ICEE is a signatory to the Australian Council for Overseas Aid (ACFOA) 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 NGO community. Our voluntary adherence to the Code demonstrates our commitment to ethical practice and public accountability.

More information about the ACFOA Code of Conduct can be obtained from ICEE, and from ACFOA at:
Tel: (02) 62851816
Fax: (02) 62851720
Website: www.acfoa.asn.au
Email: acfoa@acfoa.asn.au

ICEE is a Task Force member of the Vision 2020: The Right to Sight initiative, established by the World Health Organisation (WHO), the 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 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 grateful for the support it receives from the i-media team. All of ICEE’s promotional materials are proudly sponsored by i-media.
Mission Statement
Our mission is to eliminate avoidable blindness and impaired vision due to uncorrected refractive error by developing sustainable solutions for communities in need.

The Challenge
According to the World Health Organisation, there are 45 million blind people and a further 135 million people with serious visual impairment. Of these, ICEE estimates that uncorrected refractive error or the need for glasses accounts for up to 6 million blind and 100 million with significantly impaired vision.

If urgent action is not taken these numbers will double over the next 20 years. This is unacceptable both from humanitarian and socio-economic points of view.

Our Strategy
Our strategy for achieving sustainability within communities hinges on:

Eyecare Service Delivery
Providing eye examinations and affordable glasses to those in need,

Human Resource Development
Training and equipping eyecare personnel, including optometrists and their teachers,

Infrastructure
Supporting and developing Eye Clinics, Schools of Optometry and Centres of Excellence.

Our People
We achieve this by having:
Dedicated and highly skilled staff,
Committed and loyal eyecare professionals,
Strong partner and stakeholder networks,
Generous professional, public and corporate support.

Our Vision is that by eliminating avoidable blindness and impaired vision due to uncorrected refractive error, we can dramatically improve opportunities for education and employment and the quality of life for many millions of people throughout the world.
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MESSAGE FROM THE CHAIR

It is tragic and wasteful that in this day and age a child, an adult, a mother, a bread-winner, can be functionally blind or have significantly impaired vision simply because they do not have the glasses that they need. The fact that hundreds of millions of people around the world are in this situation through lack of access to eyecare or because they cannot afford glasses, is unacceptable.

The solution is simple: trained eyecare personnel plus affordable glasses.

ICEE believes very strongly that collaboration is the only way to achieve the elimination of unnecessary blindness and impaired vision due to uncorrected refractive error. Cooperation with all potential partners; WHO and IAPB; all the great NGOs in blindness prevention; the professions of optometry, ophthalmology and optical dispensing; and all the people involved in the eyecare industry, is essential. For a small organisation, ICEE invests heavily in collaboration, committing over AUD$250,000 a year in cash support from a budget of AUD$3 million to the Vision 2020: The Right to Sight organisation alone, and at least double that in in-kind support for Vision 2020 global organization programs such as the WHO Refractive Error Working Group and the Refractive Error Studies in Children. We need all the Vision 2020 partners in order to eliminate avoidable vision loss and achieve sustainable and ongoing eyecare services to all communities in need.

Four years from its inception, ICEE is beginning to have some impact.
The **ICEE public health group**, led by Yvette Waddell as Executive Director, and with Jacqui Ramke, Brian Layland and Kovin Naidoo as Program Managers, has provided 32,449 people with eyecare and delivered 48,142 pairs of spectacles to those in need. More important perhaps are our efforts in creating local capacity; including so far training 27 trainers in refraction, 191 refractionists, 17 eye health coordinators and assistants, 89 school teachers, and 24 nurses. In developing infrastructure, ICEE has helped to establish or fund 50 eye clinics, 2 optical workshops, and 3 optometry schools.

Our **ICEE professional education group** under Craig Butler’s leadership, has provided high-end skills and knowledge to 4,365 established practitioners, and how-to-teach courses and educational resources to 697 educators at colleges and institutions of optometry, ophthalmology and optical dispensing. Craig’s group, through Essilor’s sponsorship, has also provided sophisticated and adaptable teaching materials and programs that are invaluable at all levels of teaching of refractive, dispensing and secondary eyecare.

But it is the individuals behind these numbers and programs that tell the real story. It is the boy or girl who can now see the blackboard for the first time; the woman who can see her grandchildren; the father or mother who can now see well enough to get productive work. Every one of our field workers can tell a story of the immense gratitude of patients who can suddenly see again because of ICEE. The delighted smiles, handshakes and hugs that the practitioners receive are just a small indication of the difference that clear vision makes to someone’s life.

In **East Timor**, ICEE through Jacqui Ramke, Nitin Verma, and Margie O’Neill, with support from initially Fiona Dimond and then Edwina Hart and a host of volunteers, has worked with the East Timorese communities and organisations to both deliver eyecare and begin the human resource training that is needed for the development of sustainable eyecare in

In **Australia**, the AH M RC-ICEE Aboriginal Eyecare program has now established, through the incredible driving energy of Brian Layland and Katherine Costello and under the auspices and control of the Aboriginal Community Controlled Health Care Services, coordinated by the excellent Sandra Bailey, over 50 Aboriginal Medical Services (AMS) eyecare clinics throughout the State of New South Wales. This program is a prime example of the appropriateness of working under community control and building on existing resources to make eyecare accessible to all. In the Northern Territory, in a program instigated by Nitin Verma, ICEE supports the provision of optometry services by Tess Pollock to the multi-disciplinary team from the Territory Health Services that provides eyecare to the 26 communities and regional centres in the Top End. In WA, Margie O’Neill, who has devoted the last 12 years to modelling and developing eyecare services to Aboriginal and East Timorese people, continues to innovate effective systems.
that country. Les Donovan has also worked to
develop the excellent educational resources which will
be used in East Timor and other regions. Under
Jacqui and in cooperation with CBMI, the Fred
Hollows Foundation and the Regional IAPB Office at
CERA, ICEE programs have also now expanded in
the Western Pacific, with new projects in Tuvalu and
Vanuatu with the input from ICEE volunteers Suit
May Ho and Genevieve Napper.

In Africa, ICEE is proud to be led by Kovin Naidoo
and his outstanding team based at the University of
Durban Westville (UDW). ICEE Africa's Train-the-
Trainer program led by Palesa Dube, in association
with UDW, has had a ‘pyramidal’ multiplying impact
on the availability of personnel that can refract. The
ICEE Teaching Centre teaches 20 teachers a year,
who teach 25 refractionists each year, who then see
5,000 people who get their eyes examined every 5
years giving eyecare coverage to a population of
12,500,000 people. The ICEE Clinic at
Stanger Hospital run by Yashika Indeerjet provides
invaluable hands-on training opportunities for the
newly trained teachers of refractionists. The
returning teachers are monitored for activity. There is
of course attrition, and will be until proper career
structures are made. However many are in it for the
long haul, such as the very innovative Willy Komen,
a Kenyan nurse who has set up one of the first eyecare
dispensaries in Kenya. ‘Giving someone back their
sight is one of the most rewarding jobs I can think of,’ says
Willie.

The ICEE team in Africa is building networks,
collaborations and support at an extremely rapid rate.
In the 2001-2002 year it took on two major regional
responsibilities and one global epidemiological
research program. ICEE hosted at UDW the IAPB
Regional Meeting and Workshop on Refractive
Error. On the research front led by Percy Mashige,
Prindhavellie Govender, Avesh Raghumandan, and
LV Prasad staffer, Prasant Sahare, along with a team
of excellent community health workers, ICEE
conducted the African portion of the incredibly
difficult population-based Refractive Error Study in
Children on over 5,000 children. The RESCA study,
which was part of a series of ethnic and geographical
studies designed by Leon Ellwein of the NEI and
colleagues, was funded by WHO, NEI, CBMI, Sight
Savers International and ICEE itself. It was one of
the highlights of my year to see the ICEE Africa team
in action with 60 beautiful children in Umlazi, one of
the most challenging parts of South Africa. The
Refractive Error Study for Children is providing data
that we need to develop the right strategies to really
make a difference in this continent of great need.

