Department of Health and Families, Australia
- Office of Aboriginal and Torres Strait Islander Health, Australia
- Oil Search Limited, Papua New Guinea
- Optical Distributors and Manufacturers Association, Australia
- Optometrists Association Australia
- PNG Eye Care, Papua New Guinea
- Port Moresby General Hospital, Papua New Guinea
- Red Cross Air Mercy Service, South Africa
- Reuben Meyer Trust Fund
- Royal Australian and New Zealand College of Ophthalmologists
- Royal Australian College of Surgeons
- Royal Flying Doctor Service, Australia
- Royal Institute for Deaf and Blind Children
- School of Optometry and Vision Science, The University of New South Wales, Australia
- School of Optometry, University of KwaZulu-Natal, South Africa
- South African National Council for the Blind
- South African Optometric Association
- Tanzania Optometric Association
- The Diabetes Unit, University of Sydney, Australia
- The State Central Clinical Hospital, Ulaanbaatar, Mongolia
- University of Benin, Nigeria
- University of Calabar Teaching Hospital, Nigeria
- US Agency for International Development - USAID
- Vietnam Vision 2020 Prevention of Blindness Steering Committee
- Vietnamese National Institute of Ophthalmology
- Vision 2020
- Vision 2020 Australia
- Vision 2020 Sri Lanka
- Vision Cooperative Research Centre, Australia
- VisionCare NSW, Australia
- World Council of Optometry
- World Diabetes Foundation
- Wurli Wurlinjang Health Service, Australia

In September 2010, ICEE will present the Second World Congress on Refractive Error and Service Development in Durban, South Africa. For more information contact ICEE on wcre@iceeafrica.co.za or visit our website: www.icee.org

For a full copy of the Annual Report please visit www.icee.org, or contact Caroline Llewellyn +61 2 9385 7459

ICEE uses 100% recycled paper

Front Cover Image is taken in Newcastle, South Africa. Photo by Dean Saffron
Letter from the CEO

BUILDING PARTNERSHIPS FOR BLINDNESS PREVENTION

Since our inception, ICEE has been actively engaging stakeholders in eye care in both the development and implementation phases of our strategy. These partnerships have been the cornerstone of our success in achieving sustainability and ensuring programmes are cost-effective. Additionally, they ensure that ICEE is developing sufficient local leadership and ownership, providing greater leverage and support for our activities.

While we are focused on a very difficult year ahead for our world due to the global financial crisis, this annual report appropriately highlights and celebrates those partnerships. In developing communities ICEE saw early signs of its impact but we also experienced the satisfaction of witnessing years of collaboration and planning come to fruition. More education programmes are now possible and we have greater service delivery capacity than ever before. It was a year that saw Vision Centres open in Uganda, Sri Lanka, Cambodia and South Africa and a deepening of our commitment to community and professional education.

INTEGRATING PARTNERSHIPS AND DEVELOPMENT

The most significant of our partnerships are those developed through the broader VISION 2020 / International Agency for the Prevention of Blindness (IAPB) family. Many IAPB members have funded ICEE over the years or joined us in developing programmes, ensuring our goal of integrated eye and health care becomes a reality. This is critical. In a published article1 in the IAPB newsletter, Professor Kevin Naidoo, ICEE Director of Global Programmes, rightly argues that, “Comprehensive and accessible eye care will not develop in a vacuum. To be sustainable it has to occur in a climate of comprehensive and accessible health care.”

By placing eye care on the broader development agenda blindness prevention efforts will reap the rewards. Professor Naidoo sagely observes, “It is also imperative we acknowledge that blindness prevention work is part of a broader strategy to eradicate disadvantage and despair in our society. Poverty alleviation, education opportunities, empowerment of the marginalised and a better quality of life in general are the ultimate goals we seek.”

The largest incidence of uncorrected refractive error in the world is in Asia Pacific. In an unprecedented move for disabilities in the region, the Australian Government recognised the importance of the problem and pledged $45 million for the first phase of its Avoidable Blindness Initiative. ICEE has joined other Australian eye health and vision care organisations to form the Vision 2020 Australia Global Consortium to develop and implement this plan. The consortium will address primary and secondary eye care needs in Asia Pacific and expand the number of eye health workers through support in training centres, medical colleges and teaching hospitals over the next ten years.

