Founded in 1998, the International Centre for Eyecare Education (ICEE) is a not for profit, non-government organisation. ICEE is committed to working with local partners in the development of sustainable solutions to eliminate avoidable blindness and vision impairment, particularly due to uncorrected refractive error.

Our Vision
Our vision is a world in which avoidable blindness and vision impairment do not limit any person’s well-being, personal development, employment and leisure, and family and community involvement.

This is a world in which all people are aware of and are able to exercise their right to sight.

Our Mission
Our mission is to eliminate avoidable blindness and vision impairment, particularly due to uncorrected refractive error.

The Challenge
In the world today, there are 45 million blind people. A further 135 million people have significant vision impairment. Shockingly 80% of the world’s blindness is preventable.

People who live in developing countries are 5-10 times more likely to go blind than people from the developed world. Blindness has a personal, social and economic impact for these people, their families, and the communities in which they live.

Uncorrected refractive error, which can be remedied with spectacles, accounts for about 6 million of those blind, and 100 million people with significantly impaired vision.

If action is not taken, the number of people with blindness and vision impairment will double by the year 2020.

The good news is that treatments for the prevention of blindness are the most successful and cost effective of all health interventions.

Our Strategy
- Create vision-related interventions that consistently deliver quality outcomes;
- Educate individuals, communities, organisations and governments in the possibilities for, and practicalities of, these interventions;
- Create opportunities for people in need to access these interventions;
- Collaborate with other partners and institutions.

Our programs support the development of eyecare and its uptake by local people, through human resource and infrastructure development, and community education.
Message from the Chair

PUBLIC HEALTH
- Countries Where ICEE Works
- Summary of Achievements
- Vision 2020
- ICEE Operations
- ICEE Africa
- Country Programs
  - Eritrea
  - Cambodia
  - Timor Leste
  - Solomon Islands
  - Fiji
  - Cook Islands
  - Vanuatu
  - Tuvalu
  - Indigenous Australia
- Marketing and Fundraising

PROFESSIONAL EDUCATION
- Message from the Director
- 2003/2004 Highlights
- Essilor’s Involvement
- Integration and Synergy
- Professional Education Programs
- Our Approach
- Our Network
- Board of Directors and Executive
- Financial Statements
- Acknowledgments
- ICEE Offices and Staff
“The importance of good vision to living a happy and fulfilled life is immeasurable. For most of us – especially in the developed world – it’s something we take for granted.”
Governor General of Australia, Major General Michael Jeffery, in an address to the Vision CRC.

Unfortunately, in the developing world impaired vision is a fact of life for far too many people. Impaired vision has dire consequences not only for the individuals directly affected but also the family members who become responsible for their loved ones, and the community that must provide support and that loses a productive member of society.

Due to the lack of eyecare services in the developing world, needless preventable blindness continues to block individuals from achieving their potential. ICEE, however, is helping to bring much needed eyecare to communities throughout the world, particularly within the Pacific Region, Africa and Asia.

ICEE works together with local governments, health facilities and other blindness prevention agencies to develop essential eyecare and blindness prevention services, particularly associated with refractive error. Most importantly, ICEE is committed to sustainability and collaboration, sharing resources and skills to develop the services needed to provide high quality, ongoing eyecare for all communities.

Within Australia, ICEE’s Public Health arm, under the leadership of Dr Garry Brian, has this year seen an emphasis on consolidation and the channeling of our energies within the three main areas of our operations: Education, Affordable Readymade Spectacles and Aboriginal Eyecare.

Renee du Toit is responsible for ICEE’s Education Program and works together with eye health workers to design courses based on the fulfillment of local eyecare needs. Complementing Renee’s eyecare training, Jacqui Ramke continues to research Affordable Spectacles and to develop the necessary purchasing systems with local eye health practitioners. The training of eyecare practitioners and the availability of affordable spectacles together provide the human resources and technology so that people from developing countries can obtain the vision correction they need.

In Aboriginal Eyecare, Professor Brian Layland continues to work with the Aboriginal Health and Medical Research Centre to successfully deliver eyecare to Aboriginal people throughout New South Wales.

2003/2004 was a year of significant achievement for the Professional Education arm of ICEE. The Professional Education team, led by Craig Butler, continued to improve the knowledge and skills of vision care practitioners, educators and industry personnel through the development and delivery of innovative education programs that increase local capacity to provide quality vision care.

Greg Campitelli and the Melbourne Marketing team gained immense exposure and publicity for ICEE throughout the
year, culminating in the very successful ‘Sunnies for Sight’ campaign, involving over 400,000 people.

ICEE continues its involvement as a core partner in the Vision Cooperative Research Centre (Vision CRC). ICEE, together with core partners, India’s LV Prasad Eye Institute and Melbourne’s Centre for Eye Research Australia, have kicked off the Vision Care Delivery project of the Vision CRC.

This project aims to identify current barriers to effective eyecare services in particular communities, and develop and evaluate models to improve these services. In the first year of the Centre, researchers have concentrated on the development of tools for health economic analysis, including costs and utility of vision-related quality of life.

One of ICEE’s Board members, Dr Nag Rao, has recently been appointed as the Chief Executive Officer of Vision 2020. ICEE warmly congratulates our great friend and colleague on his appointment. Nag is famous in the eye health sector for his vision of a future where everyone around the world receives the same high standard of eyecare. Nag is also renowned for his ambition in founding and building LV Prasad Eye Institute and for his dedication to the International Agency for the Prevention of Blindness (IAPB).

Vision 2020, both globally and within Australia, continues to lobby for the prevention of avoidable blindness by the year 2020. Well over half of the cases of visual impairment worldwide are associated with people not having a pair of glasses. Vision 2020 has worked miracles in the last five years and driven the recognition of refractive error as one of the leading causes of preventable blindness.

The achievements for ICEE in 2003/2004 have been exceptional and would not have been possible without the hard work of ICEE’s team of board members and staff. A special thankyou should be made to Colina Waddell and her administrative team for providing the professionalism and skill to enable all ICEE’s operations to proceed. We also thank ICEE’s volunteers who have been inspired to contribute their time and energy to our programs. Our supporters and sponsors are also thanked for their generosity and contribution to achieving our goal of eliminating blindness due to refractive error.

We look forward to expanding our programs and collaborative relationships in regions of need, and to our continued involvement in the Vision CRC. Together with our training programs and the implementation of affordable spectacles systems, we hope that these efforts will help to take away the burden of unnecessary blindness for many people.

Brien A Holden, OAM, chair
PUBLIC HEALTH

...supporting the development of eyecare and its uptake, through human resource and infrastructure development, and community education
COUNTRIES WHERE ICEE WORKS

Where ICEE works

Australia
Fiji
Vanuatu
Tuvalu
Solomon Is.
Papua New Guinea
Timor Leste
Cambodia
India
Tibet
Tanzania
South Africa
Eritrea

Where ICEE has worked

Tonga
Cook Is.
Samoa
Vava'u
Fiji
Vanuatu
Tonga
SOUTH AFRICA
April 04
The Train the Trainer program conducted by ICEE Africa was evaluated as part of an ongoing review of all ICEE training programs.

ERITREA
April 04
Refraction training was enhanced, and evaluation of August 2003 implementation was conducted. Recommendations were made to Eritrean Ministry of Health for the development of refraction services. This was conducted in partnership with the Fred Hollows Foundation.

CAMBODIA
March 04
An ICEE Optometric Technical Advisor collaborated with the Cambodian Prevention of Blindness Committee and Cambodian Optometrists Association for six months to strengthen their refractive error programs. This was conducted in partnership with Christian Blind Mission.

TIMOR LESTE
July 03
Primary eyecare training was conducted for 15 nurses. An affordable spectacle program was established at National Hospital, Dili.
Aug 03 – June 04
Two Timorese nurses graduated from a year of eyecare training at LV Prasad Eye Institute, Hyderabad, India.
January 04
An agreement was signed between ICEE and Timorese Ministry of Health to develop the National Eyecare Plan.
April 04
ICEE provided support for a Timorese Ministry of Health representative to attend a one-month eyecare planning and management module at LV Prasad Institute.

PNG
December 03
An audit of Port Moresby General Hospital’s eye clinic’s equipment and services was conducted, and the University of Papua New Guinea’s Ophthalmology department was assessed.

SOLOMON ISLANDS
September 03
A refraction training course was conducted for 15 eye nurses. Six sets of refraction equipment were donated, and a seed donation made of affordable ready made spectacles.

VANUATU
April 04
Nine eyecare nurses were trained to enable them to train others in the identification and management of common eye conditions. Six general nurses were then educated by the eye nurses during the course.

TUVALU
July 03
ICEE optometry volunteers joined Royal Australian College of Surgeons in service delivery. 550 patients had vision checks and where necessary spectacles were provided.

FIJI
Oct 03
A Community Awareness Survey was conducted in 172 households to determine awareness of eyecare facilities and willingness to visit services and pay for spectacles.

COOK ISLANDS
May 04
A “Training of Trainers” course in primary eyecare was conducted for seven Western Pacific eyecare nurses. A five day primary eyecare course for 20 Cook Islands’ nurses was held, enabling the eye nurses to practice their training skills.
Vision 2020: The Right to Sight is a worldwide initiative that strives to eliminate the major causes of 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 numerous international non-governmental development organisations, this international program coordinates parties to combat blindness. Vision 2020 partners share the following goals and strategies:

- Increase awareness that blindness is a major public health problem
- Control the six most common causes of blindness for which cost-effective solutions are currently available – cataract, trachoma, onchocerciasis (river blindness), childhood blindness, refractive errors and low vision
- Mobilise financial and other resources needed to strengthen, expand and sustain blindness prevention programs and eyecare services
- Create infrastructure to support programs and services
- Provide training for new and existing eyecare providers.