ICEE is investing heavily in the KCMC School of
Optometry in Moshi, Tanzania and through the
excellent input from volunteer Melbourne
optometrist Tim Fricke, is reviewing our progress.
Also in Tanzania, the Community Optometrist

‘Giving someone back their
sight is one of the most
rewarding jobs I can think of.’
says Willie.
The ICEE organisation has grown rapidly as every opportunity to test models and achieve short-term goals has been taken. ICEE is fortunate to have gained the input of experienced and dedicated executives Yvette Waddell and Yvonne Lockwood, and most recently Liesel Wett, to review and restructure ICEE. The 2002-2003 year will be one of reviewing governance and administration, consolidating planning and ensuring ACFOA compliance and AusAid accreditation, and building a sound basis for ICEE’s future. To add considerably to our programming capacity, ICEE has recently been very fortunate to obtain the services of Garry Brian, former Medical Director at the FHF and only one of three full-time public health ophthalmologists in Australia. Garry’s knowledge, leadership and experience will be invaluable to ICEE.

ICEE Public Health relies heavily on in-kind support from CRCERT and cash resources from the Institute for Eye Research, a benevolent not-for-profit company that funds developments in eye research, education and public health. ICEE plans to pay its own way and the only way is to raise funds from the public, the professions and industry. ICEE is very fortunate to have received the outstanding volunteer support of one of the best from the optical industry, Yvonne Lockwood, and new ICEE staff member Greg Campetelli, an experienced educationalist and ‘resource mobiliser’. Partly as a result of their efforts,
our sponsors and supporters are growing and helping to bring our goals within reach. This year we have received the endorsement and support of optometry professionals through Optometrists Association Australia and Provision; and the optical industry through Essilor, Marchon, and Hoya; together with support from Christian Blind Mission International and i-media. The generosity of these groups in helping ICEE has been outstanding. Discussions are underway with the World Council of Optometry and we are hopeful that a joint world-wide collaboration aimed at fundraising from optometry and optical outlets, perhaps in partnership with Vision 2020 itself, will eventuate.

Our staff in Sydney, Africa and Asia, have tackled the challenges of developing sustainable global eyecare with tremendous energy, enthusiasm and compassion. It is the individual people in ICEE whose imagination, dedication and driving energy that make ICEE work and we thank them for their efforts. ICEE is blessed at all levels and in all regions with outstanding and dedicated organisers and administrators including Fiona Dimond, who has now left, Colina Waddell, Edwina Hart and in Africa, Mitrashine Rajah and Susanna Coleman. Barry MacNamara, CEO of VisionCare NSW, keeps a watching brief on LCS for ICEE.

We also thank the ICEE volunteers, who have similarly been inspired to contribute their time and talents to this work. Special mention should be made of staff of the Cooperative Research Centre for Eye Research and Technology and students from the University of New South Wales who have contributed time to Aboriginal and East Timorese eyecare; the administration of the ICEE head office; to the volunteer optometrists and other people who have given sight to thousands.

ICEE headquarters is at the University of New South Wales in the CRCERT part of the Rupert Myers Building through the generosity of the Optometric Vision Research Foundation and the Institute for Eye Research. This excellent arrangement not only gives ICEE a welcome home, but it also brings credit to both the University of New South Wales and the Australian Government CRC system for their sponsorship and encouragement to ICEE to tackle one of the unnecessary scourges of our day, avoidable blindness and impaired vision. Being at UNSW gives ICEE access not only to the One Vision collaboration of organisations and the expertise they possess in research and research education, the highest level training programs, and state-of-the-art technology eyecare devices, procedures and systems, but also to the camaraderie of a group of 132 people dedicated to the Mission of "Vision Excellence for All People". Special mention should be made of the skills of Debbie Sweeney in research; Fiona Stapleton in research education; Kylie Evans and Serina Stretton in communications; Selim Soytemiz and Barry Brown in web development; Shane Parker, Amee MacFadden and Carol Woollcott in graphics; Matt Wood in video; Julie Henderson, Nadine Gibbon along with the rest of the finance team and Martin Skellam, Dennis Kavadas and Ana Sastrias in IT. That government and university systems support such endeavors augers well for Australia's commitment to advancing mankind, and together with our Indian, Canadian, WHO, IAPB and NGO colleagues, gives ICEE a real chance to achieve the goals of Vision 2020.

Last but not least to be mentioned is the Board of ICEE. The wisdom, knowledge, generosity of spirit, and moral, spiritual and practical support of fellow Board members, Desmond Fonn, Brian Layland, Nag Rao, and Debbie Sweeney is immeasurable. These
four people have dedicated their lives to helping people, fortunately part of it through ICEE.

ICEE is a young organisation, and we are still a way from (but in sight of) achieving our goal of eliminating uncorrected refractive error. The achievements we have made thus far, the knowledge we have gained from others, the excellence of the Board, the talents and commitment of our staff, and the support we have had from WHO and IAPB, the other NGOs, the professions and the industry, and the Australian Government have been amazing, and give me great hope that this global healthcare problem can be solved. Now we have to re-organise, get our strategies right, and deliver.

Brien A Holden, OAM
Chair
ICEE’s Mission

The International Centre for Eyecare Education (IC EE) is committed to eliminating avoidable blindness due to uncorrected refractive error by developing sustainable solutions for disadvantaged communities in serious need of eyecare.

History

In 1998 researchers and educators from the Cooperative Research Centre for Eye Research and Technology in Australia, the LV Prasad Eye Institute in India, and the Centre for Contact Lens Research in Canada, came together to identify how they could make a contribution to global blindness prevention efforts.

Preventable blindness is one of our most tragic and wasteful global problems. By eliminating unnecessary blindness we could dramatically improve the education, employment, health and quality of life for many millions of people.

Research in India had shown that refractive error, correctable by spectacles, was a major vision problem. Uncorrected refractive error causes significant visual disability and even blindness, which in turn has severe social and economic impacts on the individual, community and country. Uncorrected refractive error is today responsible for up to 6 million blind and 100 million people with significantly impaired vision. The incidence of refractive error is also increasing due to heredity, near work, urbanisation, and ageing of the population.

Refractive error can be cured with a simple
eye examination and provision of spectacles, yet many people have no-one to provide such treatment, or cannot afford the devices they need to correct their vision.

The three organisations therefore decided to join together to use their combined expertise in international eyecare and education, to target refractive error.

**ICEE Strategy**

Blindness and impaired vision due to uncorrected refractive error can be prevented if there are adequate number of trained eyecare practitioners and if spectacles are affordable. ICEE is developing the human resources and infrastructure required to give sight to those in need.

The ICEE Giving Sight strategy involves the development of three integrated aspects of sustainable eyecare:

- **Eyecare Service Delivery:** providing eye examinations and glasses to those in need.
- **Human Resource Development:** training and equipping optometrists, eyecare personnel and their teachers.
- **Infrastructure:** supporting and developing eye clinics, schools of optometry, and centres of excellence.

ICEE programs focus on these aspects, working within particular communities and countries. For example, in Australia ICEE is employing community optometrists to deliver eyecare to Aboriginal communities, at the same time as establishing eye clinics within Aboriginal Medical Services, and training Aboriginal Eye Health Coordinators. In Africa, ICEE has established a ‘train the trainer’ program to increase practitioner numbers, is developing a community optometrist model to deliver local eyecare services, and is working with the Tanzanian School of Optometry to improve eyecare education and establish a centre of excellence in the region.

The ICEE Principles are:

- **Equality:** Every person has the right to have the best possible vision.
- **Sustainability:** ICEE programs are aimed at building local capacity and developing systems which will continue to provide eyecare services and affordable spectacles to communities in need.
- **Transferability:** ICEE is developing eyecare models which will allow effective activities to be easily applied to other regions.
- **Collaboration:** We work with other groups to enhance program outcomes.
- **Quality:** Our programs and products adhere to the highest standards of quality. ICEE also monitors its activities to ensure continued effectiveness and to learn from our experiences.
VISION 2020: THE RIGHT TO SIGHT

Global
Vision 2020: The Right to Sight is a worldwide initiative designed to eliminate avoidable blindness by the year 2020. Established by an alliance of the World Health Organisation (WHO), the International Agency for the Prevention of Blindness (IAPB), and the Partnership Committee of the International Non-Government Development Organisations; the program aims to enable all parties and organisations involving in combating blindness to work in a focused and coordinated way.

ICEE is a Task Force Member of Vision 2020.

Vision 2020 aims to:
- Increase awareness of blindness as a major public health issue
- Control the major causes of blindness
- Train eyecare personnel to provide appropriate eyecare
- Create an infrastructure to manage the problem.

Vision 2020 is addressing the five most common and treatable causes of blindness:
- Cataract
- Trachoma
- Onchocerciasis
- Childhood blindness
- Refractive error and low vision.