The Hon Bob McMullan MP attended the official launch at Parliament House in Canberra. “The Consortium represents another important development partnership between the Government and non-Government sectors,” he said. “The Australian Government looks forward to working with the Vision 2020 Australia Global Consortium to improve the lives of some of the most disadvantaged people in our region.”

This commitment has been applauded internationally and is regarded as a global benchmark. ICEE thanks the Australian Government for their foresight, wisdom and compassion.

RESEARCH

While we made exciting inroads for services throughout Africa and in the Asia Pacific region, our researchers were collecting vitally important data to help frame the challenges ahead. They revealed that 1.04 billion people experience vision impairment due to presbyopia. Of those, 517 million had either inappropriate or no eyeglasses and approximately 410 million are prevented from performing tasks requiring the ability to focus on close objects.

We also learnt that the global economy loses US$269 billion in productivity annually due to vision impairment* and that the problem could be eliminated simply, and very cost-effectively, with broader availability of eye examinations and spectacles.

As this year draws to a close I would like to send our gratitude to you, our supporters, on behalf of all our staff and the beneficiaries of our programmes worldwide. Without ICEE donors and the unwavering support of the Institute for Eye Research, AusAID, Optometry Giving Sight, Standard Chartered Bank Seeing is Believing, ICEE Board and staff, and our partners in each country, our work would not be possible. We thank you and look forward to sharing more of our achievements with you in the coming year.

ICEE school visit, Newcastle, South Africa. Photo Dean Saffron

Professor Brien Holden OAM, Chief Executive Officer, ICEE

*Research was conducted in collaboration with Johns Hopkins University and the African Vision Research Institute (AVRI), University of KwaZulu-Natal, and published in the Bulletin of the World Health Organization, June 2009)

*To read the full text of Professor Naidoo’s article go to: www.iapb.org/news_letter.htm

1To read the full text of Professor Naidoo’s article go to: www.iapb.org/news_letter.htm
ICEE delivers optometric services to regions where eye care is urgently required and facilities don’t exist or are unlikely to be established in the foreseeable future. In partnership with local governments and non-government agencies, ICEE travels to, and coordinates the delivery of services to locations where it conducts a range of procedures to assess eye care needs, prescribe treatment where appropriate, and determine if a referral is required for additional evaluation and/or treatment. Service delivery activities include eye screening, refractions, full eye examinations and low vision assessments. It also provides a critical opportunity to collect research data.

This year over 96,800 eye examinations have been undertaken and more than 35,000 pairs of spectacles dispensed. The key to the success of these programmes is building partnerships to not only provide the services to those who need it, but to work toward building a model that establishes permanent services.

A good example of this is the Giving Sight to Africa, KwaZulu-Natal Programme. The programme is focused on integrating refractive services into general eye care service structures as well as the integration of general eye care services into the primary healthcare service in the KwaZulu-Natal province, South Africa. A delivery model for the provision of refractive error services has been developed that includes the establishment of a cost-recovery-based affordable spectacle, delivery system and the development of appropriate referral systems for refractive error, low vision, ophthalmology, rehabilitation services and social welfare.

The model, partly funded by Standard Chartered Bank and Optometry Giving Sight, is designed to act as a blueprint for other provinces of South Africa and countries in Africa. The close working relationship established between the KwaZulu-Natal Department of Health and ICEE has been crucial to the progress of this programme.

Speaking about the programme, the Group Finance Director of Standard Chartered Bank, Richard Meddings, said: “Blindness and visual impairment are key issues affecting the educational and economic potential of individuals, their families and their ability to work. Through this unique partnership with ICEE and the Department of Health, we look forward to extending the reach of effective eye care services, and improve the lives of individuals living across KwaZulu-Natal.”