As a Taskforce member of Vision 2020: The Right to Sight, ICEE provides expertise and resources to Vision 2020 administrative and technical committees at the international level, including the:

- Global Task Force
- Refractive Error Working Group
- Cataract Working Group
- Resource Mobilisation Committee
- Communication Committee
- “Giving Sight” Fund-raising Collaborative.

One of ICEE’s major contributions to Vision 2020 is through the Refractive Error Working Group (REWG). This expert technical committee informs Vision 2020 partners about the epidemiology of refractive error and develops strategies to include vision services and spectacle correction in Vision 2020 programs. ICEE chairman Professor Brien Holden co-chairs the REWG with Dr Serge Resnikoff, Director of WHO Blindness and Deafness programs, while ICEE serves as the Secretariat to the Working Group.

This year Professor Holden and Dr Kovin Naidoo contributed to Vision 2020 Task Force Meetings held in Hyderabad (July 2003) and Geneva (February 2004). The REWG continued to develop and refine strategies for the global elimination of uncorrected refractive error to be incorporated into National Vision 2020 Programs for the Prevention of Blindness. In September 2003, the REWG met at WHO Headquarters in Geneva to discuss the quality and availability of data on the regional distribution and risks of uncorrected refractive error, and to review strategies for reaching at-risk groups, training eye care providers, accessing appropriate technology and delivering vision services and spectacles. Countries will consider these recommendations when developing and implementing National Vision 2020 Programs for the Prevention of Blindness.

The ‘Consultation on Standards for Characterization of Visual Standards for Vision Loss and Visual Functioning’, was also held in Geneva to develop standards for measuring and reporting visual loss and impairment. Professor Holden presented a paper on “Quantitative Characterization of the Clinical Dimensions of Vision Loss”. As a result of the meeting the definition of blindness was formally extended to include vision loss due to uncorrected refractive error.

Collaboration

ICEE OPERATIONS

EDUCATION PROGRAM

ICEE works together with local health care personnel to plan courses targeted to local eyecare needs and course participants. Aiming to improve the eyecare available to local communities, ICEE provides participants with the necessary skills and knowledge to be able to identify and manage common eye conditions, perform refraction, prescribe appropriate vision correction, and refer patients as necessary.

ICEE courses are competency based and a problem-based approach, case studies and group discussion are used to ensure skills can be applied under a range of conditions. Emphasis is placed on good patient communication and attitudes such as conscientiousness, patient care, and personal confidence.

The design and implementation of ICEE training courses adhere to the following principles:

- clear goals and expectations are established;
- course objectives are aligned with learning activities and assessment;
- active learning methods are used, emphasising practical application of skills, knowledge and attitudes;
- a supportive environment that considers the diversity of participants is created;
- autonomy and generic skills (e.g. communication and problem solving) are enhanced;
- the effectiveness of training is checked through knowledge assessments conducted throughout the course; and
- ICEE aims to continually improve its training through course evaluation by participants.

Participants emerge with practical and effective skills, and are further provided with the required materials, equipment and support to ensure they can immediately implement their new knowledge in their community. After participants have used their new skills for a period of time, their activities are evaluated and refresher training provided to ensure that high standards of care are maintained.

AFFORDABLE SPECTACLE PROGRAM

Most people never consider the extensive network of systems that make purchasing a pair of spectacles possible in a country such as Australia.

Generally, these systems do not exist in developing countries. As a result, spectacles are not widely available or affordable.

For this reason, in conjunction with Government Health Departments in countries such as Timor Leste, Papua New Guinea, Cambodia and Tuvalu, ICEE is researching and investigating:

- the policy and legal framework of spectacles,
- their selection, procurement, distribution and use; and
- supporting human resources, information and financial management systems.

The aim is to facilitate the efficient, equitable and sustainable provision of quality spectacles to all who require them.
ICEE AFRICA

Across Africa Public Health systems suffer from a lack of almost every resource: personnel; equipment; consumables; and infrastructure. To compound this, eyecare has been one of the health care areas particularly neglected. Many eye conditions are not obvious. Frequently they are not painful, so they are easily overlooked in importance, but many of them, if untreated, will result in someone going needlessly blind.

In many areas of Africa it has been estimated there is only one practitioner to 1.5 million people. In practical terms, however, this is often higher as the majority of practitioners are in the private, urban clinics and therefore not an option for many poor or rural people.

Within Africa, ICEE operations focus on four main areas: advocacy with government and training institutions; training of personnel; community based service delivery; and research.

Advocacy

Currently ICEE works with the South African Department of Health (DOH) and is forging links with other governments in the region. Until three years ago, optometry didn’t exist as a position in public hospitals in South Africa. ICEE successfully lobbied National and Provincial Departments of Health to establish the position, and assisted in the recruitment of personnel and the procurement of equipment.

Many of the key players were unaware of the huge need for eyecare services, so in consultation with the DOH, ICEE developed optometry clinics within hospitals. The success of these clinics has convinced individual hospitals of the need for eyecare services. The hospitals then become champions of the concept, lobbying the DOH for funds to equip and staff clinics. As each hospital creates a new clinic, ICEE is then able to move its resources to an under-served area and repeat the process. This is an effective way of creating awareness and practical advocacy and at the same time being able to provide services to those in need.

In the last year ICEE has handed 10 clinics over to Government-employed optometrists. ICEE is also lobbying for new optometric graduates to embark on community services and for the DOH to improve the salary packages for optometrists.

Training

As eyecare personnel are in short supply, ICEE has developed a “Train the Trainer” refraction course where ophthalmic nurses are taught both to refract and to teach others to refract.

This year participants were trained from Zambia, Zimbabwe, Namibia, Eritrea, Nigeria and Cameroon; and previous trainees ran courses in Nigeria, Gambia and Uganda. Overall a total of 57 new refractionists were trained last year. In April, an evaluation of the course was conducted to determine the effectiveness of the program. Findings of this evaluation will be incorporated into the program in the future.
Community Based Clinics

ICEE is proud to work with the Red Cross Air Mercy Services to provide a “Flying Optometrist”. Kesi Naidoo services up to 23 clinics and 6000 people a year.

In Tanzania, Optometrist Damas Mworia uses public buses to reach his rural clinics, often being away from home for three weeks at a time. Damas is part of a pilot project to determine whether his salary and expenses can be supported through the sale of affordable spectacles at his clinics.

ICEE has also developed a clinic in a semi rural district of South Africa that is part of an operational research model to develop and pilot a complete eyecare delivery system for a healthcare district.

Research

Little information exists on ocular condition in the African eye. To date the provision of services and types of drugs used have been based on assumptions drawn largely from Caucasian eyes living in environments very different from those encountered in Africa. ICEE is actively involved in collecting and analyzing epidemiological and refractive data on the African eye. Currently we are collecting data from Tanzania and South Africa.
Thoko Ndlovu, 60, has just seen an optometrist for the first time. For five years she has had painful headaches. Says Thoko, “I can’t see anything, I can’t read my bible. When I go to the shops I can’t read the prices and sometimes when I walk I trip”. Each time she saw a doctor she was told to go for an eye exam. However, the nearest optometrist was a two hour trip by public transport, costing 60 Rands (approximately $12AUD) and she would have to go a second time to pick up her spectacles. Thoko, a retired domestic worker living on an average of 500 Rands (approximately $100AUD) a month, simply could not afford it. Also the cheapest glasses she could afford would have been equal to the money she budgets for her monthly expenses.

Fortunately through the support of ICEE, an optometric clinic and affordable spectacle program have been established at the hospital in Stanger, a short distance from Thoko’s home. Thoko could get the glasses she needed for a price she can afford and she is now really happy, trying on frames for the spectacles that will give her good vision. Yashika Inderjeet, the community optometrist says of Thoko, “She simply needed a pair of reading glasses. Once she starts using them her headaches shouldn’t occur, and life should become a lot easier.”
ERITREA

Eritrea, in the Horn of Africa, borders the Red Sea. It has an estimated population of 3.2 million, with the majority (80%) residing in rural areas. Blindness is a major public health problem in Eritrea. There are an estimated 30,000 blind people, and a further 90,000 with visual impairment. There are only a handful of refractionists providing refraction services. Spectacles are available in the capital city of Asmara, but only intermittently in other major urban centres and never to more remote rural areas. And where spectacles are available, at $20 Australian dollars they are too expensive for the majority of the population.

In 2003, Dr Deshele Ghebregerghis, National Chief Ophthalmologist, requested ICEE conduct a refraction training course in Eritrea. Together with the Fred Hollows Foundation, a two week refraction training program for 8 nurses was conducted in August 2003.

The aim of the course was to train the nurses currently working in provincial eye clinics as refractionists. They would then be able to support local eye doctors.

Eight sets of refraction equipment were also donated to the provincial hospitals in which the nurses are based, so that the skills learned wouldn't be lost due to a lack of equipment.

In order to ensure patients in the provinces would have access to spectacles after their vision tests, ICEE provided readymade spectacles as a seed donation to set up a revolving fund for the repurchase of spectacle stock.

In April 2004, ICEE returned to Eritrea to provide refresher training and to evaluate the functioning of the refraction and spectacle system, as well as to make recommendations to the Eritrean Ministry of Health (MOH) regarding the ongoing development of national refraction services.

All trainees had delivered some refraction services since completing their course. However, some had faced barriers to service provision. These barriers were discussed and addressed in collaboration with the MOH. Strategies were identified to overcome them.