ICEE’s involvement in Vision 2020 includes:
- Attendance at all Vision 2020/IAPB Task Force meetings
- Brien Holden is Chair of the Refractive Error Working Group
- Brien Holden is a member of the Resource Mobilisation Committee
- Greg Campitelli is a member of the Communication Committee
- Brien Holden is a member of the Cataract Working Group
- Financial support of the Vision 2020 CEO position
- Hosting of the Vision 2020 website through i-media

The Refractive Error Working Group was established by the World Health Organisation at the instigation of ICEE as a component of Vision 2020 activities, in recognition of this important facet of international eyecare. Professor Brien Holden is Chair of the REWG, which is developing international strategic plans and policies to eliminate uncorrected refractive error.

In April 2002 ICEE hosted a strategic planning meeting of the REWG in Sydney, which brought together world leaders in the field of blindness prevention, representatives of the World Health Organization and World Council of Optometry, including Dr Serge Resnikoff, Director of Blindness and Deafness programs for WHO.
Discussion focussed on three major areas:

- Estimating the number of people around the world who need spectacles. Prevalence data is necessary to determine which countries, regions, population groups and age groups are most in need of new or expanded vision services, as well as providing a baseline for evaluating the progress of new programs. ICEE provided an extensive literature review of epidemiological studies from countries where the prevalence of refractive error has been measured. ICEE is also conducting the latest of a series of major epidemiological studies of the prevalence of refractive error. Coordinated by the National Eye Institute of the USA, studies have been carried out in China, Nepal, Chile, and India; and are now being carried out by ICEE and partners in Africa.

- Identifying research that would help in eliminating uncorrected refractive error around the world, such as the development of new cost-effective and efficient instruments to measure vision or information about the extent to which low-cost, ready-made spectacles are adequate to meet vision needs.

- Developing a strategic plan for the global elimination of uncorrected refractive error. Countries that now have limited vision services will use WHO recommendations in the areas of infrastructure, human resources, and technology.

The REWG will finalize the global strategic plan at their next meeting in 2003.

**Australia**

ICEE is also a Principal Partner in the Vision 2020: The Right To Sight Australia initiative. In response to the establishment of the global Vision 2020 campaign, a number of Australian organisations involved in vision and eyecare research, education and community work have come together to organise the implementation of the Vision 2020 goals in this country. ICEE is one of the founding members of Vision 2020 Australia. The Australian initiative aims to promote sight as a basic human right and to create cooperation to address the avoidable problems and conditions that affect sight. Almost 50 organisations have now joined the Vision 2020 Australia partnership.

ICEE involvement as a principal partner is in the following areas:

- Brien Holden is the Co-Chair of the Vision 2020 Australia Board
- ICEE is developing collaborative projects under the Vision 2020 banner, such as the East Timor.
Eyecare Program

- Brian Layland and Les Donovan are members of the Australia Community Committee
- Brien Holden, Brian Layland and Jacqui Ramke are members of the Aboriginal and Torres Strait Islander Committee
- Yvette Waddell and Jacqui Ramke are members of the Global Committee
- Greg Campitelli and Kylie Evans are membership of the Communication Committee
- Hosting of the Vision 2020 Australia website through i-media

As a principal partner of Vision 2020 Australia, ICEE was honoured that the launch of the inaugural Vision 2020 World Sight Day in Australia took place on 10 October 2001 at its offices of ICEE at the University of New South Wales. Professor Brien Holden presented the key issues of raising the importance of eye health in the Australian setting to an audience of Vision 2020 members and media. ICEE together with the School of Optometry and Vision Science and the staff of the Optometry Clinic at the University of New South Wales also conducted free vision screening on campus in order to promote good eye health and the importance of regular vision assessments.

OPTOMETRY GIVING SIGHT

ICEE is officially endorsed by the Optometrists Association Australia. The Association demonstrated its endorsement and support for ICEE via a 'Declaration of Support' signed this year. The signing ceremony took place in Melbourne on Sunday 19 May 2002 as part of the Southern Regional Congress, which is the largest optometric conference in the Southern Hemisphere. The Declaration was signed by Helen Robbins, National OAA President; Professor Brien Holden, Chairman of ICEE; Professor Hugh Taylor, Co-Chair of Vision 2020 Australia and Chair of the Western Pacific Region International Agency for the Prevention of Blindness (IAPB); and every State President of the OAA. The Declaration had previously been signed by two of the most well respected and influential ophthalmologists in the world of blindness prevention: Dr Gullapalli 'Nag' Rao, Secretary General of the IAPB, and Dr Serge Resnikoff, Co-ordinator, Prevention of Blindness and Deafness, World Health Organisation. The Optometrists Association Australia boasts over 3,000 members in Australia and its membership represents 98% of the profession.

ICEE’s Optometry Giving Sight Initiative calls on all those involved with the optometric profession to work with ICEE by:

- Advocating optometry's role in blindness prevention
- Becoming a financial supporter
- Making in-kind contributions of new stock or equipment
- Volunteering on domestic and international programs
ProVision, Australia’s largest network of independent optometrists in Australia, has also selected ICEE as its nominated and preferred charity. Chief Executive Officer Pauline Powell made the announcement at ProVision’s National Conference in Queensland. All financial donations made by ProVision members who join Optometry Giving Sight are pooled to fund one specific project such as the establishment of an Eye Clinic or supporting the development of a School of Optometry in countries of serious need of eyecare.
ICEE is governed by a Board which reviews and oversees the direction and performance of the Organisation, particularly in the areas of strategic planning and the development of ICEE relationships with other organisations and governments. The ICEE Executive comprises the Chair, Executive Director, and Program Directors. The Chair is responsible for the implementation of the decisions and policy of the Board, and for our Vision 2020 collaboration. The Executive Director is responsible for Program overview, administration and finance. The ICEE Head Office is in Sydney Australia, with Regional Offices in Africa, China and India, and linkages to a range of other organisations.
Professor Brien Holden
BAppSc PhD DSc OAM,
ICEE Chair: Brien Holden is Professor of Optometry at the University of New South Wales (UNSW), founder and Director of the Cornea and Contact Lens Research Unit at the UNSW School of Optometry, and Director of the Cooperative Research Centre for Eye Research and Technology. He graduated Bachelor of Applied Science from the University of Melbourne in 1964 and gained his PhD from City University (London) in 1971. He was a co-founder of the International Association of Contact Lens Educators (1979), Vice-Chairman (1979-1991), President (1991-1999); Founding President-elect, President (1982-1984), and Executive Member of the International Society for Contact Lens Research. Awards include: Honorary Degrees of Doctor of Science by the State University of New York 1994, Pennsylvania College of Optometry 1998, City University London 1999; H B Collin Research Medal; Kenneth W Bell Medal; Ruben Gold Medal; Glenn A Fry Award; British Contact Lens Association Medal; Special Recognition Award medal from the Association for Research in Vision and Ophthalmology; Honorary Member of the Contact Lens Society of South Africa; Council Member of the International Society for Contact Lens Research; founding Member of the International Association of Contact Lens Educators in which he serves as Vice President.

Desmond Fonn
DipOptom MOptom,
ICEE Board Member:
Desmond Fonn is an Associate Professor and Director of the Centre for Contact Lens Research at the School of Optometry, University of Waterloo in Canada. He is a graduate of the School of Optometry in Johannesburg, South Africa and the University of New South Wales in Sydney, Australia. He is a fellow of the American Academy of Optometry and diplomat of the Cornea and Contact Lens section; Member of the Canadian and Ontario Association of Optometrists, and the Association for Research in Vision and Ophthalmology; Honorary Member of the Contact Lens Society of South Africa; Council Member of the International Society for Contact Lens Research; founding Member of the International Association of Contact Lens Educators in which he serves as Vice President.

Professor Brian Layland
BSc OAM, ICEE Board Member and Director of Aboriginal Programs: Since graduating with a Bachelor of Science (Opt Sc) in 1958, Brian Layland has become an experienced and well respected optometric practitioner active in the scientific and professional communities. He has been a Member of the Council of the Australian Optometrical Association (AOA), NSW Division, since 1955; National President of the AOA (1976-1979), National Vice President (1971-1989) and State
President (1971-1972); Vice-President of the International Optometric and Optical League (1978-1979); and was involved in the establishment of Australia’s Independent Optometrists group. He is a visiting lecturer (since 1971) and Advisory Committee Member (since 1957) of the UNSW School of Optometry; a Visiting Professor for the Cooperative Research Centre of Eye Research and Technology; and a Member and Chairman of many professional committees involved with government at State and Commonwealth levels. Awards include: International Optometrist of the Year 1992; Medal of the Order of Australia for services to the profession of optometry 1979; Medal of the Order of Liverpool for services to technical education and the community; Wilfred I Wenborn Award for Conspicuous Service in the Advancement of the Profession of Optometry 1990; Honorary Life Member of the AOA (NSW Division).

