ICEE ANNUAL REPORT 2005-6

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Cover Photography: Peter Carrette and Operation Eyesight Universal
giving sight
Contents

Chair’s Message ........................................ 2

About ICET ............................................ 4

Education ............................................... 6

Research ............................................... 10

Service Delivery ..................................... 14

OptiShop .............................................. 16

Global Resource Centre .......................... 17

Country Activities ................................. 18

Fundraising Activities ............................ 31

Board of Directors ................................. 32

Financials ............................................ 36

Acknowledgements ............................... 40

ICEE Offices and Staff ............................ 42
Blindness and visual impairment for distance vision affects over 250 million people worldwide; 90 percent occurring in the developing world. Such vision loss has a tragic impact on the lives of the people affected, their families and the communities in which they live. Tragically, half of this blindness and visual impairment is caused by uncorrected distance refractive error - *simple lack of glasses*.

In addition, over 150 million older people suffer from uncorrected presbyopia - lack of near vision correction.

In October 2005, the International Centre for Eyecare Education (ICEE) evaluated its strategy and operations in order to measure the success to-date of its mission - the elimination of avoidable blindness due to uncorrected refractive error. A meeting of the ICEE global team superbly run by Chief Operating Officer – Programs and Delivery, Kovin Naidoo, and backed up by the whole ICEE team, resulted in some key organisational decisions and changes in direction. Strategies were reviewed and defined in order to align programs and operations with clear goals, and to incorporate these within fundamental focus areas. A very important unifying philosophy was that of *One ICEE*: no matter where ICEE exists, it will maximise synergies and work as a team.

**Highlights in 2005-2006**

In early 2006, ICEE launched the *Global Resource Centre (GRC)*. The GRC is a centralised distribution centre that offers greater accessibility and reduced cost for spectacles and optical equipment across the world for non-government organisations (NGOs) and governments.

The first ICEE *Optishop*, a “one-stop” service centre, designed to deliver same day, affordable eyecare services that are sustainable and that will provide continuous employment for local eyecare personnel, was launched in the Haydom Lutheran Hospital in Tanzania in May 2006. This is the forerunner in ICEE’s goal to establish Optishops throughout Africa and other areas of the developing world.

An important achievement of ICEE was the award of a **US$300,000 grant from the United States Agency for International Development (USAID)** to fund a program to deliver eyecare services to children in need in South Africa. The program includes...
screening, eye examinations for those in need and the provision of spectacles. Such programs develop capacity building models for existing government structures to deliver ongoing services that can be used in other sub-Saharan countries. They also help greatly in highlighting the need for an organised approach to child eye health.

Our activities in Africa have this year been expanded by the opening of new offices in both **East (Uganda) and West (Nigeria) Africa**. Through these nodes, ICEE initiated Low Vision practical training for optometrists from Tanzania, Nigeria and Uganda and the formation of the Low Vision Working group in Uganda. ICEE has also established a Community Eye Health Course in partnership with the Nigerian Optometric Association.

In **Sri Lanka**, a country tragically torn by civil war, we have had numerous teams of optometrists from the Optometrists Association of Australia (OAA) and ICEE staffers providing eyecare to the tsunami affected areas, and lately the tea plantations. Working under very difficult conditions, but with outstanding help from Sri Lankan NGOs, Community Health Centres, and the Australian Medical Aid Foundation, ICEE has given sight to more than **33,000 people** and, importantly, trained 16 local health care workers as **optometric technicians** since operations began in March 2005. When the civil war made it too dangerous for ICEE optometrists to visit Sri Lanka, these local eyecare personnel still carried on the eyecare services work started by ICEE in various districts - demonstrating the real value of creating in-country capacity.

**Professor Brian Layland**, founder and director of ICEE’s Aboriginal Eyecare Program, was honoured with the prestigious award for “Excellence in Health Service Delivery by a Non-Aboriginal Person” by the New South Wales (NSW) Department of Health. This category acknowledges the most significant contribution towards the delivery of health services to Aboriginal people in NSW by a non-Aboriginal person. Brian initiated, this year, the 78th Aboriginal Medical Service based eyecare location. Collaboration between NSW OAA optometrists and ICEE staffers (including himself) at these locations, resulted in 2,390 pairs of glasses prescribed and supplied without cost to Aboriginal people in need.