ICEE affordable spectacles were found to be very popular at a price of 40 Nakfa (less than 5 Australian dollars). Further bulk orders for spectacles will be placed by the MOH, continuing their supply to the provincial level.

Discussions continue with the MOH regarding ICEE’s further involvement in Eritrea as refraction services develop.

Collaborators
Eritrean Ministry of Health
Fred Hollows Foundation, Australia

Collaborators
Eritrean Ministry of Health
Fred Hollows Foundation, Australia
CAMBODIA

Cambodia has a population of 12 million and is situated in the South East Asian Mekong region, bordered by Vietnam, Laos and Thailand. Approximately 85% of Cambodia’s population lives in rural areas.

With a blindness prevalence rate of 1.2%, an estimated 144,000 people are blind in Cambodia. The main causes of blindness are cataract, uncorrected refractive error, glaucoma, corneal scar and pterygium; shockingly 80-90% of all blindness in Cambodia is preventable.

Uncorrected refractive error accounts for approximately 10% of blindness. This is a reflection of the country’s poor availability of refraction services and affordable spectacles. Only six of Cambodia’s twenty-two provinces have permanent refraction services with trained refraction personnel.

With over 80% of Cambodians living in rural areas, much of the population relies on infrequent provincial screening programs as their only access to refraction and spectacle provision.

The Cambodian Optometrists Association (COA) has been primarily responsible for delivering refraction training and provincial refractive error screening in the past. The need for COA to receive further training, skills development, professional mentoring, and systems strengthening was identified to enable COA to contribute to the development of refraction services as outlined in the Cambodian National Eye Care Plan.

ICEE, in partnership with Christian Blind Mission International (CBMI), sponsored a 6 month position for Australian optometrist and ICEE Optometry Committee Volunteer, Anna Palagyi, to undertake a technical advisory role to the PBL Committee and the COA in Phnom Penh.

Anna assessed the current refraction services available in Cambodia and worked with major stakeholders to develop strategies and implementation plans to address uncorrected refractive error as a cause of blindness in Cambodia. This included human resource development (training) and the assessment of the constraints to the effective distribution of affordable spectacles.

As a result of the ICEE/COA collaboration, the COA is now well placed to continue their role as trainers of refraction within Cambodia and play an essential role in the development of refractionist human resources as outlined in the National Eyecare Plan. Horm Piseth from COA is particularly motivated by the partnership - “This is a great assistance of ICEE to develop and provide technical refraction service to Cambodian personnel.”

Collaborators

TIMOR LESTE

The nation of Timor Leste is made up of 13 administrative districts and has an estimated population of 920,000. Since 2000, ICEE has been working with the Timorese Ministry of Health (MOH) and other organisations to develop the required local human resource and infrastructure capacity for an appropriate, accessible, sustainable eyecare system.

Towards this goal, in 2003/04 ICEE supported two nurses from rural areas to undertake a one-year eyecare training course at LV Prasad Eye Institute, India (LVPEI). These nurses are due to return to Timor Leste in August 2004, and it is envisaged that in addition to delivering professional eyecare services, with the support of ICEE and MOH these nurses will become national nurse eyecare trainers for Timor Leste. A further three nurses were selected to undertake this training in 2004/05.

In August 2003 a permanent supply of affordable readymade spectacles was established at the National Hospital. A seed donation of spectacles was given and a rotating fund established, whereby further spectacles are ordered as required, and the small profit invested in the local delivery of services. This system includes subsidisation for those individuals who cannot afford to pay the price of the spectacles (USD$2-3). An evaluation of the readymade system and expansion to rural areas was undertaken. An assessment of the feasibility of an optical workshop to provide affordable custom-made spectacles is planned for 2004/05.

After working together for some time, a Memorandum of Understanding was signed between ICEE and the MOH in January 2004. Some of the activities committed to from both partners include:

- Undertaking a national eyecare planning process;
- Developing a national eyecare plan and national eye health policy guidelines;
- Continuing support for human resource and infrastructure development.

These activities have begun and will continue into the next year.

To date ICEE has delivered primary eyecare training to 22 nurses, and refresher training to 15 of these, and has contributed to the screening of 23,700 people and the dispensing of 14,000 spectacles, including the work with the National Hospital eye clinic since it began full-time services in April 2003.

Collaborators:
Timorese Ministry of Health, National Centre for Health Education and Training, Guido Valaderes National Hospital, LV Prasad Eye Institute, India.
Alito Soares from Maliana and Joao da Cruz from Los Palos completed a one year eyecare course at LV Prasad Eye Institute in 2003-2004. With support from the Silverton Foundation, ICEE has equipped two clinics where Alito and Joao will be based. The clinics will serve a rural population of approximately 120,000, whereby people suffering from eye problems can access eye screening and refraction services by the trained eyecare nurses, a service that was previously unavailable.

In their own words:
“The training we have had will be very useful for the people of East Timor as there is a big need for eyecare there. We hope the good cooperation between ICEE and the Ministry of Health continues in the future. I have learnt many useful skills and I hope ICEE continues to work in East Timor so we can continue to upgrade our skills. I look forward to working with and for the people of East Timor – I know they are waiting for us to get back to begin our work!”
Alito Soares

“There are many barriers to people being able to use eyecare services in East Timor, so we will need to work with our communities to overcome these together. After this training I want to use what I have learnt to benefit the people of East Timor – I now feel much more confident to manage their eyecare problems and I look forward to beginning my work. ICEE supporting me to come and study eyecare in India has been one of the best things to happen to me. I want to say thank you to ICEE and to everyone involved in making this possible.”
Joao da Cruz
SOLOMON ISLANDS

With a population of approximately 470,000, and without permanent ophthalmologists or optometrists, the Solomon Islands is largely without refraction services. Unfortunately the ethnic crisis of 2000 stripped the Solomons of many medical personnel, including the country’s chief ophthalmologist. Fortunately a cadre of well-trained eye nurses remain and continue to provide the backbone to eyecare in the Solomon Islands.

Following a Pacific Regional Eye Care Meeting held in Fiji in April 2003, ICEE and the Fred Hollows Foundation agreed to fund a nine-day refraction training program for the Solomon Island eyecare nurses. Fourteen Solomon Island eyecare personnel and one Fijian nurse participated in the training.

The refraction training course was planned in consultation with local medical personnel, who assisted with the assessment of training needs, trainee selection and priorities for the course content. Relevant skills and knowledge necessary for refraction and the management and referral of more serious eye problems were included. The course focused on how skills and knowledge can be applied in the workplace and attempted to make learning as close to the real world as possible. A course manual with information, diagrams, examples, and step-by-step instructions was provided to every trainee for consultation during training and to be used a reference after the course.

The main benefits of attending the course were perceived to be “the opportunity to learn something new” as well as “the chance to specialise in a health area that interests me”. One nurse wrote “I learnt a lot of new things - skills and knowledge which will really help me at my work with my patients.” All trainees passed the course and a mean score of 80% achieved on post course assessment indicated that the trainees successfully understood all topics.

ICEE also provided six sets of refraction equipment to be used during the course and thereafter donated to provincial hospitals. Distance E charts and Pidgin near visual acuity eye charts, oclulders and pinhole oclulders were provided to the individual trainees.

To support the delivery of refractive care, ICEE provided readymade spectacles to ensure that patients had access to the vision correction they needed. A seed donation of spectacles was provided by ICEE, and a rotating fund has been established whereby further spectacles will be ordered as required, and the small profit reinvested into the local delivery of services.

Collaborators

Fred Hollows Foundation, New Zealand

FIJI

Many of the islands in the Pacific region have limited eyecare services. ICEE is working in collaboration with a number of other organisations to address this need.


In all, 172 households in Suva and rural areas of the Central Division of Fiji were surveyed to determine:

- an estimate of the awareness and willingness to visit an eye clinic, and the barriers to receiving eyecare
- an estimate of experience of and willingness to pay for spectacles.

The major findings indicated that only two-thirds of people would seek care from the hospital if they had an eye problem. This under-utilisation may be due to a lack of awareness of services and/or access barriers such as being female, rural residence, and having a fatalistic attitude.

The full findings, and ICEE’s recommendations, were reported to participants and eyecare personnel in Fiji through the Vision 2020 Fiji Committee.
COOK ISLANDS

In May 2004, ICEE conducted a training of trainers in Primary Eyecare Course (PEC) for seven nurses from Fiji, Samoa, and Tonga, who are involved in eyecare delivery. This formed part of the Fred Hollows Foundation’s regional eye nurse workshop in the Cook Islands.

An ICEE trainer worked with Sister Wanta Aluta, an experienced eyecare nurse from the Solomon Islands, to deliver two days of trainer training to these nurses, who were selected by their respective Ministries of Health. The workshop provided prospective eye nurse trainers with the knowledge, skills and attitudes they need to train others, based on learner-centred, participatory training techniques.

On the completion of the training the new trainers went on to tutor twenty nurses from seven islands throughout the Cooks, during a five day workshop. In this way, the new trainers were able to immediately apply the skills they had learnt, and to continue to learn from ICEE and each other as they delivered their first PEC course.

The PEC course aims to equip health workers with the knowledge, skills and attitudes to identify and manage common eye problems. The course uses interactive tutorials and active learning techniques, as well as group work to enable health workers to take a case history, measure visual acuity and examine the anterior eye in order to identify common eye conditions. Guidelines for treatment or referral are included.

ICEE will continue to support the newly trained PEC trainers as they return to their own countries to deliver further courses.