Through long-term partnerships with the Aboriginal Health and Medical Research Council of New South Wales (NSW) and the Aboriginal Medical Services, ICEE is helping eliminate some of the barriers deterring Aboriginal people from accessing eye care services. ICEE optometrists routinely provide culturally appropriate, accessible eye examinations to over 100 Aboriginal communities in NSW.

The programme also serves the important purpose of increasing the level of eye care and eye health awareness. In the Northern Territory, ICEE is providing regular optometry services in partnership with local Aboriginal Eye Health Coordinators and Aboriginal Community Controlled Health Services to remote communities. To further alleviate some of the logistical difficulties, ICEE opened a permanent Vision Clinic and office at the Danila Dibah Aboriginal Health Service, Darwin in 2007. The clinic now provides regular eye care to the Darwin community.

Barkly Regional Eye Health Coordinator, Maree O’Hara, spoke about the partnership with ICEE: “Through a successful collaboration between ICEE and Anyinginyi Health Aboriginal Corporation (AHAC), delivery of culturally appropriate eye care services to Indigenous people in the Barkly region of the Northern Territory has increased. This collaborative programme now oversees delivery of eye care to 11 locations in the Barkly region. The successful strategies implemented in the programme have overcome the barriers affecting availability of eye care to rural and remote Indigenous people.”

Also this year an ICEE volunteer service delivery team visited seven remote soums (districts) in Hovsgul Aimag, Mongolia. Over just three weeks 836 people received an eye examination, 576 of whom were prescribed spectacles.

In Papua New Guinea a service delivery trip was conducted in collaboration with Oil Search Community Health staff and a volunteer optometrist in the Southern Highlands province. The trip targeted isolated communities that had no eye care services or poor access to regional services. In total, 174 patients were screened of whom 131 received eye examinations and 60 received spectacles.

In South Africa, the Nissan Mobile Programme delivers eye care to children living in remote areas of the KwaZulu-Natal province who are beyond traveling distance to the closest eye care service. The Nissan Motor Company has donated a fully-fitted, mobile testing vehicle to ICEE which is now delivering eye care to those children.

In this year, Giving Sight to Africa, KwaZulu-Natal, has delivered 42,008 eye examinations and dispensed 28,841 pairs of spectacles.

This year over 96,800 eye examinations have been undertaken and more than 35,000 pairs of spectacles dispensed. The key to the success of these programmes is building partnerships to not only provide the services to those who need it, but to work toward building a model that establishes permanent services.
Global Statistics 2008 - 2009

Personnel Trained 3205
Eye Examinations +96 800
Spectacles Dispensed +35 000

To find out more about where we work go to www.icee.org
Research Activities

Underpinning ICEE infrastructure, education and service delivery programmes are important research activities that aid the development of each of our eye care programmes. Research undertaken to evaluate the effectiveness of our programmes feeds into subsequent programme designs and improves eye care outcomes worldwide. ICEE also devotes substantial resources to the collection and analysis of accurate data about eye care needs throughout the world, which is critical to setting programme objectives. Research publications produced by ICEE in this area contribute to building collective knowledge of global eye care needs.

RESEARCH PUBLICATIONS

In 2008 and 2009, ICEE made important contributions to determining the global scale and economic impact of uncorrected refractive error. Research published in 2008 revealed, for the first time, the magnitude of a form of vision impairment that can be simply and cost-effectively solved.

Presbyopia is a condition associated with ageing and affects most people by the age of 45. As we age the lenses in our eyes lose elasticity resulting in a loss of ability to focus on close objects. Despite the ease with which this vision problem can be treated, uncorrected presbyopia creates significant economic and socio-medical problems.

The reality is that 1.04 billion people worldwide would not be able to obtain a pair of glasses. This constitutes a major global public health issue.¹

In 2009, a study published in the Bulletin of the World Health Organization by researchers from Johns Hopkins University, ICEE and the African Vision Research Institute reported an estimated US$269 billion in global productivity is lost annually as a result of avoidable vision impairment. Crucially, this latest study reports that the cost of providing trained eye care personnel and creating infrastructure for eye care delivery and affordable spectacle supplies, would be far less than the cost of productivity lost.²

ICEE is proud to be associated with the WHO global effort at better understanding the challenge of presbyopia in our world.