Dr Gullapalli Rao  
MBBS, PhD, ICEE Board Member:  
Gullapalli Rao is the Founder and Director of the LV Prasad Eye Institute (LVPEI) in India. His international work and standing is epitomised by his appointment as Secretary-General of the International Agency for the Prevention of Blindness (1998-present), and former Chairman of the South-East Region (1994-1999). He is also Executive Officer of the International Contact Lens Society of Ophthalmologists; One of the Chairs of the Academia Ophthalmologica Internationalist (50 top elected academicians in ophthalmology); President of the Asia Pacific Region and Member of the Board of the International Association of Contact Lens Educators (1995-present); Member of the International Advisory Committee of the International Federation of Eye Banks (1995-present); Member of the International Medical Advisory Board of Orbis International (1994-present), and Fellow of the American Academy of Ophthalmology. Awards include: Ranbaxy Research Award for contributions to medical science 1995; Louis Emile Javal Silver Service Award from the International Contact Lens Council of Ophthalmology 1994; Outstanding Service Award of the Association of Asian Indians in Ophthalmology 1984; Honor Award of the Telugu Association of North America for outstanding accomplishments in medicine; the Honor Award of the American Academy of Ophthalmology 1983; and the Padmashri award by the Indian Government for his contribution to medicine and ophthalmology 2002.

Associate Professor Deborah Sweeney  
BOptom PhD, ICEE Board Member:  
Deborah Sweeney is Associate Professor and Executive Director of the Cooperative Research Centre for Eye Research and Technology, and the Cornea and Contact Lens Research Unit of the School of Optometry at the University of New South Wales. She has been Secretary (1991-2000), Treasurer (1994-2000), President (2000-present), Secretary, Asia-Pacific Regional Group (1991-present) and Assistant Secretary, European, Africa-Middle East and Latin American Regional Groups (1991-present), International Association of Contact Lens Educators;
Councillor (1988-1990), Secretary and Member of the Executive (1990-present), and President Elect of the International Society for Contact Lens Research (2000-present); Treasurer of the Optometric Vision Research Foundation (1984-present); and Secretary of VisionCare New South Wales (1994-present).

Ms Yvette Waddell, ICEE Executive Director: Ms Waddell has been involved with optometric education for the past eight years, previously as Business Development Manager for the Institute for Eye Research and Director of Administration for the International Association of Contact Lens Educators. She is currently studying for her Master of Business Administration at the Australian Graduate School of Management.

Mr Craig Butler BOptom FACBO FCOVD, ICEE Director of Professional Education: Mr Butler received his Bachelor of Optometry degree from the University of New South Wales in 1982. He was made a Fellow of the Australasian College of Behavioural Optometrists in 1989 and the College of Optometrists in Vision Development in 1992. Craig has worked in private optometric practice since 1982, in the United Kingdom and Australia. He was Director of the Vision West Optometry Clinic in Perth, Western Australia, for 10 years until April 2001. During this time he provided clinical supervision and tutoring for visiting French and Indonesian students of optometry, and he has also mentored graduate optometrists enrolled in the University of New South Wales Behavioural Optometry unit of the Master of Optometry degree program.
<table>
<thead>
<tr>
<th>Location</th>
<th>Service Delivery</th>
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<th>Low Cost Spectacles</th>
<th>Infrastructure</th>
<th>Research</th>
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<tr>
<td></td>
<td>1 Fellowship</td>
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ICEE PUBLIC HEALTH

AUSTRALIA

Many Aboriginal people in Australia are losing their vision because of entirely preventable or treatable causes. Aboriginal people suffer up to 10 times the level of blindness from preventable eye disease than non-Aboriginal people. For example, diabetes and associated eye disease has a high prevalence amongst the Aboriginal population, and the rate of cataract is double that of the non-Aboriginal population. Aboriginal people also attend eyecare practitioners in far lower numbers than other members of the Australian population.

NSW Aboriginal Eyecare Program

New eye clinics established at Aboriginal Medical Services in NSW with the help of ICEE are meeting a great need in Aboriginal health care. The NSW Eye Clinics provide eyecare and vision correction, including spectacles and other optical aids, within Aboriginal community-controlled health services. The clinics are staffed by ICEE Community Optometrists or local practitioners. Tertiary eyecare is provided by regional and/or visiting ophthalmologists located at regional hospitals.

The program has continued to expand over the year, and ICEE Aboriginal Eyecare programs are now being conducted at 50 locations throughout NSW. Since February 2000 ICEE optometrists have conducted 4000 eye examinations and have provided 3000 pairs of spectacles to Aboriginal communities.

Those Aboriginal people with diagnosed diabetes who have attended Aboriginal Medical Service (AMS) Eye Clinics are now part of an ongoing recall program that will prevent many from suffering impaired vision or blindness. Thirty optometrists have participated in the program.

During the year AMS Redfern extended its hours to four days per week. Further regular clinics were established within the Sydney metropolitan area at Tharawal AMS at Campbelltown and Durak AMS at Mount Druitt. Intermittent visits have been made to La Perouse.

As well as conducting AMS Redfern Eye Clinic, ICEE Community Optometrist Katherine Costello has accompanied Eye Health Coordinators on visits to Aboriginal communities in more remote areas. In addition, Aboriginal preschools, juvenile justice centres, gaols, rehabilitation centers and diabetes centres have been visited by ICEE optometrists.

Training has also continued for the NSW Aboriginal Eye Health Coordinators, who are stationed at locations where Eye Clinics are established. ICEE training focusses on aspects of patient care and health service such as clinical management; logistics of eyecare delivery; patient communication; maintenance of patient records; and screening techniques for eye disease and vision correction. Basic information for health workers such as diseases and disorders of the eye; and anatomy and physiology
of the eye is also included. This year training courses were held at Walgett, Kempsey, Bourke, Broken Hill, Nowra, Narooma, Wagga Wagga and Wellington. A three-day training program was held in Sydney in October, and a three day program related to ocular problems associated with diabetes was held in July in cooperation with the Australian Centre for Diabetes Strategy. A further training program will be conducted in October 2002.

Strong collaborations and support have continued to be a feature of the NSW Aboriginal Eyecare Program. During the year ICEE entered into an agreement with the Royal Australian and New Zealand College of Ophthalmologists (NSW) to improve Aboriginal access to eye surgery and prompt treatment of eye disease. The Federal Department of Health and Ageing, through the Office of Aboriginal and Torres Strait Islander Health NSW; the NSW Department of Community Services; the Aboriginal Health and Medical Research Council; and cooperating optometrists have all made a contribution to the continued success of this important program. ICEE is also indebted to optometrists from the Cooperative Research Centre for Eye Research and Technology who have generously made their time available, and to those people and companies who have contributed frames, lenses, cases, laboratory services and other items which have been used in the program.

Northern Territory

The remote areas of Australia have limited access to health services, including eyecare. Some Aboriginal communities in particular are situated in areas with little or no eyecare or vision correction available, resulting in unnecessary loss of vision for people in these communities. Helping to combat this problem, an ICEE Community Optometrist is employed to provide optometric services to remote and indigenous communities in the Northern Territory.
This year the ICEE Northern Territory program has provided refraction and eyecare services to approximately 1200 people in the Top End of the Northern Territory. Tess Pollock, ICEE’s Community Optometrist, has provided ongoing optometric services to up to 35 remote indigenous communities, which include places such as Maningrida, Borroloola, Kalkaringi and Gapuniyak. Tess is based in Darwin and travels on a weekly basis with an ophthalmologist to Aboriginal communities and outstations in the region, serving around 30,000 people.

The Office of Aboriginal and Torres Strait Islander Health funds spectacles in this project. Approximately three quarters of people presenting require spectacles, and approximately three-quarters of spectacles dispensed were ICEE low cost spectacles, while the remainder was ordered from an optical laboratory in Darwin. Additional funding was also made available from the Health Insurance Commission for provision of services to rural and remote Australians.