Collaborators
Fred Hollows Foundation, New Zealand
Vision 2020 Fiji
Fiji Ministry of Health
Tongan Ministry of Health
Cook Islands Ministry of Health
Samoan Ministry of Health
Dr John Szetu, originally from the Solomon Islands, is the only resident eye surgeon in Vanuatu, a small South Pacific Island nation of 190,000 people. As well as providing clinical eye services, Dr Szetu has been busy training ten eye nurse practitioners in primary eyecare so as to build a team of specialist eyecare providers. The eye nurses manage a range of eye conditions on a day-to-day basis as well as assisting Dr Szetu with cataract surgery during his surgical tours to remote areas. In most cases the eye nurses have become the first point of contact for the 80% of the population living in rural areas.

In 2001 and 2002, ICEE contributed to the training of these eye nurses by delivering a refraction component within Dr Szetu’s primary eye care curriculum. Additionally, ICEE and Dr Szetu have established an affordable readymade spectacle and sunglasses project, whereby money made from spectacle sales is kept within a revolving fund so as to maintain the project overheads and repurchase any stock.

In April 2004, ICEE conducted a ‘training of trainers’ workshop in Vanuatu. During the first part of the workshop, ICEE trainers tutored ten eye nurse practitioners previously trained in eyecare by Dr Szetu. This tutoring concentrated on skills-based teaching, and topics included communication skills, planning for eyecare courses, and how to most effectively teach.

The eye nurse practitioners were provided with charts to use as teaching aids. For the remainder of this workshop, the eye nurse practitioners applied their newly acquired skills by each teaching the diagnosis and management of common eye conditions to general nurses who had no prior eye knowledge.

Each general nurse was given a copy of the Primary Eye Care Manual developed by ICEE. This manual contains information on the identification and management of common eye disorders. To accompany the manual, distance letter and tumbling E charts, a Bislama (Vanuatu Pidgin) nearpoint chart, a patient education Bislama ‘Eye Poster’, pinhole occluders, and Royal Blind Society demonstration cards were also supplied.

This is what some of the eye nurse practitioners had to say about the ICEE training program:

“I am now able to teach other nurses and to help educate people about the importance of eyes and how to care for their eyes”

“The teachers were flexible and easy to understand which gave me great confidence to ask questions and do the activities that enable me to learn further without any frustrations”

“At first I was scared and nervous to give lectures. The course made me feel confident of myself and I can now stand in front of many people to give lectures.”

Although this workshop taught more general nurses to diagnose, treat and refer common eye conditions, its greatest benefit was producing eye nurse practitioners capable of continuing as general nurse trainers.
Colwyn Dingly comes from the small island of Motalava in Torba Province, the northern-most part of Vanuatu. Working for the Vanuatu Health Department for almost 20 years, Colwyn has spent most of that time assisting in the operating theatre.

Because of his advanced nursing skills, Colwyn was chosen to join the Solomon Islands ophthalmologist, Dr John Szetu, for eyecare training in the Solomons. On his return to Vanuatu, Colwyn was appointed to Nurse In-Charge at the nation’s first eye clinic based in the Northern District Hospital of Santo.

A further nine months of in service training with Dr John Szetu in Vanuatu has seen Colwyn become the most skilled eyecare nurse in Vanuatu. A lot’s happened in a short space of time in the eyecare program, and now there are two major eye clinics and 11 trained eye nurses based throughout the country.

To harness the skills of the trained eye nurses and to continue delivering eyecare services to Vanuatu’s population, ICEE is working with Colwyn and his colleagues to develop the eye nurses’ teaching skills so that they can go on to train other general nurses in primary eyecare. As 80% of the country’s population live in rural and often remote areas, having general nurses also trained in primary eyecare means more eye conditions will be picked up earlier and hopefully prevented from leading to blindness.

With the support of ICEE, Colwyn feels confident to continue his teaching and training of other nurses.
TUVALU

Tuvalu is a small Western Pacific island nation located north of Fiji. The national population of approximately 10,000 is distributed across nine islands. There are as few as 90 people on some islands and approximately 5,000 people live on the main island of Funafuti. To date, there are no trained local eyecare providers in Tuvalu. Visiting Australian teams have endeavored to fill some of the gaps in eyecare over the past eight years. The Pacific Islands Project (PIP), funded by AusAID and organised by the Royal Australian College of Surgeons (RACS), has provided cataract and other eye surgery during annual one-week visits by ophthalmological teams since 1996. Along with cataract, uncorrected refractive error is one of the major causes of impaired vision in Tuvalu.

ICEE optometrists worked with RACS surgeons in 2001, 2002 and 2003 to provide complementary screening, refraction services and spectacle prescription. Some basic training in conjunctivitis prevention and treatment has also been provided for the Tuvalu health workers. In July 2003, two final year optometry students from the University of New South Wales accompanied an ICEE optometrist. While the quality of the care provided by visiting professionals has been of a high standard, ICEE is working with the Government of Tuvalu to develop national eyecare policies and sustainable local programs to prevent and treat many causes of avoidable blindness and visual impairment.

The Tuvalu Ministry of Health (MOH) expressed the need for general nurses to receive primary eyecare training. Together ICEE and the MOH have planned a primary eyecare training course, to be attended by nurses from all nine islands for the next financial year. The training will enable these nurses to provide primary eyecare diagnosis and treatment as a first point of contact in their remote communities. Vision screening, eye health promotion and presbyopic correction will also be included in this training. A permanent spectacle supply will also be established in the near future.

Collaborators:

Tuvalu Ministry of Health, Royal Australian College of Surgeons.
Anna Palagyi, ICEE Optometric Committee Volunteer:

July 2003 saw the continuance of a three year collaboration between ICEE and the Royal Australian College of Surgeons (RACS) in the provision of vision screening, spectacle services, primary eyecare and ocular surgery to the small Western Pacific nation of Tuvalu. In my second year of involvement, after joining the service delivery team for the first time in 2002, I was accompanied and assisted by two final year optometry students to perform pre-screening for the RACS ophthalmic surgical team.

Over 550 people enthusiastically presented to receive vision screening and eye health examination over a ten day period. Three hundred of those seen were provided with spectacles through ICEE, and 35 people were referred to the visiting RACS ophthalmologists for assessment of visually impairing cataract and pterygium, diabetic retinopathy, and a range of other ocular health conditions.

As an ICEE Optometric Committee Volunteer, I was also privileged in representing ICEE through the delivery of a short primary eyecare workshop to local nursing staff. Focus was placed on the assessment of vision and the identification and management of common anterior eye conditions, in order to increase the skills and knowledge of local health care personnel in providing basic eyecare for their community.

After joining the Tuvalu RACS/ICEE eyecare team as an optometry student for the first time in 2002, I was extremely pleased to have the opportunity to continue my involvement in 2003, and work with other optometry students so that they may also receive the same valuable experience that I was fortunate to obtain. It is great to be part of and witness the change of such trips from focus on service delivery to increasing the involvement of local nursing staff through building their capacity in the provision of primary eyecare. As ICEE continues their involvement in the future training of local eyecare personnel within Tuvalu, even greater assistance to the RACS surgical team can be assured.
The ICEE / AHMRC Aboriginal Eyecare Program continued to expand during the year 2003-2004 with ICEE providing services to clinics at 65 locations throughout NSW over the whole year, and adding another 5 locations to its visiting program towards the close of the year.

Three significant events affecting the program took place during the year:

- The “Review of the Implementation of the National Aboriginal and Torres Strait Islander Eye Health Program” was conducted for the Australian Government’s Department of Health and Ageing, and the Government’s response was released in May. Recommendations accepted by the Department of Health and Ageing may prove to be of assistance in the development of ICEE’s Aboriginal Eyecare Program.

- A number of recommendations from the NSW Government’s 2001/2002 review of its Rural Aerial Health Service were implemented this year. Whilst transport continues to be provided by the Royal Flying Doctor Service, bookings and timetables are now organised by individual Area Health Services. This has removed some of the flexibility in the Royal Flying Doctor Service so that visits to some locations now require an overnight stay, and some locations now require vehicle travel in addition to a flight.

- A pilot mobile service by car was introduced to visit Aboriginal communities in remote locations. Two trips were made to communities in the far west and south west of NSW. If this program proves to be sustainable, funding will be sought to obtain a more appropriate vehicle.

Since the ICEE/AHMRC Eyecare Program commenced with its first one-day clinic at Walgett in December 1999, more than 9,000 eye examinations have been conducted by ICEE optometrists and more than 8,000 pairs of glasses, low vision aids and contact lenses have been supplied through the NSW Government spectacle program.

Many of the people examined by ICEE had not had an eye examination before and many shared glasses purchased at hardware stores, service stations and chemists. In very many instances, these glasses were little better than “nothing at all”. In every one of these instances an opportunity had been missed to detect the presence of ocular disease or ocular signs of systemic disorder. The consequences of missing these signs can be grave and costly in very many ways.

A spin-off of ICEE’s Aboriginal Eyecare Program is that many of the great number of Aboriginal people with Type 2 Diabetes who are at risk of suffering blindness or severely impaired vision in one or both eyes are now regularly reviewed in accordance with NHMRC guidelines. Data from ICEE / AHMRC Eye Clinics indicates that more than 15% of Aboriginal people in NSW have diabetes, with the accompanying high risk of vision loss and blindness.

During the year a number of valuable items of equipment, lenses, and spectacle frames were donated to the program. To the donors and to all who have assisted in ensuring the success of the program we offer our thanks.
Anita Dwyer is one of seven Aboriginal Eye Health Coordinators located in NSW, who are responsible for creating awareness of the need for regular eyecare among Aboriginal communities and for arranging for this eyecare to be locally available and accessible.

Based at the Wellington Aboriginal Corp. Health Service in Western NSW, Anita’s region of responsibility extends from Bathurst in the East, to Hillston in the West, Cobar and Nyngan in the North, and Parkes and Forbes in the South.