PAPUA NEW GUINEA

In partnership with the Institute for Eye Research and PNG Eye Care, ICEE has this year undertaken a comprehensive study to determine how vision impairment affects the people of Papua New Guinea and the barriers associated with obtaining appropriate eye care. The findings of this groundbreaking study will lead to improved implementation and delivery strategies, resulting in better eye care outcomes in the country. The study has been funded by AusAID through the Australian Government’s Avoidable Blindness Initiative.

Project Leader and Executive Director of Research and Development for the Institute for Eye Research (IER), Associate Professor Eric Papas, says of the project, “This is a great example of how to maximise the reach and impact of a research project through using a partnership approach. In the PNG project, IER brings scientific rigour to the process and analysis of the research, ICEE brings vast public health experience and PNG Eye Care brings the local knowledge to ensure the process is appropriately conducted and information is collected in the most effective way.”

SOUTH AFRICA: Assessment of the prevalence and socio-economic burden of uncorrected presbyopia – Durban, South Africa

This was the first population-based presbyopia study undertaken in Southern Africa. It focused on the Inanda, Ntuzuma and KwaMashu districts of Durban – communities with a history of disadvantage, including very low levels of employment and poor infrastructure.

The study measured the prevalence of presbyopia in the communities and sought to understand the socio-economic implications of not having spectacles for near vision – how it affects employment opportunities, quality of life and ability to participate within the community and at home. The study, findings will have broader implications for service delivery, efforts and economic development strategies by local leadership.

GHANA: Refractive Error Study in Children (RESC) & Refractive Error Study in Children (RESC) & Presbyopia Studies

In 2009, a study published in the Bulletin of the World Health Organization by researchers from Johns Hopkins University, ICEE and the African Vision Research Institute reported an estimated US$269 billion in global productivity is lost annually as a result of avoidable vision impairment. Crucially, this latest study reports that the cost of providing trained eye care personnel and creating infrastructure for eye care delivery and affordable spectacle supplies, would be far less than the cost of productivity lost.²

Findings from this study will be used by local education and health authorities to structure programmes training teachers and nurses to perform basic vision screening on school children. The RESC has been conducted in several other countries, meaning data from the study can be used in important comparative analyses with other children globally.

ARGENTINA: Refractive Error Study in Children (RESC) & Presbyopia Studies

Pilot studies have been conducted to evaluate different stages of the implementation process for the Presbyopia and RESC studies conducted in the La Plata and Quilmes districts of Buenos Aires, Argentina.

While the initial findings look very positive, both projects were temporarily suspended due to severe outbreaks of H1N1 flu.

Both projects are scheduled to re-commence in 2010.


**MOZAMBIQUE: Mozambique Eye Care Project**

This project aims to enhance solutions to avoidable blindness by focusing on the development of local human resource capacity. The lack of human resources severely restricts efforts to establish sustainable eye care in developing countries. The project is developing a multi-entry and exit programme as a way to quickly remedy this problem. It involves collaborations between ICEE, Lurio University in Mozambique, Mozambique Ministry of Health and the Dublin Institute of Technology (DIT). The project is also funded by Irish Aid.

The research component of the project is focused on identifying factors that influence the education model and deployment outcomes of the Lurio University of Optometry programme. The study will test the strategies of expedited education, deployment, and retention of optometric practitioners in the public health sector within Mozambique; making a huge difference to people's lives and livelihoods.

**POSTGRADUATE STUDENT RESEARCH**

Postgraduate research is crucial to the development of accurate data, improving the efficacy of programmes and helping to establish priorities for strategic planning purposes and the development of research expertise in the sector. During this year, postgraduate research students from ICEE registered through the University of New South Wales, Australia and University of KwaZulu-Natal, South Africa.

**VISION COOPERATIVE RESEARCH CENTRE (VISION CRC)**

ICEE is a core participant in the Vision CRC and has three PhD students enrolled in projects studying quality of life, efficacy of spectacle provision and comparing skill levels and competencies of mid-level personnel in developing country contexts.