**ASIA PACIFIC**

**India**
The population of India is 1 billion, with at least 10 million blind, and perhaps 19 million visually impaired. Refractive error occurs at a rate of 1 in 25 (4.0%). Current barriers to the correction of refractive error include the availability and accessibility of trained personnel and refractive services.

The Bausch and Lomb School of Optometry in Hyderabad, India, was established in 2000 in association with ICEE partner, the LV Prasad Eye Institute. The School trains students from throughout Asia in order to increase and improve eyecare services, and will also conduct research in optometry to improve the standard of eyecare practices in India and Asia. Through the ICEE Coordinator in India, Vallam Rao, ICEE is involved in planning; the development of educational models and curricula; student selection; and regular functioning of the School.
This year saw the admission of a second batch of students. Fifteen candidates were admitted for the four-year BS Optometry Program, ten students were admitted for the diploma program and 12 candidates were admitted for the one-year program. A four-year plan of internship at LVPEI was prepared for the students attending various courses. Visits were also made to local optical dispensing and surface laboratories as a part of ophthalmic dispensing course.

Enquiries from Indonesia, Malaysia and Nepal have been received about establishing similar models of schools of optometry or upgrading existing courses. Heads of these institutes, as well as others from institutes and organisations around the world, have visited the school during the year.

During the year it was also decided that the Bausch and Lomb School of Optometry would be responsible for refresher training of all 400 ophthalmic assistants as part of the Andhra Pradesh Vision 2020 program. Mr Rao is preparing an initial draft of the curriculum, taking into account the candidates' previous training and their responsibilities.

Dr Krishnaji of RR Lions Hospital of Palkol contacted the ICEE Global office with a view to setting up an optical shop and dispensing laboratory. Les Donovan, ICEE Education Material Development Manager, David Wilson, ICEE Consultant and Vallam Rao assessed the local needs and planned the installation. Optical equipment was ordered through local Indian suppliers. A five-day training course for the opticians and optical laboratory technicians was conducted at the Bausch and Lomb School of Optometry by ICEE.

ICEE has also been involved in the training of practitioners to prescribe near vision glasses for presbyopia, and the provision of low cost glasses. To date around 1660 pairs of reading glasses have been ordered for the project.

**East Timor**

East Timor is a country of nearly 1 million people, yet, since September 1999, there have been no local eyecare services to support the eyecare needs of the population. ICEE is working with the East Timorese Ministry of Health (MOH) and other NGOs and individuals involved in eyecare to identify and treat the many people who are needlessly blind or vision impaired. East Timor’s eyecare problems are severely affecting education opportunities for children, and reducing many people’s ability to support themselves and their families.

In June this year, ICEE conducted its sixth Eyecare Service Delivery Trip to East Timor as part of the collaborative East Timor Eye Program (ETEP). Since 2000, ICEE has examined over 16,500 people and dispensed more than 10,500 pairs of glasses.
Although this Program is delivering much needed immediate care, a more strategic approach that delivers a sustainable, and more comprehensive service is necessary to meet the long-term eyecare needs of East Timor. To this end, in consultation with the MOH, ICEE customised a nine-day primary eyecare course for 15 nurses from the 13 districts in the country. The training aims to enable the nurses to screen patients for eye disease or visual problems, to provide primary eyecare, and to refer people when necessary to further care. In this initial program, ICEE volunteer Educational Consultants Bernie Eastwood and Cheni Lee provided training and resources to support the nurses’ work.

Based on the success of this first training component, ICEE is now speaking with the MOH about strategic training of personnel in the future to ensure eyecare is more accessible to people at the community level. The Ministry of Health sees this course as an important first step towards sustainable ongoing eyecare in East Timor.

**Tuvalu**

In July, ICEE was given the opportunity to work in conjunction with the Royal Australian College of Surgeons Pacific Islands Project (PIP), delivering eyecare to the small island country of Tuvalu. ICEE’s Eyecare Service Delivery Manager and Optometrist, Jacqueline Ramke assisted the PIP team in screening more than 650 people over eight days. Approximately 400 of these were supplied with ICEE low cost spectacles or other spectacles provided by Dr Richard Rawson. Over five days, the PIP team conducted 67 surgical procedures.

ICEE is now developing an ongoing partnership with Dr Richard Rawson, the PIP Team and the Government of Tuvalu. 2002/2003 is looking like a very exciting year with this project due to expand refractive care services as part of a National Eye Plan in Tuvalu. ICEE is committed to providing support to the Government of Tuvalu to develop national eyecare policies and sustainable local programs to prevent and treat the leading causes of avoidable blindness and visual impairment.
Vanuatu
The Vanuatu National Eye Care Program is a joint program between the Vanuatu Ministry of Health and the Fred Hollows Foundation, which aims to deliver eyecare to all regions of Vanuatu, through a series of outreach clinics, and through training for local Eye Nurse Practitioners. ICEE began contributing to the program in 2001, providing education in basic optics and spherical refraction training for nurses undertaking the nine-month training program. A supply of readymade spectacles from the ICEE Low Cost Spectacles Program were also ordered for the nurses to provide comprehensive refractive care when they return to their district clinics.

ICEE volunteer Educational Consultants Genevieve Napper and May Ho returned to Vanuatu in 2002 to evaluate the five nurse practitioners they trained in refraction in 2001, as well as train a further four nurses. The content and delivery of the training was evaluated in order to ensure that ICEE is delivering the most appropriate, effective refraction training possible. Genevieve and May also investigated, in conjunction with National Eyecare Manager and Ophthalmologist Dr John Szetu, whether community-based refraction services are needed, appropriate and feasible in Vanuatu.

AFRICA
African countries suffer up to seven times the rate of blindness as the rest of the world, and are desperately in need of eyecare personnel. ICEE Director for Africa, Dr Kovin Naidoo and the ICEE team at the University of Durban-Westville in South Africa have employed a multi-faceted approach to address this problem.

2001-2002 was an exciting year for the ICEE Africa Team. ICEE, in conjunction with the National Eye Institute and the World Health Organization along with major financial support from Christian Blind Mission International and Sight Savers International, conducted a study to assess the prevalence of refractive error and vision impairment in school age children aged between 5 and 15 years in South Africa. Dr Kovin Naidoo was the principal researcher and Pirindhavellie Govender was the optometrist in charge of data collection. They worked with a clinical team of four clinicians and seven field workers. The South African team used Geographic Information System Technology in this study, making it a first in optometric research.

Ms Pirindhavellie Govender, ICEE Clinical Manager, conducting children for the registration of the Refractive Error Study in Children in Africa (RESCA)

This study, undertaken from January to July 2002, is part of a multi-country endeavour that evolved in response to the incomplete epidemiological information available on refractive error needs. Adequate prevalence data is necessary to determine the regions, population groups and age cohorts most in need of intervention, and also to form the basis
from which interventions in the future can be evaluated. For all of the 5000 children examined in this study, free spectacles were provided for those children requiring optical correction, and appropriate referrals were made in the event of a child having an eye disease.

In February 2002, ICEE Africa provided the logistical support for the IAPB Africa Region Meeting, which included Executive and Task Force Meetings held in Durban. Prior to this meeting Dr Naidoo organized a Refractive Error meeting which was extremely successful as it bought refractive error and the work of ICEE to the attention of the many eyecare planners from throughout Africa that attended the meeting.

A highlight of this year was the bestowing of an Honorary Doctorate on Professor Brien Holden at the University of Durban-Westville. Professor Brien Holden received an Honorary Doctorate at the graduation ceremony for the Faculty of Health Sciences for his contributions to eyecare in Africa and the establishment of ICEE in this continent. This was the first such Award to an optometrist in Africa.

Train the Trainer
The ICEE ‘Train the Trainer’ program trains groups of medical personnel from across Africa and the Middle East to refract and to teach others to refract. The trainees return to their country to train more refractionists, each of whom will continue in eyecare with the added ability to provide the correct prescription of visual correction. This program ensures that eyecare education can be delivered locally and be ongoing. In training 500 personnel from all over the continent, there will hopefully be a projected 60,000 refractionists providing refractive care across Africa by the year 2020.