In association with ICEE optometrists, Anita conducts Eye Clinics regularly at Aboriginal Community-controlled facilities at Wellington, Bathurst, Murrin Bridge, Parkes and Dubbo, and as a result clocks up a lot of kilometres. To visit more distant locations such as Murrin Bridge, which is about 20 kms from Lake Cargelligo, she flies with the ICEE optometrist utilizing the Royal Flying Doctor Service and the NSW Government Rural Aerial Health Service.

She coordinates the organisation of the Clinics and ensures that the local communities know about the important services available. In particular, the Eye Clinics enable Aboriginal people with diabetes to have regular eye examinations, and part of Anita’s work is to ensure that these people keep their appointments.

Once a year, Anita also screens Aboriginal children at preschools and primary schools in her area. Children failing the screening are referred to an optometrist at one of the clinics.

Anita finds her work rewarding as she enjoys visiting the Aboriginal communities, meeting new people and “having a yarn”.

She also believes that her work is proving to be of great benefit to members of the Aboriginal community. Before eye clinics became established within Aboriginal Medical Services, there were very many Aboriginal people who did not seek eye and vision care, resulting in vision loss. The accessibility of the Eye Clinics is improving vision for the Aboriginal people of NSW.
The aim of our marketing campaign is to raise funds to expand our program delivery. Currently, fundraising income is generated from the following sources: Optometry Giving Sight, National Sunnies For Sight Day, special events, corporate sponsorship and general public contributions.

**Optometry Giving Sight**

The core of ICEE's mission is uncorrected refractive error. This is the very essence of optometry. With this in mind, ICEE has formed a partnership with the International Agency for the Prevention of Blindness (IAPB), and the World Council of Optometry (WCO). Together the three agencies have formed a global alliance to establish a global Optometry Giving Sight fundraising campaign.

The group's aim is to have a combined fundraising initiative aimed at optometry. Funds raised from Optometry Giving Sight will be used to support the improvement of human resources, infrastructure and service delivery of vision care to those in need. The combined efforts of ICEE, IAPB and the WCO are critical in mobilising the funds needed to make a real difference.

Internationally, the campaign commenced with the appointment of campaign managers in the United Kingdom and more recently in Australia. In Australia, the three agencies have partnered with the Optometrists Association Australia (OAA) with the campaign formally launched at the Southern Regional Congress in May. This unique collaboration also gives ICEE's Australian optometry supporters the chance to join with their colleagues worldwide to address the issue of preventable blindness.

**National Sunnies For Sight Day**

‘National Sunnies for Sight Day’ began with a pilot in 2002 in Victoria and was followed by a national roll out to all schools in 2003. This year on Friday 27 February 2004 more than 400,000 Australians took part in ICEE's “National Sunnies for Sight Day”.

Fifteen hundred organisations took part including schools, kindergartens, optometric practices, hospitals, sporting clubs, fire-stations and many workplaces across the country. Staff or students donned a pair of sunglasses or designed their own ‘fun’ pair to raise awareness of eye health and blindness prevention.

The event was supported by a radio campaign through Southern Cross Talk Radio; television campaign with Channel 9 that featured Eddie McGuire as the face of National Sunnies for Sight Day; web based campaigns through Sensis owned sites; and extensive print media advertising. Over 140 publications ran pictures & editorials on the day and 20 radio interviews were given. Just over AUD$200,000 was raised for ICEE eyecare projects.

As Chairman of ICEE, Professor Brien Holden OAM said “National Sunnies for Sight Day is all about raising awareness of eye health and our role in helping those who can have their vision restored. Our day is about bringing the ICEE story to the community, it is about communicating the essential issues about blindness and vision impairment and it is about raising money needed to develop programs within our region. But most importantly of all it is about giving sight, something which goes to the very heart of ICEE’s mission.”

ICEE acknowledges the support received from event supporters which contributed to the success of the day. Gold Sponsors were Channel 9, Essilor/Nikon, Southern Cross Talk Radio and The Cancer Council Sunglasses. Silver Sponsors were Classic Press, Createl Publishing (Teachers Professional Diaries), CIBA Vision (Focus Dailies), FAL Lawyers, I-Media, Jonathan Scents Eyewear, ProVision, and Sports Force.
All pre-schools, primary & secondary schools and workplaces across the country can easily become involved by fostering the concept within their local community. The next ‘National Sunnies For Sight Day’ is on Friday 25 February, 2005.

Gala Dinner
In February, ICEE held its inaugural gala dinner that doubled as the formal campaign launch of National Sunnies for Sight. The event was held at Melbourne’s Plaza Ballroom on Collins Street. Around 220 guests were entertained with a show that featured fashion parades by Alfredo Santo’s Tremayne Salon.

Optometrists Association Australia
ICEE has again received extensive support from the Optometrists Association Australia (OAA) National Office and its State Bodies. This assistance is often provided through editorial exposure in official publications and trade booths at the various conferences and congresses.

Optical Industry Corporate Supporters
Since its inception ICEE's professional education program has been sponsored by Essilor, one of the world's largest manufacturers and distributors of lenses. Without Essilor's significant financial support, ICEE would not be able to operate the diversity of programs it currently offers.

ProVision
ProVision, the largest group of independent optometrists in Australia, has worked closely with ICEE to raise funds for special projects in nominated countries. To date, the group has provided funds to equip the Stanger Eye Clinic, in Stanger Hospital in Kwa Zulu Natal Province in South Africa. More recently, the funds have been used to fund ProVision optometrists service delivery trips to Timor Leste.

ICEE Trainee Scholarship Program
This financial year saw the unveiling of the ICEE Trainee Scholarship Program. Three optometric practices are supporting the initiative that underwrites costs associated with in-country nurse training programs. ICEE acknowledges:

- Kosmac & Clemens Optometrists, VIC - Vanuatu
- OptiWear, WA – Nurse Training, Tuvalu
- Paul Brown Optometrist, SA – Nurse Training at LV Prasad Eye Institute

In-kind Donations
This financial year ICEE received a number of significant in-kind optical donations (frames, lenses, sunglasses or spectacle cases) from Baby Banz, Designs For Vision, Device Technology, Hoya Lens Australia, Jonathan Scsats Eyewear, Marchon Eyewear Australia, Optical Superstore, UV Wraps & Straps and Younger Optics.

Foundations
The Silverton Foundation, based in Texas USA, is a significant supporter of ICEE's Timor Leste Program. Silverton is dedicated to empowering disadvantaged people through initiatives in education, health and social services. The aims of Silverton and ICEE exactly coincide in Timor Leste.

Silverton's generous support will purchase equipment for an Eye Clinic in Los Palos and Maliana, enable three Timorese nurses to undertake Eyecare training in Hyderabad, India, and assist in the development of the Timor Leste National Eyecare Plan.

Communications
ICEE produces a range of material to maintain communication with the profession, industry and public. These include a quarterly magazine, which keeps our supporters informed as to progress and achievements. In Australia it is mailed to all optometrists as an insert with the national domestic optometric publications. The magazine is also available on the ICEE website. In October a new section of the website devoted to National Sunnies for Sight Day was added and went live in November.

ICEE is grateful for the support, advice and assistance it receives from the services of the design group I-Media. The group is responsible for all ICEE design work and promotional material including the official website at www.icee.org. ICEE thanks I-Media for its valued and continued support.
PROFESSIONAL EDUCATION

...improving eyecare for ageing vision by training practitioners and educators
Dear Friends and Colleagues:

The International Centre for Eyecare Education (ICEE) is a core participant in the Vision Cooperative Research Centre (Vision CRC), based at the University of New South Wales, Sydney Australia. The Vision CRC is a unique worldwide collaboration of 30 of the world’s best organisations involved in eyecare and vision research, education and delivery. The Vision CRC is developing breakthrough technology and products for the correction of myopia and presbyopia; delivering innovative education programs at all levels of the eyecare industry; and developing models which provide effective, affordable, and sustainable eyecare delivery to communities in need. ICEE participates in the Vision CRC’s Professional Education Program and the Vision Care Delivery Program. ICEE is also part of the World Health Organisation Vision 2020 initiative, whose aim is to eliminate avoidable blindness by the year 2020.

The Asia Pacific Region accounts for more than one third of the world’s population. People requiring vision care live in under-serviced regions in the most populated countries of India, China and Indonesia, along with the more advanced markets of Japan, Australia and New Zealand. Yet all the Asia-Pacific countries share the common need for practitioners with greater skills in the prescribing and fitting of advanced technology spectacle lenses.

2003/2004 was a year of significant achievement for ICEE Professional Education, as we continued to improve the knowledge and skills of visioncare practitioners, educators and industry personnel through the development and delivery of innovative education programs that will increase local capacity to provide quality visioncare.

Staff from ICEE spent more than 50 days training local visioncare practitioners in 24 locations in the region, to be able to provide the best practice in visioncare. Presented by ICEE and funded by Essilor Asia Pacific, the world’s largest manufacturer of corrective spectacle lenses, the Varilux Academy and Varilux Educator Initiative programs deal with everything from the psychology of the patient to practical workshops fitting today’s modern lenses.

ICEE also implemented the Presenter Training Program for educators at undergraduate ophthalmic teaching institutions, and for industry-based practitioner trainers in India, China and Indonesia. Participating in these programs I was able to observe educators incorporating the ICEE education materials into their lecture and workshop presentations. I experienced at first hand the appreciation from both novice and seasoned educators, for teaching them how to be more effective educators through development of their presentation skills, and lecture and workshop creation ability.