**INFRASTRUCTURE DEVELOPMENT**

Infrastructure development is integral to building functional, sustainable eye care delivery systems. In concert with other core activities, ICEE establish and refurbish buildings to host vision centres, sources reliable equipment and spectacle supplies and creates the project support and administrative services necessary to deliver affordable, readily-available eye care.

In establishing the Vision Centres ICEE has drawn on the experiences and model of the L V Prasad Eye Institute. In this model the initial eye care screening is done by eye care trained community health workers (at a ratio of 1 per 1:5,000 people) at the local level. Primary eye care and refractive error services are provided by Vision Centres at the broader community level (1:50,000), while secondary and tertiary eye care takes place at the Service Centres (local or district hospitals, 1:500,000) and advanced care at Training Centres (1:5 million) or at the Centre of Excellence level (1:50 million). In this way, eye care tasks are divided amongst the available workforce, ensuring that the relatively few individuals who offer advanced care are freed to deliver those services. The Vision Centres can feed into the district health system which integrates into the national eye care system of the country.

Establishing vision centres is the primary activity of ICEE in the area of infrastructure development and a primary vehicle through which ICEE is delivering eye care to the world. The Vision Centre is a permanent facility delivering a range of services – vision screening, refraction, prescribing, cutting and fitting lenses and dispensing glasses. They are strategically located, managed and staffed by trained local personnel, providing quality eye care at the doorstep of rural populations.

The centres aim to be self-sustaining and include a cost-recovery mechanism that helps ensure financial independence. They provide local people with training and employment opportunities, contributing to local capacity and enhancing health care systems.

This year, ICEE opened another sixteen vision centres in Uganda, South Africa, Sri Lanka and Cambodia. More than 22,500 people have been provided with affordable and accessible eye care during the last year through the Vision Centres. All have received vision assessments and almost 4000 pairs of spectacles have been dispensed through Vision Centres.

The establishment and ongoing support of vision centres would not be possible without partnership with local stakeholders. In rural Zambia, the Kitwe Vision Centre is giving people in the region the opportunity to see an eye care professional for the first time. Limited eye care in the region has meant that news of accessible, affordable care has travelled fast and the Centre is working hard to meet the overwhelming demand. In the past year, over 1000 pairs of spectacles have been dispensed through the vision centre. The initial set-up and successful ongoing operation of the Kitwe Vision Centre has been the result of a partnership between ICEE and the Kitwe Central Hospital.
In Uganda, the National Intervention on Uncorrected Refractive Errors (NIURE) was launched by a partnership between ICEE and Light for the World and the Ugandan Ministry of Health. The NIURE involved the development of refractive error services and the provision of vision correction devices through the establishment of vision centres. As a result, 10 new vision centres opened during the year, providing more than 8000 eye examinations and dispensing over 1000 pairs of spectacles.

ICEE East Africa Regional manager, Naomi Nsubuga, says the programme has been a tremendous success in establishing permanent refractive error services and delivering eye care urgently needed. “The Uganda programme owes much of its success to forming good partnerships with both government and non-governmental organisations. ICEE is currently the implementing partner for the National Intervention on Uncorrected Refractive Errors in collaboration with the Ministry of Health and Light for the World,” she said.

Another example of a successful partnership has been in Port Moresby, Papua New Guinea. The Port Moresby Vision Centre is a thriving operation employing four local staff and ensuring educational resources exist to create services that remain permanently, beyond the involvement of ICEE.

The development of Vision Centres has seen an increase in demand for training. In response to this challenge the establishment of regional training centers encompassing a range of training programmes to support the Vision Centre implementation and management, has become central to the ICEE strategy of human resources development.

The key to creating sustainable eye care systems is education. The lack of refractive error services throughout the developing world is largely due to a drastic shortage of qualified eye care personnel, resulting in 670 million worldwide blind or vision impaired as a result of uncorrected refractive error.

ICEE addresses this shortage by delivering diverse and comprehensive education programmes to help train the different levels of eye care personnel necessary to build complete eye care services. Education programmes, in parallel with infrastructure and advocacy activities, act to increase the accessibility of eye care services that are culturally appropriate, reliable and affordable. The programmes are integrated with the policies and activities of the host country and other Non Government Organisations working in this area.