The program is led by Palesa Dube, ICEE Education Development Coordinator, and is open to educators from throughout Africa. To date educators from Ethiopia, Ghana, Kenya, Malawi, Nigeria, Sierra Leone, Gambia, Uganda, Zambia, South Africa, Palestine, Madagascar, and Zimbabwe have been trained. The 9-week course covers teaching, communication and computer skills as well as refraction and eyecare. Trainers are also provided with educational materials to take away with them. In the last year 14 trainees from 8 countries have been trained. ICEE now has 23 trainers in 14 countries, and to date the 23 trainers have in turn trained 84 ophthalmic nurses.
Stanger Clinic

Stanger Eye Clinic in South Africa is the only eyecare facility within an 80-kilometer radius, serving a predominantly rural population of about 1 million people with an unemployment rate of at least 38%. ICEE Community Optometrist, Yashika Inderjeet, has established the Clinic at Stanger Hospital. The Stanger Hospital’s general practitioners refer virtually all eyecare to Yashika, and her dedication has earned respect across the medical profession in the district. The Clinic will be used to provide a model for eyecare in the public sector in South Africa, including school screening and other community initiatives in eyecare. To date over 2,000 patients have been seen and 310 supplied with glasses.

A population-based study, which started mid-2001, is being carried out in the Stanger Regional Health District of Kwa-Zulu Natal in South Africa. This study will determine the prevalence of visual disorders in this region and the data generated will be used to develop a model for effective eyecare delivery in South Africa and Africa. All patients requiring spectacles in this study will be provided with ICEE’s Low Cost Spectacles. Another study is being conducted with the recipients of spectacles to assess the effectiveness of the Low Cost Spectacles.

Tanzania

ICEE Volunteer Optometrist, Mr Tim Fricke spent nine months at the KCMC School of Optometry, which is the only optometry training school in Eastern and Central Africa. KCMC takes students from throughout Tanzania, Zanzibar and neighbouring countries, and ICEE supported the school both financially and academically.

This includes:

- Infrastructure and program improvement: ICEE is upgrading the existing optometry curricula, educational facilities and materials, and will conduct training for KCMC educators.

- Establishing KCMC as a Centre of Excellence: KCMC is already in a role of prominence, being the only eyecare training facility in Eastern and Central Africa. ICEE will help KCMC to develop this role by providing training for other African countries; and establishing KCMC as a base for Community Optometrist activities and the distribution point for ICEE Low Cost Spectacles.

- Community Optometrist Model. This was launched in July 2001, with the employment of Damas Mworia as a Community Optometrist in Arusha. ICEE has equipped Damas with a mobile eyecare testing kit which includes an ophthalmoscope and trial case which will help him conduct thorough eye examinations across the region. Almost 5,000 people have been seen this year, with over 600 provided with glasses.
The Community Optometrist program has collected data which suggests that self-sustainability is achievable for the optometrist, and it is ICEE’s intention to expand the program by employing more community optometrists within rural communities in Tanzania. In-depth analysis will allow ICEE to develop a working model for primary eyecare delivery in Tanzania, which can be adapted and tailored for the rest of Africa.

In June 2002, ICEE supported the attendance of 10 optometrists to the Vision 2020 Community Eye Health Workshop in Tanzania entitled ‘Creating and Implementing District-based Plans for Prevention of Blindness’. This workshop is conducted by Tumaini University and the London School of Hygiene and Tropical Medicine, and successfully brought together optometry, ophthalmology and other eyecare providers in Tanzania to enable collaborative planning for selected health districts.

ICEE’s Director of Africa, Dr Kovin Naidoo conducted presentations on:
- The definition and magnitude of significant refractive error in school children in eastern Africa
- The principles of school screening program for the detection and treatment of significant refractive error in children.

ENABLING RESOURCES

Low Cost Spectacles

Effective delivery of refractive eyecare services is dependent on the provision of affordable vision correction devices. While spectacles are the simplest method of vision correction, in many areas of the world, glasses are either not available, inappropriate, or are too expensive. The ICEE Low Cost Spectacle Program is delivering affordable glasses to overseas communities and for many of Australia’s indigenous communities.

Following extensive research on regional spectacle requirements and availability, ICEE has developed a range of affordable, good quality spectacles and has set up warehouses in Sydney and Africa from which the glasses are distributed internationally through ICEE and other relevant programs and non-government organisations.

The price of the glasses is negotiable depending on the buyer’s ability to pay. Donations and fund-raising also enable ICEE to provide glasses free of charge or at a subsidised rate to communities in need. ICEE also aims to use the Low Cost Spectacles to establish sustainable eyecare services for communities in need. The ICEE Spectacles will be an important part of a model that enables eyecare practitioners in developing countries to sell the glasses to continue their activities, as well as assisting in delivery to disadvantaged people.


Human Resources Development

Refraction Programs: In many areas of the world there is no optometric infrastructure and the rate of growth of uncorrected refractive error exceeds the rate at which fully-qualified optometrists can be produced. In such circumstances there is a need to train refractionists to be part of primary eyecare teams to help address this problem. ICEE is developing a series of graded refraction training programs to meet this need.
The ICEE Basic Refraction Course has been designed to train personnel in subjective, best vision sphere refraction and the selection, adjustment and care of the most appropriate pair of low-cost readymade spectacles. The emphasis of the course is to provide adequate training to get effective personnel into the field in the shortest time, at the lowest cost and reliant on basic refraction equipment. There have been several expressions of interest in the Course by government officials of the Western Pacific Region.

The ICEE Primary Refraction Course provides more theoretical grounding and includes training in refraction for the correction of astigmatism. As in the Basic Refraction Course, the selection, adjustment and care of low-cost readymade spectacles is covered. This course has been run in Vanuatu as part of the Fred Hollows Foundation ophthalmic nurse training program.

The ICEE Intermediate Refraction Course is still being developed and will include retinoscopy and basic binocular vision assessment.

Eyecare Programs: Primary Eyecare for the Western Pacific Region was originally developed following a series of discussions with the East Timor Division of Health Services (now the East Timor Ministry for Health). A pilot course was successfully delivered in East Timor in June 2002 and following further discussions with the Ministry for Health, ICEE has been invited to deliver the course again in late 2002. There have been minor revisions and expansion to the material based on evaluation data gathered during and on completion of the 10-day pilot program and the course is now applicable to the Western Pacific Region as a whole.

Community Eye Screening for the Western Pacific is a program modelled on the ‘Village Vision’ initiatives being developed by the LV Prasad Eye Institute in Hyderabad, India. The ICEE version is more comprehensive than ‘Village Vision’ while remaining within the bounds of achievability for a community-based program. Skills taught include screening for vision and eye problems; referral criteria; selection of presbyopic correction; and the supply, adjustment and care of low-cost spectacles for presbyopia. Expressions of interest in running a pilot program have been received from several Western Pacific nations.

ICEE PROFESSIONAL EDUCATION

PRESBYOPIA EDUCATION

The Presbyopia Education Program (PEP) is a collaborative project between ICEE and Essilor International to deliver education about presbyopia (the age-related inability of the eye to focus on near objects) and its management to Asia Pacific eyecare practitioners and educators. The program targets both practitioners and educators.

PEP Aims:
- To deliver quality education about presbyopia and its treatment to eyecare practitioners.
- To deliver quality education to eyecare educators, so that presbyopia training will reach the next generation of practitioners, and will become an ongoing part of the curriculum.
- To develop educational materials, which will support the delivery of high quality education and up-to-date information, including materials in the local language and in multimedia.
- To enhance the eyecare delivered to communities, by improving the training of eyecare practitioners and educators.
- To enhance the standing and performance of the eyecare profession.
- To support the development of the eyecare industry in the Asia Pacific region.
During the year ICEE completed delivery of the Presbyopia Education Program for ophthalmic practitioners in Asia Pacific and created and implemented the next phase of practitioner education under the auspices of the Varilux Academy Asia Pacific on behalf of Essilor. The program expands the curriculum to include lectures and workshops customised for each target country in Asia Pacific, in the areas of ophthalmic practice management, optical consumer behaviour and ophthalmic sales and marketing strategies.

The Educator Presbyopia Education Program reached 147 educators in 34 ophthalmic teaching institutions in seven countries during the past year. The preparation of the 8 Modules of Optometric education was completed this year. Translation into Chinese Complex, Bahasa Indonesian and Malay, Korean and Japanese will now commence. The completion of the 32 week Ophthalmic Lens curriculum in English, Korean and Chinese Simple was achieved and so far delivered to 10 ophthalmic teaching institutions.