These latest programs are an extension of the work that Essilor and ICEE have carried out in Asia Pacific over the last 6 years, training not only local practitioners but putting in place resources with local educators so that the training continues long after the team has departed.

Thanks to the dedication of the ICEE Professional Education staff and the continued support of our partner organisations, colleagues and sponsors, excellence in visioncare is now within sight. Together, we can develop sustainable solutions for all members of communities in need of vision correction.

Craig Butler
Director of Professional Education
• The ICEE Professional Education Team conducted Varilux Academy Asia Pacific (VAAP) practitioner education programs for Essilor International customers in 24 cities throughout Indonesia, India, China, Philippines, Malaysia, Singapore and Australia. In total, more than 1200 practitioners were educated about how to prescribe and fit advanced-design ophthalmic lenses for the future benefit of thousands who require vision correction.

• The Varilux Academy Educator Initiative (VAEI), which includes the Educator Presbyopia Education Program (EPEP), was conducted in China, India and Indonesia, to enhance the knowledge and teaching ability of 28 educators in undergraduate ophthalmic teaching institutions in these countries.

• The Presenter Training Program (PTP), an integral part of VAAP, was delivered to twenty industry staff and educators from Japan, India and Indonesia, enabling them to deliver licensed ICEE education materials to local practitioners in the Asia Pacific region over the next four years.
ESSILOR’S INVOLVEMENT

Since the launch of the very first Varilux lens more than 40 years ago, Essilor has been at the heart of providing practitioners worldwide with the tools they require to effectively prescribe advanced lens products. This commitment changed the path of the optical market, promoting growth and development across the industry.

Emerging markets move very quickly beyond older products, searching out new technology in a variety of sectors, ophthalmic optics being one. Essilor has proven that education drives the development of a market, providing flow-on benefits for all involved. Asia-Pacific is the perfect reflection of this model.
INTEGRATION AND SYNERGY

The ICEE Professional Education team has over 15 years of combined experience in developing and delivering ophthalmic education materials and training programs. The team is part of a major international professional training effort directed towards practitioner, educator and industry personnel groups in collaboration with the ophthalmic industry.

Based on Essilor’s successful European model of Varilux University, Varilux Academy Asia Pacific (VAAP) educational programs have been put in place in response to requests from local eyecare practitioners for more extensive education about ophthalmic lenses, in particular Progressive Addition Lenses (PAL). From 1998 to 2002, ICEE conducted the extremely successful Presbyopia Education Program (PEP), again in collaboration with Essilor International. Commencing in 2003, VAAP represents the next phase in practitioner education programs customised to the needs of industry, practitioners and communities.

The VAAP education for existing ophthalmic practitioners and dispensers include prescribing and dispensing progressive addition lenses, presbyopia management, consumer psychology, patient care and communication skills necessary to satisfy the visioncare needs of their communities.

With Essilor’s involvement, ICEE introduced the Varilux Academy Educator Initiative (VAEI) in 2003 to each year train up to 15 industry personnel based in Asia Pacific countries each year. They will conduct VAAP under license using ICEE education materials to increase the frequency and reach of practitioner education within their countries.

In addition to this initiative, educators at undergraduate teaching institutions throughout the region have been given education materials and training through the Educator Presbyopia Education Program (EPEP). The Program aims to develop and support, in each country, an education system capable of providing an ongoing supply of ophthalmic practitioners confident and skilled in PAL prescribing and fitting.

Training programs for educators and their students have a significant impact on the return to the community and industry. Providing eyecare practitioners with knowledge and confidence allows them to thoroughly address the needs of the presbyope and other patients in their care. At the same time, the synergy of the training of undergraduate ophthalmic students through the EPEP program, together with trained VAAP dispensing opticians and ancillary retail optical sales staff, will enable them to improve the reputation, acceptance and success rate of progressive addition lenses in the Asia Pacific region.
ICEE Professional Education satisfies the needs of the worldwide eyecare community by providing industry ‘ready’ graduates, business and clinic ‘capable’ practitioners and an advanced visioncare ‘receptive’ community. Enabling and empowering ophthalmic educators, practitioners, students and industry to achieve their potential is ICEE’s concern. ICEE education and training is an effective tool that facilitates this goal.

The development of models for delivery of education and training for practitioners from diverse cultural backgrounds, with different education and professional experience and in a variety of geographical locations, commenced with ICEE Professional Education examining the existing delivery methods and media formats currently used for dissemination of education to ophthalmic industry staff, undergraduates and practitioners.

ICEE educators observed that visioncare providers need to have a realistic view of how they are involved in influencing the client or customer. To achieve this and to ensure the effectiveness of Varilux Academy specifically for each market, ICEE developed innovative, interactive and effective teaching methods. Each part of the Program is also continually reviewed, improved and modified to accommodate the constant change in the industry.

The VAAP and PTP Programs include illustrations, explanations, demonstrations and ‘hands on experience’ so that participants are able to gain an in-depth appreciation of the subject and best practice methodology to reinforce the learning when it is applied in the workplace. This promotes self-sustaining education in the stores and practices. It has been designed on the premise that learning is best achieved by doing – turning ideas into action and implementing them within the workplace.

The EPEP Program is divided into three separate face-to-face programs: Fact-finding, Implementation and Follow-up. This approach enables the basic infrastructure in progressive lens and dispensing education to be established and/or improved from which skilled and confident practitioners will emerge.

All ICEE Professional Education Programs include multimedia educational materials as well as seminars and workshops. The idea is to modify attitudes and teach practical knowledge and skills to be applied immediately in the day-to-day activities of the participants; and emphasise the development of the potential of the educator, fostering originality and individuality, self-respect and self-reliance.
Varilux Academy programs offer Fundamental Courses and Elective Course Options. The objectives are to provide sound technical foundation about PAL and other advanced forms of lenses and their correct prescribing and fitting. In addition, the Programs introduce the essential communication skills necessary for successful acceptance of advanced ophthalmic lenses by the members of the community requiring vision correction.

The education programs are offered as:

- one or two day programs for optometrists / refractionists / sales staff;
- one or two day programs for sales staff only; OR
- half-day sessions to cater to the participants’ local requirements.

The topics include:

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<th>Workshops</th>
<th>Forum</th>
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<td>The Ageing Eye</td>
<td>PD and Height Best Practice</td>
<td>Maximising Wearer Satisfaction</td>
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<tr>
<td>The PAL Concept</td>
<td>PAL Problem Solving</td>
<td>PAL Experience</td>
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<td>PAL Trouble Shooting</td>
<td>Estimate the Refractive Index</td>
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<td>Ophthalmic Lenses</td>
<td>Edge Thickness Calculation</td>
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<td>Personality – The Big 5 Factors</td>
<td>Personality Interactions</td>
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The EPEP Implementation Program supplies educators with teaching resources and materials, fitting aids, and an ongoing support network through material delivery. In the follow-up program, the educators’ teaching and presentation skills are further developed and refined to enhance the effectiveness of the face-to-face education they provide to their students.
OUR NETWORK

INDIA

Lakshmi Shinde BOptom MOptom
Lakshmi received her Bachelor of Optometry degree from the Elite School of Optometry in 1991, and she later obtained her Masters of Optometry from the University of New South Wales, Australia in 1988.

Lakshmi previously spent five years in LV Prasad Eye Institute where she worked on various contact lens research projects, and was involved in optometry education and clinical practice. She then practised optometry in Bangalore, and also consulted at the Retina Institute of Karnataka in low vision aids.

From her presentation of papers in optometry and contact lenses in India and at international conferences, she was appointed India Coordinator of the International Association of Contact Lens Educators (IACLE) in 2000, and she is also currently IACLE’s coordinator of South Korea. Lakshmi will now share her vast experience and expertise in her expanded role with ICEE in India.

Vallam S. Rao BOptom
Vallam has been ICEE Coordinator for India since October 1999. He is currently studying a Master of Optometry leading to a PhD at the University of New South Wales, Australia.

Over the years, Vallam has been an extremely valuable member of the ICEE team in identifying educational needs, developing and implementing ICEE programs. He assisted in the facilitation of the first PEP education program at the LV Prasad Eye Institute, 1999 and has continued to be a key facilitator in the EPEP and PTP Programs throughout India.

INDONESIA

Cheni H.T. Lee OD
Cheni H.T. Lee graduated with a Doctor of Optometry degree from the Centro Escolar University, Philippines. At present, she is a senior contact lens consultant and educator at the Academy of Refractionist Optician Leprindo, Jakarta, Indonesia. Cheni has participated and mentored in primary eye care training of East Timorese nurses in Dili, Timor Leste and provided assistance to the ICEE Timor Leste project. She became the ICEE National Coordinator for Indonesia in 1999 with an instrumental role in identifying educational needs, and developing, translating and implementing programs from ICEE.

CHINA

Adam Sun Jinyun BSc MBA
Adam first completed an Engineering degree from Zhejiang University in China in 1994 before completing his MBA from the Anhui Finance and Commerce College, China. He has worked as Chief Coordinator of the Fudan-MIT International MBA program and is currently Senior Project Manager of the Fudan Management Consulting Company in Shanghai.

Adam joined the ICEE Professional Education Team in 2004 as Marketing Educator for China and has been a valuable member of the team with his experience and outstanding presentation skills. In 2001, Adam won the “Outstanding Presentation” in Austin at the Global Finance Competition.

Ivy Liu Ya BEcon MAdmin
Ivy received her Economics Degree from the Department of International Business Management, Fudan University in 2002. Currently, she is undertaking a PhD at the same university whilst working as a senior consultant for the Fudan Business Consulting Co Ltd.