Education programmes seek to build sustainable eye care services in two critical ways. Firstly, they provide communities with trained health care workers with the skills and knowledge to deliver appropriate eye care. Secondly, eye care personnel act as educators themselves, creating an exponential growth in the numbers of personnel and ensuring educational resources exist to create services that remain permanently, beyond the involvement of ICEE. The programmes also help build local capacity, providing skills, training tools and materials to effectively train additional personnel.

In the last year, ICEE educated over 3200 people through education courses designed for a broad spectrum of eye care personnel. From optometrists, ophthalmologists and eye doctors to spectacle technicians and community health workers, the training covers professional skill development, refraction, primary eye care, community screening, low vision, spectacle technician skills and vision centre management.

Programmes are tailored for specific country requirements – considering language, prior knowledge and cultural appropriateness, developing practitioner competencies and expanding eye care services to marginalised communities. The result is health care professionals empowered with the skills, knowledge and confidence to provide quality eye care to their communities.

Partnerships with local education institutions are crucial to the success of education programmes in host countries. In Vietnam, for example, ICEE is working to develop a national refraction training project at the Vietnam National Institute of Ophthalmology (VNOI) in Hanoi. The project involves collaborations with VNOI, Vietnam National Prevention of Blindness Steering Committee and the Ministry of Health. The project includes the development of refraction training curriculum and education materials appropriate for the local context.

The Honourable Bob McMullan MP, Australian Parliamentary Secretary for International Development Assistance, visited the VNOI during the year, which is now delivering refraction training to Vietnam. After meeting with...
trainees who had benefited from the close collaboration between ICEE and the VNIO, Mr McMullan said, “Lessons learned will enable eye care services to extend into many other regions.”

In Malawi, Southern Africa, a multi-entry and exit model for optometry training developed by ICEE, will produce personnel with a range of skills that are much-needed on the African continent. Trainees can obtain qualifications at different stages of the course, enabling them to return to their communities with the skills to provide services in vision centres. It also permits them to re-enter the course at a later date if they desire to attain further qualifications or complete an entire optometry degree, offering further academic and career opportunities.

Substantial work has been undertaken to establish this training programme, including logistical planning and the continuing development of training materials and curricula. This would not be possible without a partnership between non-government organisations ICEE, Sightsavers International and Optometry Giving Sight, who have been working in conjunction with key in-country stakeholders the Malawi Ministry of Health, Malawi Ministry of Education, Malawi Health Sciences College, Mzuzu University and Mzuzu Central Hospital, who have come together to develop a comprehensive project with sustainable outcomes for the country.

Optometry Giving Sight is delighted to be a partner in the development of the Regional School of Optometry in Malawi. It is an opportunity to mobilise resources throughout the optical community and to facilitate the exchange of information and ideas with our own partners, sponsors, donors and stakeholders, leading to more effective use of resources and helping to eliminate duplication.”

Clive Miller, CEO, Optometry Giving Sight.

“Comprehensive and accessible eye care will not develop in a vacuum. To be sustainable it has to occur in a climate of comprehensive and accessible health care.”

Professor Kovin Naidoo
ICEE Director of Global Programmes

**Types of Training**

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<td>Vision Centre Management</td>
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**Board Members**

- **Professor Brien A Holden BAppSc PhD DSc OAM**
  ICEE Board Member and CEO
- **Professor Gullapalli Rao MBBS PhD**
  ICEE Board Member and Chair
- **Professor Brian Layland BSc QAM**
  ICEE Board Member and Director of Aboriginal Programmes
- **Professor Kovin Naidoo BSc BOptom OD MPH**
  ICEE Board Member and Director of Global Programmes
- **Professor Deborah Sweeney BOptom PhD**
  ICEE Board Member
- **Professor Desmond Fonn DipOptom MOptom**
  ICEE Board Member

It is the responsibility of the Board to set the strategic direction for ICEE, ensure the appropriate policies are in place for governance of the organisation, monitor its financial position and the correct use of its resources. An annual Operational Plan is developed by ICEE management and approved by the ICEE Board. Quarterly Board meetings are held to discuss financial, programme and governance matters.