Finally, 2005 / 2006 has seen ICEE undertake some exciting new projects as well as achieve successes through our programs that are already in place. Our achievements are the result of the efforts of a group of dedicated and professional staff working throughout the world, whom I thank whole heartedly. Many of our activities would not have been possible without the contributions of our supporters, sponsors and collaborators. Though too numerous to name, they include the Institute for Eye Research, Sight Savers International in Africa and the Aboriginal Health and Medical Research Council, who show immense generosity of spirit as do the employees of all the One Vision entities in Australia and Africa.

Professor Brien Holden OAM, Chair of ICEE
The International Centre for Eyecare Education (ICEE) vision is to create a world where every individual has access to affordable eyecare.

In the world today, 250 million people are blind or visually impaired simply because they don't have glasses. While 80 percent of the world's blindness is preventable, people who live in developing countries are 5 to 10 times more likely to go blind than those in the developed world. In developed countries there is approximately one eyecare practitioner for every 10,000 people. In some locations in Africa the ratio may be only one practitioner per 500,000 people, and the situation is worse in many rural areas. Blindness has a personal, social and economic impact, not only for the individuals affected, but also for their families and the communities in which they live.

The ICEE aim is to rid the world of avoidable blindness and vision impairment, particularly that caused by uncorrected refractive error. Refractive error is an optical defect of the eye that prevents effective focus of images, and most visual impairment due to refractive error is correctable with the use of glasses. Our strategy is to address this situation by creating sustainable outcomes through service delivery systems that can be potentially implemented on a global scale.

Founded in 1998, ICEE is a not-for-profit, non-government organisation (NGO). ICEE works in Australia and internationally with local partners to develop sustainable solutions to avoidable blindness and vision impairment. One of ICEE’s aims is to promote a clearly-defined role for optometry in health care in developing countries and to illustrate the value it will add to health care delivery in general, and eyecare delivery in particular.

ICEE’s aims link with the Vision 2020: The Right to Sight initiative, launched in 1999 by the World Health Organization (WHO) and the International Agency for the Prevention of Blindness (IAPB). Vision 2020’s mission is the global elimination of avoidable blindness by the year 2020, with its role to initiate and facilitate collaboration between eyecare organisations, leading advocacy efforts and raise community awareness. ICEE is a principal partner and founding member of Vision 2020 Australia.

The activities of ICEE, as part of the Vision 2020 group, contribute to many of the objectives of the UN Millennium Development Goals - a set of targets agreed upon by the world’s governments and leading development agencies, that aim to tackle the major problems faced by the world’s poor. By eliminating avoidable blindness, a significant contribution will be made to the achievement of many of the Development Goals, including the eradication of extreme poverty and hunger, achieving universal primary education, reducing child mortality, combating HIV / AIDS, malaria and other diseases, and developing a global partnership for development.

The ICEE approach to the prevention and correction of blindness and visual impairment centres focuses on three main activities:

- **Education** – education and training programs, including the training of eyecare personnel on
a number of levels and teaching trainees to eventually act as educators.

- **Research** – development of delivery models, surveys that assess needs in communities and evaluative studies that provide data and information on eyecare service models.

- **Service delivery** – development of eyecare clinics, diagnostic services and provision of equipment and glasses.

These activities function both singularly and in an integrated manner incorporating education, research and service delivery into all programs to work towards achieving sustainable eyecare delivery models.