OPTICAL INDUSTRY IN AUSTRALIA

ICEE is involved in a project to investigate the barriers to growth of the contact lens business in Australia, and to develop practitioner education programs to target such barriers. Growing the Australian Contact Lens Market (GACLM) is being undertaken in collaboration with the Cooperative Research Centre for Eye Research and Technology, the Institute for Eye Research, and the Medical Industry Association of Australia (Contact Lens Industry Council). A pilot educational program commenced in 2002 with 30 practitioners. The program will test strategies in each practice to increase contact lens use and practice profitability. Training and management consultancy services will be provided to participating practices for the duration of the project.

A WORD FROM OUR VOLUNTEERS

Volunteer work is an important part of ICEE’s programs, and ICEE is developing a database of potential volunteers around the world. Volunteers have contributed to a range of ICEE activities, including the delivery of eyecare in East Timor and Vanuatu, and the development of eyecare education in Africa.

Tim Fricke
Tanzania, 2001-2002; Senior Optometrist and Head of Paediatric Services, Victorian College of Optometry

I had the opportunity to volunteer my services to ICEE between August 2001 and August 2002. They told me I could do useful things in Tanzania, East Africa. I had no idea where Tanzania was let alone what it was like. But I like a challenge, so off I went to Africa with all the misconceptions we get from our TV (thinking that all of Africa is constantly at war or...
I feel privileged to have had the opportunity to work in such a complex mix of cultures, religions, languages, environments, economic opportunities, poverty and post-colonial hang-ups. My work centered on facilitating local people to reorganize and invigorate primary eyecare education and service delivery for the region. My year in Africa with ICEE was a richly rewarding and intriguing experience for me, and also (I think) the people I worked with.

Tanzania is highly religious (45% Christian, 40% Muslim, the rest are Hindu or have traditional beliefs) and almost entirely (90%) rural. During my time there I was touched by the way that simple, small-scale eyecare provided by ICEE brightens peoples' lives by allowing them to see their Bible or Koran. But I was truly energized by the importance of eyecare in the bigger picture: eyecare is integral to development. Education levels are low in Tanzania (only 50% of people finish primary school, and a tiny 3% finish high school). Sustainable development requires improved education, and amongst other things education requires decent eyecare. Without clear, comfortable access to the written word, 90% of Tanzanians will remain poor, illiterate peasants ad infinitum. They will continue to die from diseases that don't need to exist in the 21st century (average life expectancy in Tanzania is 52 years).

ICEE is taking some chances sponsoring small-scale eyecare projects. Some work, some don't. But what impressed me was that they were willing to try, and to learn from success and failure. Learning lessons along the way, they were also ready to commit to long-term eyecare education and service delivery that will work. To me, the best thing about that is that eyecare education and development will facilitate Africans to be in charge of their own broader community, industrial and technological development.

I found the most rewarding aspect of my time there to be the interplay between big picture and small picture. Some days I planned and produced eyecare education programs that will train any number of eyecare workers over the coming years. Then other days I saw local people, who I had helped to educate, provide sight-saving eyecare to their own communities in their own languages. It was small picture meeting big picture to provide a better view of what Africa can be in the future. Ad infinitum.

Andrew Koch
East Timor Eye Program, 2002; Optometrist, Hobart

I went to East Timor in June 2002 as part of the ICEE team.

As a volunteer I had the opportunity to jump into the deep end and get involved in a project that required me to think, adapt, and cope with new situations. This was an opportunity to use my expertise in a deeper way. It meant being in another culture, working with interpreters, lots of retinoscopy, hand gestures, hard work and aching body parts.
My participation in this project has changed my outlook on life in many ways. It stretched me physically, emotionally, culturally and professionally. I saw things that wrenched my heart, and I found stores of inner strength that I had not seen for a long time. I learned something of some new languages. I ate peanut pancakes, fish and rice, laughed with my team members and I helped people to regain useful sight. I saw blind people see clearly again, their lives and mine changed. These moments were very satisfying, and I will never forget them.

Get involved in this type of project, don't remain unchallenged and unaffected. Life is short, the need is great, and the opportunity is there!

**ADMINISTRATION, MARKETING AND FUNDRAISING**

ICEE headquarters is based in Sydney, and ICEE staff and volunteers provide support for programs and collaborators around the world.

In October 2001, ICEE also established a Marketing and Fundraising Office based in Melbourne at the offices of the Christian Blind Mission International. Since this time Greg Campitelli, Director of Development and Yvonne Lockwood, ICEE Volunteer, have established a number of programs and worked to improve ICEE’s communication with relevant groups, the profession and the public. Communication projects have included the production of a quarterly newsletter, and the updating of the ICEE website (http://www.icee.org/).

**Optometry Giving Sight**

The Optometry Giving Sight campaign was developed to involve optometrists in the work and support of ICEE. ICEE has now been officially endorsed by the Optometrists Association Australia, and many members are joining the campaign. Optometry Giving Sight calls on all those involved with the optometric profession to work with ICEE by:

- Advocating optometry's role in blindness prevention
- Becoming a financial supporter
- Making in-kind contributions of new stock or equipment
- Volunteering on domestic and international programs.

ProVision, a network of independent optometrists in...
Australia, has also selected ICEE as its preferred charity. All donations made by ProVision members who join Optometry Giving Sight fund a specific project such as the establishment of an Eye Clinic or the development of a School of Optometry.

**Sunglasses For Sight**
This year 50 Victorian schools, representing more than 12,000 students, participated in ICEE’s inaugural "I See For East Timor Day". Students raised money by donating a gold coin to wear sunglasses to school or create their own designer fun pair. Over $11,000 was raised to support ICEE’s East Timor Eye Program. The day was held to coincide with the festivities as East Timor celebrated its first Independence Day on 20 May this year. Schools that raised the highest amounts per student received prizes kindly sponsored by Sports Force.

**Corporate Supporters**
Essilor have been a major sponsor of ICEE’s Professional Education since its inception in 1998. Their generosity has allowed ICEE to make major achievements in this area.

Hoya and Marchon have supplied large stock donations of lenses and frames which will be used in countries such as East Timor and South Africa, to help solve the immediate problem of supplying glasses to people who need them to see. Marchon Managing Director Peter Lewis recently announced that the company will continue to donate significant quantities of frames to ICEE on a regular basis.

**South Africa**
Susanna Coleman was appointed to lead the marketing and fundraising effort in South Africa. The focus of the work has been to introduce ICEE to both the public and the optometric profession. ICEE is working closely with the South African Optometric Association and is moving towards receiving official endorsement. ICEE has increased the awareness of unavoidable blindness by bringing it to the attention of the South African public through South African media. ICEE has also liaised with government to promote optometry. Specsavers donated T-shirts to 5,000 children seen in the Refractive Error Study of Children in Africa (RESCA) study and have more recently undertaken ongoing sponsorship of ICEE activities.
Operating statement
For the year ended 30 June 2002

<table>
<thead>
<tr>
<th></th>
<th>2002</th>
<th>2001</th>
</tr>
</thead>
<tbody>
<tr>
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<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Revenue</td>
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<td></td>
</tr>
<tr>
<td>Donations and gifts</td>
<td>537,425</td>
<td>5,367</td>
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<tr>
<td>Grants</td>
<td>88,966</td>
<td>114,628</td>
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<tr>
<td>Other Australian</td>
<td>157,944</td>
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<tr>
<td>Other overseas</td>
<td>13,578</td>
<td>99,910</td>
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<tr>
<td>Investment income</td>
<td>7,516</td>
<td>8,925</td>
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<tr>
<td>Other income</td>
<td></td>
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<tr>
<td>Sale of goods</td>
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<tr>
<td>Commercialisation proceeds</td>
<td>2,035,543</td>
<td>2,018,262</td>
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<tr>
<td>Miscellaneous</td>
<td>184,562</td>
<td>71,544</td>
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<tr>
<td>Total revenue</td>
<td>3,025,534</td>
<td>2,330,674</td>
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<tr>
<td>Disbursements</td>
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<tr>
<td>Overseas projects</td>
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<td></td>
</tr>
<tr>
<td>Funds to overseas projects</td>
<td>301,207</td>
<td>124,792</td>
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<tr>
<td>Other project costs</td>
<td>896,512</td>
<td>918,920</td>
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<tr>
<td>Domestic projects</td>
<td>487,957</td>
<td>523,073</td>
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<tr>
<td>Fundraising costs (public)</td>
<td>143,915</td>
<td>40,640</td>
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<tr>
<td>Administration</td>
<td>689,542</td>
<td>1,543,922</td>
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<tr>
<td>Total disbursements</td>
<td>2,519,133</td>
<td>3,151,347</td>
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<tr>
<td>Excess of revenue over disbursements</td>
<td>506,401</td>
<td>(820,673)</td>
</tr>
<tr>
<td>(shortfall)</td>
<td></td>
<td></td>
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<tr>
<td>Funds available for future use at the beginning of the financial year</td>
<td>(555,363)</td>
<td>265,310</td>
</tr>
<tr>
<td>Funds available for future use at the end of the financial year</td>
<td>(48,692)</td>
<td>(555,363)</td>
</tr>
</tbody>
</table>

Gifts in-kind and volunteer services
Amounts relating to gifts in-kind of $138,215 and volunteer services of $176,195 have not been included in the Operating Statement above.