**Mission**

At ICEE we know that a pair of glasses and access to eye care means improved performance at school, increased employment opportunities and, ultimately, a higher quality of life.

Globally at least 670 million people are blind or vision impaired simply because they don’t have access to an eye examination and a pair of glasses.

Our mission is to ensure that the lives of all people worldwide are enriched by the wonder of sight.

By the year 2020, ICEE aims to have eliminated blindness that is due to simply not having a pair of glasses.

*To read the full text of Professor Naidoo’s article go to: www.iapb.org/news_letter.htm*

We have audited the accompanying financial report of International Centre for Eyecare Education Limited which comprises the balance sheet as at 30 June 2009, profit and loss statement and cash flow statement for the year ended on that date, a summary of significant accounting policies and other explanatory notes and the directors’ declaration.

### Directors’ Responsibility for the Financial Report

The directors of the company are responsible for the preparation and fair presentation of the financial report and have determined that the accounting policies described in Note 1 to the financial statements, which form part of the financial report, are appropriate to meet the requirements of the Corporations Act 2001 and are appropriate to meet the needs of the members. This responsibility includes establishing and maintaining internal control relevant to the preparation and fair presentation of the financial report that is free from material misstatement, whether due to fraud or error; selecting and applying appropriate accounting policies; and making accounting estimates that are reasonable in the circumstances.

### Auditor’s Responsibility

Our responsibility is to express an opinion on the financial report based on our audit. We conducted our audit in accordance with Australian Auditing Standards. These Auditing Standards require that we comply with relevant ethical requirements relating to audit engagements and plan and perform the audit to obtain reasonable assurance whether the financial report is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial report. The procedures selected depend on the auditors’ judgment, including the assessment of the risks of material misstatement of the financial report, whether due to fraud or error. In making those risk assessments, the auditors consider internal control relevant to the entity’s preparation and fair presentation of the financial report in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity’s internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by the directors, as well as evaluating the overall presentation of the financial report.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

### Independence

In conducting our audit, we have complied with the independence requirements of the Corporations Act 2001.

### Audit Opinion

In our opinion, the financial report of International Centre for Eyecare Education Limited is in accordance with:

(a) the Corporations Act 2001, including:
   (i) giving a true and fair view of the company’s financial position as at
   (ii) complying with Australian Accounting Standards to the extent described in Note 1 and complying with the Corporations Regulations 2001; and

(b) other mandatory professional reporting requirements

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## Annual Review 2008-2009

### Income Statement

**For the year ending 30 June 2008**

<table>
<thead>
<tr>
<th></th>
<th>2009</th>
<th>2008</th>
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<tbody>
<tr>
<td><strong>REVENUE</strong></td>
<td></td>
<td></td>
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<tr>
<td>Donations and gifts - monetary &amp; non-monetary</td>
<td>178 014</td>
<td>540 030</td>
</tr>
<tr>
<td>Legacies and bequests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grants</td>
<td></td>
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</tr>
<tr>
<td>• AUSAID</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• other Australian</td>
<td>4 078 877</td>
<td>1 916 500</td>
</tr>
<tr>
<td>• other overseas</td>
<td>1 190 026</td>
<td>949 330</td>
</tr>
<tr>
<td>Investment income</td>
<td>9 569</td>
<td>40 730</td>
</tr>
<tr>
<td>Other income</td>
<td>1 219 006</td>
<td>2 902 005</td>
</tr>
<tr>
<td>Non-monetary donations &amp; Gifts</td>
<td>1 007 583</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total revenue</strong></td>
<td>7 683 075</td>
<td>6 348 596</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>2009</th>
<th>2008</th>
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</thead>
<tbody>
<tr>
<td><strong>EXPENSES</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Overseas projects</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• funds to overseas projects</td>
<td>4 139 283</td>
<td>2 524 581</td>
</tr>
<tr>
<td>• other project costs</td>
<td>620 180</td>
<td>542 072</td>
</tr>
<tr>
<td>Domestic projects</td>
<td>577 245</td>
<td>23 974</td>
</tr>
<tr>
<td>Community education</td>
<td>211 682</td>
<td>1 985 161</td>
</tr>
<tr>
<td>Fundraising costs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• public</td>
<td>257 861</td>
<td>624 190</td>
</tr>
<tr>
<td>• government, multilateral and private</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Administration</td>
<td>245 184</td>
<td>221 450</td>
</tr>
<tr>
<td>Non-monetary expenses</td>
<td>1 007 583</td>
<td>0</td>
</tr>
<tr>
<td>Cash commitments to Australian entities</td>
<td>1 464 000</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total expenses</strong></td>
<td>8 523 018</td>
<td>5 921 428</td>
</tr>
</tbody>
</table>