Collaboration is integral to ICEE’s efforts. Establishing relationships with local governments, communities, health care bodies, eyecare organisations, NGOs, industry supporters, volunteer groups and eyecare professionals, facilitates the means by which we achieve our goals. It is a major principle of ICEE’s operational method to coordinate its activities with other service providers and stakeholders that share its objectives, in order to make the most efficient use of the resources and expertise available for eyecare. Importantly, ICEE also needs to create links with governments to seek approval for, and to determine the specific requirements of undertaking activities within a country.
Education

Education is at the core of ICEE’s mission and strategy. Our aim is to establish high-quality and professional eyecare personnel and to ensure that eyecare services are provided to local populations continuously and effectively.

Human resources development is one of the key strategies of World Health Organisation (WHO) and the Vision 2020 global initiative to eliminate avoidable blindness. To ensure long-term sustainable impacts are achieved, ICEE believes it is vital to continue moving towards local capacity building; training, mentoring, the continuing education of eyecare personnel and the provision of equipment mean eyecare services become more accessible and available to local populations.

The training of personnel is managed simultaneously with the establishment of infrastructure, which ensures clinical facilities are continuously available for eyecare workers on completion of their training. ICEE provides education for varying cadres of eyecare personnel. This includes educating personnel for public health purposes, improving best eyecare practice and providing professional training for practitioners to act as educators themselves.

ICEE courses are designed in modules with a curriculum supported by manuals and activities for each level. Conducted in small groups, personnel training is competency-based, experiential learning. The programs include follow-up, continuing education and support and mentoring.

Community Level Personnel

Community level personnel are those trained to promote awareness of eye health conditions, to screen for common eye diseases and to perform various logistical duties associated with the provision of ongoing eyecare services. Local eye health coordinators are trained in vision screening, eye health awareness, to organise outreach clinics, and where appropriate, to dispense glasses to correct presbyopia.


Mid-Level Personnel

Mid-level personnel are a cadre of primary eyecare personnel who are trained to be able to provide one or more of the following eyecare services: refraction services; eye disease screening; prescribing and dispensing spectacles; cutting and fitting spectacles; and coordinating patient referrals as appropriate.

The ICEE Refraction Course teaches eye health workers to be able to identify, measure, and correct refractive error and, where appropriate, prescribe spectacles.

The ICEE Primary Eyecare Course teaches eye health workers to be able to measure visual acuity, examine the eye and identify the more common eye conditions. Generic management procedures and treatment are described for each condition. These can be adapted, if necessary, to meet specific
conditions in different settings.

The ICEE Train-the-Trainer Course provides trainers with the knowledge and skills required to train personnel. As well as training techniques, this course involves learning about designing and delivering an ICEE Primary Eyecare or Refraction course.

In 2005-2006, ICEE trained:
- 12 eyecare personnel to be able to perform refraction and dispense spectacles;
- 31 eyecare personnel to be able to perform primary eyecare screenings;
- 2 eye health trainers; and
- 29 ophthalmic nurses.

**Professional Personnel**

The ICEE Professional Education programs are designed to improve the knowledge and skills of eyecare practitioners, educators and industry personnel. This program has been conducted for educators, undergraduates, and eyecare practitioners in the Asia-Pacific region since 1999.

Professional education courses cover the prescribing and dispensing of glasses, and low vision. Courses are typically one and two day events including lectures, forums and hands-on workshops, conducted by ICEE presenters in the local language.

- **Varilux Academy Asia-Pacific (VAAP)**
  
  ICEE has been conducting Varilux Academy education programs with the support of one of the world's largest manufacturers of corrective spectacle lenses, Essilor Asia-Pacific, since 2003. Since then approximately 3,000 practitioners in the Asia-Pacific region have been trained to fit and prescribe advanced-design ophthalmic lenses.
lenses. This has benefited a large number of people suffering from presbyopia, a condition affecting the lens of the eye, usually among people aged over 45, which leads to difficulty reading and recognising small detail.

In 2005-2006, VAAP has conducted training in India, Australia, the Philippines, Singapore, Malaysia, Indonesia, China, Hong Kong and Korea in local languages.

• **Varilux Academy Educator Initiative (VAEI)**

  The VAEI program has supported nearly 100 educators from 33 schools to incorporate Educators’ Presbyopia Education Program (EPEP) into their curriculum since its inception in 2003.