Full financial statements can be obtained from ICEE, PO Box 328, Randwick NSW 2031.

Statement of financial position
As at 30 June 2002

<table>
<thead>
<tr>
<th></th>
<th>2002</th>
<th>2001</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Assets</td>
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<td></td>
</tr>
<tr>
<td>Cash</td>
<td>40,346</td>
<td>667,675</td>
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<tr>
<td>Plant and equipment</td>
<td>22,193</td>
<td>42,362</td>
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<tr>
<td>Other</td>
<td>317,562</td>
<td>406,779</td>
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<td>Total assets</td>
<td>380,101</td>
<td>1,116,816</td>
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<td>Liabilities</td>
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<tr>
<td>Creditors and borrowings</td>
<td>334,839</td>
<td>1,648,569</td>
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<tr>
<td>Provisions</td>
<td>94,224</td>
<td>23,610</td>
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<tr>
<td>Total liabilities</td>
<td>429,063</td>
<td>1,672,179</td>
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<tr>
<td>Net liabilities</td>
<td>(48,962)</td>
<td>(555,363)</td>
</tr>
<tr>
<td>Equity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Funds available for future use</td>
<td>(48,962)</td>
<td>(555,363)</td>
</tr>
<tr>
<td>Total deficiencies in equity</td>
<td>(48,962)</td>
<td>(555,363)</td>
</tr>
</tbody>
</table>

No single appeal or other form of fund raising for a designated purpose generated 10% or more of the total income for the period under review.
Independent audit report to the members
of International Centre for Eyecare Education

Audit opinion
In our opinion, the information reported in the summarised financial report is consistent with the annual statutory financial report from which it is derived and upon which we expressed our audit opinion in our report to the members dated 6 December 2002. For a better understanding of the scope of our audit this report should be read in conjunction with our audit report on the statutory financial report.

Scope
We have audited the summarised financial report of International Centre for Eyecare Education Ltd for the year ended 30 June 2002 in accordance with Australian Accounting Standards.

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Facsimile +61 2 8266 9999
Direct phone 8266 5200

A J Sneddon
Partner
Sydney
5 December 2002
ICEE wishes to thank all those individuals, communities and companies who have supported ICEE in the past year. Without your assistance, ICEE would not be able to achieve its goal of Giving Sight.

**Partners**
- Centre for Contact Lens Research, University of Waterloo, Canada
- Cooperative Research Centre for Eye Research and Technology, Australia
- LV Prasad Eye Institute, India

**Professional**
- Optometrists Association Australia (National Body; New South Wales Division; Queensland & Northern Territory Division; South Australia Division; Tasmania Division; Victoria Division & Western Australia Division)
- ProVision
- Royal Australian and New Zealand College of Ophthalmologists (NSW)
- Royal Flying Doctors Service
- School of Optometry and Vision Science, UNSW

**Industry**
- Essilor International
- Farmer's Best, Waterloo
- Freshpoint Markets, Maroubra Junction
- Hong Hanh Hot Bread, Maroubra Junction
- Hoya Ltd
- i-media
- Marchon Ltd
- Original Juice
- Paddy's Meat Market, Maroubra Junction
- Sports Force
- The Institute for Eye Research

**Government**
- Aboriginal Health and Medical Research Council
- Aboriginal Medical Services
- Commonwealth of Australia
- Federal Department of Health and Ageing, through the Office of Aboriginal and Torres Strait Islander Health NSW
- Health Insurance Commission
- NSW Department of Community Services
- National Eye Institute (USA)
- Commonwealth Government Cooperative Research Centres Program
- The University of New South Wales

**NGOs**
- Centre for Eye Research Australia
- Christian Blind Mission International
- Optometric Vision Research Foundation
- Sight Savers International
- The Fred Hollows Foundation
- VisionCare NSW

**Individuals**
- NSW Aboriginal Vision Program Optometrists
- NSW Aboriginal Eye Health Coordinators
- Tom Cleary
- Michael Copland
- Jennie Diec
- Bernie Eastwood
- John Egan
- Tim Fricke
- May Ho
- Kristy Holden
- John Holland
- Angel Hu
- Hanna Ji-Yeung Kim
- Joanne Kim
- Andrew Koch
- Sophie Koh
- Michael Lea
- Yvonne Lockwood
- Michael McGuirk
- Genevieve Napper
- Dr Tekaai Nelesone
- Nicholas Nguyen
- Thien Nguyen
- Margie O'Neill
- Catherine Pham
- Rowan Prendergast
- Dr Richard Rawson
- Dr John Szetu
- Dr Nitin Verma
- Rebecca Wong
- Carley Wood
- Jamilla Yeung
- Maya Zakzouk
- Refractive Error Working Group Members
In Memoriam – Ashok Moodley
(by Brien Holden)

It was with much sadness we farewell Ashok Moodley, who passed away this year. Ashok played a very important part in ICEE Africa. Ashok was an achiever, a doer, and always friendly, always hospitable. He helped so many people in his role with ICEE that he earned everybody’s respect and gratitude. He was without doubt one of the most versatile people we have ever met. Nothing was too much trouble or beyond his reach if it came to helping someone or overcoming obstacles. In large part all the people who have had their lives enriched by seeing better as a result of the teachers that have been trained by ICEE, the children in the refractive error study that have been helped and the patients seen at Stanger and other places, owe a debt of gratitude to Ashok, as do all of us.

On my last trip to Durban earlier this year, I had the pleasure of spending a little time with Ashok and his son. It was a delightful evening and I took the opportunity to tell Ashok how much we appreciated him and the things he had done for ICEE, for Africa and for blindness prevention. I asked his son how his Dad rated as a Dad, on a scale of 0 to 10. Without embarrassment he said an emphatic 10. That’s how we all came to know Ashok, a wonderful person who achieved an incredible amount in the all too short a time he was with us.

We shall miss him immensely; he was, as we say in Australia, a great bloke. Our hearts go out to his wife Tilly and their three sons for their terrible loss. Farewell Ashok.
ICEE OFFICES

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Kensington NSW 2033 Australia
Email: icee@icee.org
Prof. Brien Holden – CEO (in-kind contribution)
Yvette Waddell – Executive Director
Prof. Brian Layland
Katherine Costello
Les Donovan
Edwina Hart
Jacqueline Ramke
Colina Waddell
Cynthia Willis
Fiona Dimond (02/2002)
Jane Kelly (01/2002)
Beverley Lombard (02/2002)
Rashelle Toms (01/2002)

Public Health Melbourne Office
1245 Burke Road, Kew VIC 3101, Australia
Gregory Campitelli
Yvonne Lockwood (in-kind contribution)

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Vallam Rao – Director, School of Optometry

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Dr Charlie Ho – Coordinator Philippines

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School of Optometry and Ophthalmology
Eye Hospital of Wenzhou Medical College
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Wenzhou, Zhejiang, PRC 325027 China
Chen Hao – Coordinator China

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Dr Cheni Lee – Coordinator Indonesia

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Email: icee@icee.org
Craig Butler - Director of Professional Education

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University of Durban Westville
University Road, Private Bag X54001
Durban 4001 South Africa
Email: icee@iceeafrica.co.za

Africa Community Optometrists
Yashika Inderjeet
Damas Mworia

Refractive Error Study in Children
Mzwakhe Dube
Nano Gabella
Amanda Govender
Bongani Hlongwa
Preyma Khanyile
K Percy Mashige
Mrul Mazibuko
A Ragunandan
Justice Nxumalo (04/2002)
Dr Prashant Sahare (05/2002)

Optometrists
K Mudaly
Sifiso Vilakati (02/2002)