Ivy has valuable research, teaching and consultation experience ranging from being co-teacher of Marketing Management as part of the Fudan-BI. International MBA Program to research on international joint ventures. She joined the ICEE Professional Education Team in 2004 as Marketing Educator for China.

Dr Xiaoping Zhu BSc(Psych) PhD
Xiaoping received his Bachelor of Psychology degree from the University of Hangzhou in 1982. In 1989, he completed his PhD in Psychology from the East China Normal University. From 1992 to 1994, Xiaoping was Postdoctorate Research Fellow at the School of Psychology at the University of New South Wales, Australia.

Xiaoping has previously worked as a Psychology lecturer at various educational institutions in China and Australia and as a clinical psychologist in Australian hospitals. He currently works as the Director and Senior Consultant at the Shanghai Tecwit Consulting Co Ltd, China. Xiaoping joined the ICEE Professional Education Team in 2004, where he was appointed as Communications Educator for China.
BOARDS OF DIRECTORS And EXECUTIVE

Scientia Professor Brien Holden
BAppSc PhD DSc OAM, ICEE Chair

Brien Holden is Scientia Professor of Optometry at the University of New South Wales and Deputy Chief Executive Officer of the Vision Cooperative Research Centre. He was founder and Director of the Cornea and Contact Lens Research Unit and the Cooperative Research Centre for Eye Research and Technology. Professor Holden has held numerous academic, professional and university appointments; is active in international education and research and is the author of over 180 scientific papers. He is also very active in public health. As well as his role in ICEE, he was appointed as the Chair of the Refractive Error Working Group of the World Health Organisation, and is Deputy Co-Chair of the Vision 2020 Australia group, which aims to work collaboratively to support efforts to eliminate avoidable blindness. Professor Holden is internationally recognised for his work in eyecare. He has received four Honorary Degrees of Doctor of Science from international universities as well as numerous other national and international awards, including the Medal of the Order of Australia in 1997 for contributions to eyecare research and education.

Associate Professor Deborah Sweeney
BOptom PhD, ICEE Board Member

Deborah Sweeney is Associate Professor and Chief Executive Officer of the Vision Cooperative Research Centre (Vision CRC). Previously Deborah was Executive Director for 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. Her major research area has been corneal physiology, and her work has been instrumental in developing an understanding of the physiology of the human cornea and the effects of contact lens wear on corneal function characteristics. Associate Professor Sweeney is also active in Australian and international optometric and ophthalmic organisations, including Executive roles in the International Society for Contact Lens Research, The Keratoprosthesis (KPro) Study Group, the International Association of Contact Lens Educators and VisionCare New South Wales.

Professor Brian Layland BSc OAM, ICEE Board Member and Director of Aboriginal Programs

Brian Layland is an optometric practitioner who is very active in the scientific and professional communities. Since 1955 he has been a member of the Council of the Australian Optometrical Association (NSW Division), and is a former National President of the AOA (1976-1979), National Vice President (1971-1989) and State President (1971-1972). He was Vice-President of the International Optometric and Optical League (1978-1979). In education he is a visiting lecturer and committee member of the UNSW School of Optometry and Vision Science, visiting Professor through the Vision Cooperative Research Centre (Vision CRC) and previously through the Cooperative Research Centre for Eye Research and Technology. Professor Layland is member and Chairman of many professional committees involved with government at State and Commonwealth levels. He is a Board Member of the Vision CRC and is the chief architect, overseer and Secretary of the Board of VisionCare NSW, which administers the NSW Government Spectacle program. 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 OAA (NSW Division).

Professor Desmond Fonn DipOptom MOptom, ICEE Board Member

Desmond Fonn is an 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; and founding Member of the International Association of Contact Lens Educators in which he serves as Vice President.
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 Senior Vice President/President-Elect of International Agency for the Prevention of Blindness (IAPB). He has also been the Secretary-General of IAPB (1998-present), and former Chairman of the South-East Region (1994-1999). He holds one of the Chairs of the Academia Ophthalmologica Internationalis; and is 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 (1995-present), and Fellow of the American Academy of Ophthalmology. His awards include the 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 Senior Honor Award of the American Academy of Ophthalmology 1993; Doctor of Science, honoris causa from University of New South Wales in 2001; and the Padmashri Award (Republic Honour from the President of India) in 2002.

Dr. Kovin Naidoo, BSc BOptom OD MPH, ICEE Board Member and Director of ICEE Africa

Dr Naidoo is the former Head of the Department of Optometry at the University of Durban-Westville, South Africa and plays an active role in the development of optometry and eyecare services in Africa and other developing countries. A Fulbright scholar, Dr Naidoo received his BSc in 1988 and his BOptom in 1992 at the University of Durban-Westville; his Doctor of Optometry from the Pennsylvania College of Optometry in 1995 and Masters in Public Health from Temple University in 1995. His expertise and commitment to public health has led to both national and international roles, including as co-chair of the International Agency for the Prevention of Blindness (IAPB) Africa; Chairperson of the Esati Public Health Initiative; Member of the Public Health and Development Committee of the World Council of Optometry; chairperson of the board of trustees of the South African Red Cross Air Mercy Services; Member of the Department of Health Prevention of Blindness Commission and Provincial Eyecare Committee. He is also an Adjunct Faculty Member of Pennsylvania College of Optometry. Dr Naidoo was chosen as the African Optometrist of the Year for 2002/3 in recognition of his work in blindness prevention in Africa.

Dr Garry Brian MB ChB FRACS FRANZCO, Chief Executive Officer, ICEE

Garry Brian is an ophthalmologist with extensive experience in eye service development for indigenous Australians and in developing countries. Starting his career in 1989, Garry has worked in hospitals throughout Australia, as well as in private practice. His interest in the area of indigenous health led to a position firstly on the Medical Advisory Board and later as Medical Director for the Fred Hollows Foundation, and he was instrumental in the planning, delivery, and assessment of the remote area eye services that lead to the 1997 Commonwealth Government review of Aboriginal and Torres Strait Islander eye health. He has held a number of academic appointments including Associate Professor, as a conjoint appointment at Mount Isa Centre for Rural and Remote Health with the School of Public Health and Tropical Medicine, James Cook University; and Clinical Associate Professor, Department of Surgery, The University of Queensland; and has published a number of papers as well as manuals and reports in this field.

Mr Craig Butler BOptom FACBO FCOVD, Director of Professional Education

Craig 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.
Information required under the ACFID Code of Conduct

Operating statement
For the year ended 30 June 2004

<table>
<thead>
<tr>
<th></th>
<th>2004 $</th>
<th>2003 $</th>
</tr>
</thead>
<tbody>
<tr>
<td>Revenue</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Donations and gifts</td>
<td>55,886</td>
<td>1,899,816</td>
</tr>
<tr>
<td>Grants</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Australian</td>
<td>1,379,125</td>
<td>3,607</td>
</tr>
<tr>
<td>Other overseas</td>
<td>1,306,207</td>
<td>79,876</td>
</tr>
<tr>
<td>Investment income</td>
<td>-</td>
<td>4,254</td>
</tr>
<tr>
<td>Other income</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sale of goods</td>
<td>250,425</td>
<td>56,920</td>
</tr>
<tr>
<td>Commercialisation proceeds</td>
<td>-</td>
<td>1,198,995</td>
</tr>
<tr>
<td>Miscellaneous</td>
<td>115,790</td>
<td>70,705</td>
</tr>
<tr>
<td>Total revenue</td>
<td>3,107,433</td>
<td>3,314,173</td>
</tr>
</tbody>
</table>

|                  | 2004 $  | 2003 $  |
| Disbursements    |         |         |
| Overseas projects|         |         |
| Funds to overseas projects | 684,816 | 401,778 |
| Other project costs | 1,686,353 | 760,020 |
| Domestic projects | 132,535 | 428,331 |
| Fundraising costs |         |         |
| Public           | 567,493 | 270,247 |
| Administration   | 676,984 | 1,007,348 |
| Total disbursements | 3,748,181 | 2,867,724 |
| Excess of revenue over disbursements (shortfall) | (640,748) | 446,449 |
| Funds available for future use at the beginning of the financial year | 397,487 | (48,962) |
| Funds available for future use at the end of the financial year | (243,261) | 397,487 |

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.

Statement of financial position
As at June 2004

<table>
<thead>
<tr>
<th></th>
<th>2004 $</th>
<th>2003 $</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash</td>
<td>734,867</td>
<td>287,409</td>
</tr>
<tr>
<td>Plant and equipment</td>
<td>16,617</td>
<td>7,296</td>
</tr>
<tr>
<td>Other</td>
<td>916,564</td>
<td>1,014,042</td>
</tr>
<tr>
<td>Total assets</td>
<td>1,668,048</td>
<td>1,303,747</td>
</tr>
<tr>
<td>Liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Creditors and borrowings</td>
<td>1,823,941</td>
<td>810,209</td>
</tr>
<tr>
<td>Provisions</td>
<td>87,368</td>
<td>101,051</td>
</tr>
<tr>
<td>Total liabilities</td>
<td>1,911,309</td>
<td>911,260</td>
</tr>
<tr>
<td>Net (liabilities)/assets</td>
<td>(243,261)</td>
<td>397,487</td>
</tr>
<tr>
<td>Equity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Funds available for future use</td>
<td>(243,261)</td>
<td>397,487</td>
</tr>
<tr>
<td>Total surplus/(deficiencies) in equity</td>
<td>(243,261)</td>
<td>397,487</td>
</tr>
</tbody>
</table>

Audited full financial statements are available upon request.
Independent audit report to the members of International Centre For Eyecare Education Ltd

Audit Opinion

In our opinion, the information reported in the summarised financial report set out on pages 17 and 18 is consistent with the annual statutory financial report from which it is delivered and upon which we expressed our audit opinion in our report to the members dated 15 October 2004. 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 2004 in accordance with the Australian Accounting Standards.