• **Educators’ Presbyopia Education Program (EPEP)**

  This program is an integral part of the VAEI. ICEE developed EPEP to enhance the knowledge and teaching skills of educators and raise the standard of undergraduate optometry education in Asia-Pacific teaching institutions. In 2005-2006, EPEP was conducted in India, Australia, the Philippines, Malaysia, Indonesia, China and Korea.

• **Presenter Training Program (PTP)**

  This program supports local educators and industry staff to present ICEE education materials to practitioners enabling more frequent and wider availability of practitioner education programs in the Asia-Pacific. PTP materials have been translated for practitioner education programs conducted in Chinese Mandarin, Bahasa Indonesian, Japanese and Korean.

  In February 2006, four education and marketing managers from Essilor Asia-Pacific headquarters were trained and certified to present VAAP throughout the region. Another six presenters were certified in June to present VAAP materials to Korean practitioners.

In 2005-2006, ICEE trained:

• 900 practitioners in the Varilux Academy Asia-Pacific program;
• 45 educators in the Varilux Academy Educator Initiative program;
• 35 educators in the Educators’ Presbyopia Education Program; and
• 10 presenters in the Presenter Training Program.

**Low Vision National Focal Persons (NFP) Course**

The WHO Low Vision Working Group appointed ICEE to coordinate and host the NFP course in Africa. Candidates from 15 African countries were admitted to the course, which aimed to ensure that low vision services in Africa are accessible and affordable. The course provided the knowledge and skills for an NFP to be able to work with national Vision 2020 committees, to perform advocacy, and to coordinate national low vision programs.

In 2005 - 2006, ICEE trained 15 NFP in Africa.
ICEE’s research aims are:

1. to develop cost-effective and appropriate models for the provision of eye health care services;
2. to determine the prevalence of specific eye conditions (mainly uncorrected refractive error) in communities; and
3. to monitor and evaluate our in-country programs.

Our research efforts work in concert with the provision of services in order to firstly identify the needs of communities and, secondly, to collect data in collaboration with the activities of the service delivery teams. Research plays a crucial role in the development of service delivery models, and the data retrieved through our programs provides information that is utilised to analyse these models.

The research strategy is driven by our commitment to achieving the goals of Vision 2020 and the World Health Organisation (WHO) Refractive Error Working Group (REWG) of WHO and International Agency for the Prevention of Blindness (IAPB). This involves collaborations with governments, NGOs, eyecare professionals and other agencies involved in blindness prevention in order to facilitate the planning, development and implementation of sustainable eyecare programs.

The REWG reviews issues and strategies relating to the elimination of avoidable blindness. These include assessing the magnitude of the global and regional burden of uncorrected refractive error and the development of appropriate resources to tackle the problem. 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 assists the REWG in these endeavours by gathering evidence through literature reviews and acting as the secretariat for the Group.

**ICEE and the Vision Cooperative Research Centre (Vision CRC)**

ICEE is a core participant in the Vision CRC. Vision CRC is a unique worldwide collaboration of 30 of the world’s foremost organisations involved in eyecare and vision research, education and delivery, including the development of models that provide effective, affordable, and sustainable eyecare. Through our research activities and participation in this program, ICEE is seeking to create a model that will ensure the development of mid-level eyecare personnel in developing countries and improve eyecare services to Aboriginal communities in Australia.

The Aboriginal Communities Research project seeks to investigate the barriers to Aboriginal eyecare and improve the ICEE-VisionCare NSW program. A PhD student has been enrolled to conduct a cross-sectional study to determine the eyecare needs and causes of visual impairment in three Aboriginal communities.

At the international level, the Mid-Level Personnel
ICEE aims to conduct research into the use of mid-level eyecare health workers in developing countries. Human resources development is one of the key strategies employed to eliminate avoidable blindness. There is currently little systematically collected and scrutinised data on mid-level personnel, even though they are widely used and an important resource in health care. Current studies focus on the efficacy of selection of staff, training and its effectiveness, competencies, integration into health systems, outputs and health outcomes.