**Excess of revenue over expenses (shortfall) from continuing operations**

(839 944) 427 168

### TABLE OF CASH MOVEMENT

No single appeal or other form of fundraising for designated purpose generated 10% or more of total income for the period under review.
The International Centre for Eyecare Education (ICEE) is grateful for the support it receives from its Patron, the Institute for Eye Research (the Institute). The Institute is a not-for-profit organisation and a leading international medical research institute dedicated to eye health and vision care for all. The Institute is an innovator in the field of giving. Since its inception, the Institute has given millions of dollars of cash and in-kind support to ICEE and shared the vision to give not only sight, but hope to 300 million people around the world with refractive error.

ICEE is a participant in the Vision Cooperative Research Centre (Vision CRC). The Vision CRC is the largest vision correction research centre in the world. This unique organisation is a worldwide collaboration of almost 30 organisations which have come together to develop breakthrough technology and products for the correction of myopia and presbyopia, to deliver innovative education programmes at all levels of the eye care industry and to develop models which provide effective, affordable and sustainable eye care delivery to communities in need.

ICEE is a Task Force member of the Vision 2020: The Right to Sight initiative, established by the World Health Organisation (WHO), International Agency for the Prevention of Blindness (IAPB) and the Partnership Committee of the International Non-Government Development Organisations. The initiative aims to eliminate avoidable blindness by the year 2020 by enabling all parties and organisations involved in combating blindness and impaired vision to work in a focused and coordinated way.

ICEE is a Principal Partner of the Vision 2020: The Right to Sight, Australia initiative. Vision 2020 Australia’s mission is to work collaboratively to promote vision as a basic human right, to support efforts to eliminate avoidable blindness and improve vision care in Australia and internationally as part of the global initiative.

ICEE is a signatory to the Australian Council for International Development Code of Conduct which defines minimum standards of governance, management and accountability for non-government development organisations. Adherence to the Code is monitored by an independent Code of Conduct Committee elected from the non-government organisation (NGO) community. Our voluntary adherence to the Code of Conduct demonstrates our commitment to ethical practice and public accountability.

ICEE is a principle partner in Optometry Giving Sight along with the World Optometry Foundation and the IAPB. Optometry Giving Sight supports the goals of VISION 2020: The Right to Sight, an initiative of IAPB and the WHO. Optometry Giving Sight supports programmes that offer eye exams and glasses in countries with little or no access to them, while also establishing infrastructure and training the local human resources required for sustainable, quality vision care.

ICEE is a recipient of the Standard Chartered Bank, Seeing is Believing initiative which works to support projects that have an immediate impact on people’s lives and establish sustainable health care for the future. The Seeing is Believing initiative supports VISION 2020: The Right to Sight, a global collaboration bringing together the IAPB, the WHO and international NGOs to eliminate avoidable blindness by the year 2020.

AusAID is the Australian Government’s Agency for International Development. In 2009, ICEE received full AusAID accreditation after undergoing a comprehensive assessment. During the last year ICEE established Vision Centres in Lae and Mt Hagen, Papua New Guinea, participated in the design of the Vietnam Australia Vision Support Programme and commenced collaboration with others to establish Vision Centres in Cambodia and the Solomon Islands, through the support of AusAid funding.

For a copy of the full financial report for the year ending 2009, please contact ICEE Secretariat on +61 2 9385 7459.