PricewaterhouseCoopers

C McIlveen       Sydney
Partner        18 October 2004

Directors' declaration

The directors declare that the financial statements and notes set out on pages 3 to 13:

(a) comply with Accounting Standards, the Corporations Regulations 2001 and other mandatory professional reporting requirements; and
(b) give a true and fair view of the company's financial position as at 30 June 2004 and of its performance, as represented by the results of its operations and its cash flows, for the financial year ended on that date.

In the directors' opinion:

(a) the financial statements and notes are in accordance with the Corporations Act 2001;
(b) there are reasonable grounds to believe that the company will be able to pay its debts as and when they become due and payable;
(c) the statement of financial performance gives a true and fair view of all income and expenditure of the company with respect to fundraising appeals;
(d) the statement of financial position gives a true and fair view of the state of affairs with respect to fundraising appeals conducted by the company; and
(e) internal controls exercised by the company are appropriate and effective in accounting for all income received and applied by the company from any of its fundraising appeals.

This declaration is made in accordance with a resolution of the committee members.

Professor Brian Layland       Sydney
Director        12 October 2004
ICEE wishes to thank all those individuals, communities and companies who have supported ICEE in the past year. Without this assistance, ICEE would not be able to achieve its goal of Giving Sight.

Special acknowledgment should be given to the Institute for Eye Research (IER), the Vision Cooperative Research Centre and Essilor International for providing intellectual and financial resources to ICEE.

The generosity of all of these organizations and people are gratefully acknowledged:

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 College of Surgeons
- Royal Flying Doctors Service
- World Council of Optometry
- World Optometric Foundation

Education & Research Facilities / Institutions
- Vision Cooperative Research Centre
- LV Prasad Eye Institute, India
- Institute for Eye Research
- University of Waterloo, Canada
- School of Optometry, Queensland University of Technology
- Centre for Eye Research Australia
- School of Optometry and Vision Science, University of New South Wales
- Victorian College of Optometry
- Bausch and Lomb School of Optometry, Hyderabad India
- National Centre for Health Education and Training, Timor Leste
- Department of Optometry, University of Durban-Westville, South Africa
- OVRF - Optometric Vision Research Foundation

Aboriginal
- Aboriginal community controlled health services
- Aboriginal Health and Medical Research Council

Government
- Federal Department of Health and Ageing, through the Office of Aboriginal and Torres Strait Islander Health NSW
- Health Insurance Commission
- Ministry of Health, Timor Leste
- Ministry of Health, Tuvalu
- Ministry of Health, Eritrea
- Ministry of Health, Cambodia
- NSW Department of Community Services
- NSW Government Rural Aerial Health Service

NGOs
- Australian Council for International Development
- Christian Blind Mission International
- Fred Hollows Foundation, Australia
- Fred Hollows Foundation, New Zealand
- IRIS, Cambodia
- ICARE, India
- Mekong Eye Doctors
- Optometric Vision Research Foundation
- Red Cross Air Mercy Service, South Africa
- Sight Savers International
- Spec Savers South Africa
- VisionCare NSW
- Silverton Foundation

Optical Industry
- Baby Banz
- BOC Instruments
- Designs for Vision
- Device Technology
- Essilor International
- Essilor Australia
- Hoya Lens Australia
- Jonathan Sceats Eyewear
- Marchon Eyewear Australia
- Optical Manufacturers
- Spectacular Specs
- Optical Superstore
- UV Wraps & Straps
- Younger Optics
National Sunnies for Sight Day Corporate Supporters

Gold
- Channel 9
- Essilor/Nikon
- Southern Cross Talk Radio
- The Cancer Council Sunglasses

Silver
- Classic Press
- Created Publishing (Teachers Professional Diaries)
- CIBA Vision (Focus Dailies)
- FAL Lawyers
- Institute for Eye Research
- Jonathan Seats Eyewear
- ProVision
- Sports Force

Other
- Ambient Advertising
- Australian Nursing Federation
- Feehan Communications
- Golden Chef
- Hair & Beauty Industry Australia
- Independent Education Union of Australia
- Optometrists Association Australia
- The Age
- The Financial Review
- The Intermedia Group
- United Firefighters Union of Australia

Springwood East Timor Support Group
- Perkins Shipping Pty Ltd, Darwin NT
- TOLL, Revesby
- Tracer Aluminium Australia Pty Ltd

Optometrist practices
- Glenn Howell Optometrist
- Kay Street Optical
- Kosmac & Clemens Optometrists
- Mitcham Eyewear
- McMonnies & Boneham
- Optriware
- Ovenden Optometrists
- Paul Brown Optometrist
- Paul Stevens Optometrist
- Philip Milford Optometrist

Individuals
- Marc Alexandre
- Wanta Ahuta
- Marcelo Amaral
- Eric Bernard
- Barry Brown
- Katherine Collett
- NSW Aboriginal Eye Health Coordinators
- Liz Cross
- Coen de Jong
- Dr Jambi Garap
- Trish Gloss
- Vasu Gounden
- Tecele Hagos
- Andrew Maver
- Amee McFadden
- Daniel McNamara
- Dr Tekaa Nelesone
- NSW Aboriginal Vision Program Optometrists
- Vic O’Callaghan
- Alain Petard
- Professor Hugh Philpott
- Talica Ratulevu
- Sarmento
- Mario Serekai
- Dr B R Shamanna
- Dr Biu Sikivou
- Murray Smith
- Dr John Szetu
- Tim Thurn
- Carmel Williams
- Carley Wood
- Carol Woolcott

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- Anna Palagy
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- Shane Parker
- Selim Soytemiz
- Tsu Shan Chambers
- Chuan Ooi
- Michelle Huang
- David Wilson
- Craig Butler
- Lakshmi Shinde

ACKNOWLEDGMENTS

46
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Email: icee@icee.org

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Dr Garry Brian - Executive Director
Prof. Brian Layland - Director Aboriginal Vision Programs
NSW (Board Member)

Public Health
Renee du Toit - Program Director Human Resources
Jacqueline Ramke - Program Director Timor Leste
Anna Palagyi - Project Officer
Lisa McMurray - Project Director Western Pacific
Jo Thomson - Program Director
Colina Waddell - Executive Secretary
Edwina Hart - Administrative Assistant
Dr Cynthia Willis - Refractive Error Working Group Coordinator

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Craig Butler - Director of Professional Education
Chuan Ooi - Program Director: Professional Education
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Tsu Shan Chambers - Education Coordinator
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Hayley McDonald - Administration Coordinator

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Ms Palesa Dube - Deputy Director and Training Manager
Ms Daveena Brain - Programmes Manager
Ms Prinindha Govender - Research and Training Optometrist
Mr Kesi Naidoo - “Flying Optometrist”
Ms Yashika Inderjeet - Community Optometrist Stanger
Ms Cindy Moodley - Spectacle Distribution Administrator
Ms Thokozani Sibisi - Spectacle Distribution Assistant
Ms Mirashne Rajah - Office Administrator
Ms Anna Mbonami - Clinic Assistant Stanger
Ms Phилиswe Mathonsi - Housekeeper, Training House
Ms Diane Wallace - Optometrist
Mr Nashua Naicker - Optometrist
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Michelle Huang – Coordinator China

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Vallam Rao – Coordinator India
Kavitha Jayanna – Administrative Assistant

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Cheni H.T. Lee – Coordinator Indonesia

Consultants
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May Ho - Optometric Committee Member
Genevieve Napper - Optometric Committee Member
Jane Keirath - Optometric Committee Member
Sara Maria Pereira - Project Officer Timor Leste
Bronwen Phillips - Optometrist Aboriginal Medical Service Co-operative Ltd
Jane Satterford - Optometrist Aboriginal Medical Service Co-operative Ltd
Albert Lee - Optometrist Aboriginal Medical Service Co-operative Ltd
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Merri Koh - Optometrist Aboriginal Medical Service Co-operative Ltd
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Ivy Liu Ya - Consultant Professional Education
Subashree Srinivasan - Consultant Professional Education
Adam Sun Jinyun - Consultant Professional Education
Hsien Jin Teoh - Consultant Professional Education
Tim Thurm - Consultant Professional Education
David Wilson - Consultant Professional Education
Zhu Xiaoping - Consultant Professional Education
ICEE ANNUAL REPORT

ICEE is a signatory to the Australian Council for International Development (ACFID) 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 of Conduct demonstrates our commitment to ethical practice and public accountability. More information about the ACFID Code of Conduct can be obtained from ICEE, and from ACFID at:
Website: www.acfid.asn.au
Tel: (02) 62851816 Email: acfid@acfid.asn.au
Fax: (02) 62851720

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: 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 grateful for the support it receives from the Institute for Eye Research. In addition to financial support ICEE’s promotional materials are proudly donated by the Institute. The Institute for Eye Research is one of the elite Medical Research Institute’s in Australia. Located in New South Wales, the Institute focuses exclusively on excellence in eye and vision research through investment in people, systems and innovation.

ICEE thanks the Optometric Vision Research Foundation (OVRF) for its financial support. The OVRF raises funds to support optometric education and research.

The International Centre for Eyecare Education (ICEE) is a core participant in the Vision Cooperative Research Centre (Vision CRC), based at the University of New South Wales, Sydney Australia. The Vision CRC is a unique worldwide collaboration of 30 of the world’s best organisations involved in eyecare and vision research, education and delivery.
Our Mission

Our mission is to eliminate avoidable blindness and vision impairment, particularly that due to uncorrected refractive error.