ICEE-Vision CRC Achievements

Achievements of the project to-date include:

- the development of curriculum and assessment for Refraction, Primary Eyecare and Train the Trainer education;
- delivery of training in a number of countries; and
- development of needs assessment for mid-level personnel training.

Research in Partnership

In 2005, ICEE was commissioned by Sight Savers International (SSI) and the Christian Blind Mission International to undertake a Situation Analysis in 10 countries in East, Central and Southern Africa. This assessment sought to investigate the delivery of refractive error and low vision services in these countries. Human resources, infrastructure, equipment and cost requirements for these services were evaluated. Preliminary data from this investigation has provided distribution figures of trained eyecare staff and an assessment on a human resource and service gap.
In November 2005, a pilot evaluation of the Red Cross Air Mercy Service and ICEE screening and refractive services took place in over 25 clinics in KwaZulu-Natal, South Africa. The evaluation sought to assess patient satisfaction and service delivery. The information gathered from this will help in the planning of a full-scale evaluation next year.

ICEE conducted and co-funded an eye health survey in two districts in Timor Leste during 2005 in co-operation with, and for, the Timor-Leste Government. The results were analysed and a report, *The Timor Leste Eye Health Survey*, was released in November 2005 by the Government of Timor Leste.

In June 2006, as a result of the apparent unmet need and limited eye health care services in some areas of Sri Lanka, ICEE consulted widely with communities in the tea plantations area, local ophthalmologists based at the Kandy Eye Hospital and local NGOs and charitable foundations in order to determine local research needs.

Grants

- **National Research Foundation**

ICEE’s Chief Operating Officer - Programs and Delivery, Professor Kovin Naidoo, was awarded a National Research Foundation grant based upon his research submission, *The Development and Evaluation of an Eyecare Delivery Model for the District Health System*. As part of the grant, two Masters and four Honours degrees will be undertaken by ICEE staff investigating visual impairment amongst children attending Schools for the Blind and the design and implementation of evaluation tools for a district eyecare program.

- **United States Agency for International Development (USAID)**

ICEE has obtained a grant from USAID for our program that aims to deliver eyecare services to children in need in two South African provinces, Gauteng and KwaZulu-Natal, and to concurrently strengthen and develop the capacity of existing government structures to deliver ongoing services.

As a result of this program:

- provincial health departments will incorporate spectacle provision for school children into their budgets;
- a successful model will be developed that the Department of Health can implement in the other seven provinces under the banner of their provincial Vision 2020 programs; and
- a profile of child eye health in South Africa will be constructed from research data captured during the program which can be utilised to assist other sub-Saharan countries in planning and developing child eye health programs.
...ICEE consulted widely with communities in the Sri Lankan tea plantations... in order to determine needs.
ICEE service delivery - conducting eye examinations, providing glasses and ongoing eyecare services to the vision-impaired - has evolved significantly since its inception with the first one day Aboriginal Clinic at Walgett, NSW, in December 1999.

Typically, service delivery has been the priority for ICEE as it moves into new locations. Where a need is first identified - for instance, following the tsunami in Sri Lanka on Boxing Day, 2004 - supplying glasses becomes the immediate priority. Working with partner organisations, ICEE optometrists, volunteers, health care and community workers deliver services - scoping, screening, conducting examinations, prescribing and fitting readymade glasses - and, where necessary, making referrals for eye surgery and medical treatment.

Through training programs and the development of relationships with in-country partners, ICEE aims to set up operational facilities where people can have their eyes examined, be fitted with glasses and, where appropriate, carry out educational programs. Service delivery is a complex undertaking. No two locations present the same circumstances, so while ICEE works towards creating a transferable model for the delivery of services, it must also be highly flexible.

**Staffing**

ICEE currently has 18 full-time eyecare experts (optometrists) delivering its international programs.

However, in creating a model for service delivery, ICEE aims to work, whenever possible, with local optometrists and eye health workers.

ICEE also sources volunteers, mainly Australian optometrists, who are willing to work in overseas locations. In Sri Lanka alone, 60 volunteers have worked on the ICEE program.

**Supplying Glasses**

Ideally, all patients requiring refractive error correction would receive custom-made prescription glasses. However, while ICEE continues to provide prescription glasses, where essential or practicable, the relatively high expense and logistical difficulty in providing custom-made glasses means that they are not always the most suitable choice. Fortunately, the many people diagnosed with refractive error can be supplied with readymade glasses, a practice which is more affordable and eliminates the logistical problems of delivery.

**Risk Management**

Risk management has become a crucial consideration for ICEE. While situations may vary dramatically, the delivery of eyecare in countries where there is political unrest presents considerable risk and potential logistical difficulties. The organisation is striving to ensure not only the delivery of eyecare and glasses, but the security of ICEE workers and volunteers. Safety assessments of in-country conditions are conducted prior to
the departure of ICEE teams and during visits. This includes the evaluation of current political situations, threats of violence, personal health risks and security of accommodation and clinics.

**Collaboration**

In all programs, ICEE seeks to partner itself with organisations with similar goals. ICEE relies on the knowledge, expertise, funding, facilities, equipment, and logistical support of a range of stakeholders when undertaking programs. These collaborative partnerships facilitate our operations. This approach has a range of benefits, including limiting the duplication of services that can potentially occur and maximising the use of limited resources.
OptiShop

ICEE, in collaboration with key stakeholders and partners, is piloting an exciting initiative that could result in the establishment of vision centres in public hospitals across Africa. Known as the “OptiShop” program, the initiative aims to provide “a one-stop shop” for eyecare.

The key objectives of the OptiShop model are to facilitate the availability of affordable eyewear, job creation and skills transfer for local personnel, building capacity for sustainable delivery systems. The OptiShop is designed as a cost-recovery project to generate income to sustain projects. An important component of the program will be training eyecare personnel, technicians, practice managers, dispensers and optometrists. It is envisaged that each OptiShop would include a workshop for cutting and fitting lenses and a fully-equipped dispensing unit.

ICEE has a long association with developing eyecare in Tanzania, a country of 37 million people. It was here, working in collaboration with the Norwegian Optometric Association and a group of final year Norwegian optometry students, that ICEE piloted the first OptiShop at Haydom Lutheran Hospital in May 2006. The development of in-house optical workshops, which can deliver a same-day service, is critical for the majority of patients in delivering a truly affordable and accessible eye health program. This clinic provides affordable ready-made spectacles and made-to-order spectacles, as well as dispensing and lens services.

An evaluation of the Haydom pilot service delivery has been conducted with a full appraisal now in progress. ICEE Africa has been invited to submit a proposal for a pilot OptiShop site in Rwanda.
In countries where the infrastructure to produce and distribute spectacles exists, such as South Africa, the cost of spectacles is relatively high and beyond the reach of those most in need. This cost reduces the number of people programs can help. Equipment is usually prohibitively expensive and provided without training and after sales service. Another issue impacting on the effectiveness of programs is the fact that individual NGOs are presently working on a piecemeal basis to supply spectacles. This approach has lead to a lack of co-ordination and unnecessary expense. One of the key challenges facing any program to deliver refractive error and low vision services is the accessibility and affordability of spectacles, devices and equipment.

ICEE has developed a Global Resource Centre (GRC) as a strategic initiative to overcome these barriers. The GRC deals with equipment and devices necessary to deliver eyecare services. The centre began operating in early 2006, using warehouses in Durban, South Africa, and Shenzhen, China, with the administrative and sales office based in South Africa.

The aim of this project is to firstly make available the different hardware and products needed to start low vision services in the Public Health sector, secondly, to provide optical devices required for the correction of refractive error and thirdly, to reduce cost through bulk purchases and customised production of ophthalmic equipment, vision assessment equipment, and low vision devices.

By developing a centralised purchasing and shipping centre, ICEE will be able to take advantage of the following:

- Volumes to drive down unit and shipping costs;
- The elimination of the duplication of efforts and resources between NGOs by developing the tracking of worldwide trends to inform purchasing decisions and resource allocation;
- Purchasers will have a single contact for the supply of devices and equipment from multiple suppliers;
- Both large and small customers can access the same cost efficiencies; and
- Large orders will be shipped directly to the country / client from the China office and a comprehensive stock will be kept in South Africa to service smaller projects in Africa.

ICEE intends to supply products and services to NGOs and governments. Through the importation of frames directly via GRC, ICEE has reduced costs and delays that have previously occurred through a shortage of frames. The new sourcing solutions are currently supplying public sector optometrists of existing ICEE community programs, the National Refractive Error Program, OptiShops and the Bureau for Blindness in South Africa.
Preventable blindness is 10 times greater in the Aboriginal population than the non-Aboriginal population in Australia. One of the main causes of vision problems in Aboriginal people is uncorrected refractive error which can be readily treated with glasses.

The ICEE eyecare program, conducted in conjunction with local Aboriginal community-managed health services, with support from the Aboriginal Health and Medical Research Council, was established in 1999. The program conducts eye clinics at 78 locations throughout NSW, and addresses the issue of Aboriginal access to eyecare services by training regional Eye Health Co-ordinators (EHC) and health workers in eye and vision screening. Patients failing the screening tests are referred to the Aboriginal Medical Service, where they receive a complete eye examination by the visiting optometrist.

Achievements:

During 2005-2006 approximately 2,600 examinations were conducted and 2,390 pairs of glasses provided at no-cost through the NSW Government Spectacles Program, which is managed by VisionCare NSW. The use of relatively local optometrists or ICEE's visiting optometrists through the ICEE program has provided a high degree of continuity, ensuring good quality of service, appropriate follow-up and the development of practitioner / patient understanding. Working with the Aboriginal Medical Service, the program now involves more than 30 ICEE and local optometrists.

The program also enables Aboriginal people with diabetes to have their eyes examined regularly by the optometrists in accordance with National Health and Medical Research Council guidelines.

In the past year a five day educational program, funded by the Office of Aboriginal and Torres Strait Islander Health, for 12 EHC and other Aboriginal health workers, was conducted by ICEE. The EHC were trained to perform eye screenings, to arrange eye clinics with visiting optometrists and to distribute glasses. They were also educated in eye anatomy, vision and eyecare services.
Following its independence from Indonesia in 1999, the nation of Timor Leste, with an estimated population of 1,000,000, had no eyecare personnel. Approximately 1 in 20 Timorese people, over 40 are blind with cataract and uncorrected refractive error being responsible for 90 percent of vision impairment.

ICEE has been working with the Timor Leste Ministry of Health (MOH) and other organisations since 2000 to develop a sustainable eyecare system. Major achievements for ICEE in Timor Leste include the establishment of an optical workshop in Dili and five eye clinics in Dili, Maliana, Suai, Oecusse and Los Palos and the training of mid-level personnel who conduct the eyecare services.

The optical workshop was established in the National Hospital in Dili in 2005 where three Timorese optical technicians have been trained to edge and fit glasses enabling the provision of custom-made glasses to all eye clinics. A permanent supply of affordable readymade glasses was established at the hospital and four district eye clinics. This system provides subsidies to individuals who cannot afford to pay for glasses. The optical workshop has become sufficiently sustainable and operates within a full cost-recovery model. A success story, and direct consequence of ICEE efforts in providing sustainable eyecare to Timorese people, is staff of the optical workshop have now set up Fo Naroman (Giving Sight in Tetun), a local NGO with the aim to support and facilitate the prevention of blindness in Timor Leste and of managing and monitoring the National Spectacle Program.

ICEE provided financial support and technical assistance to the MOH to conduct the Timor Leste Eye Health Survey in the urban Dili and rural Bobonaro districts. The survey interviewed 1,414 people over the age of 40 investigating the prevalence and causes of visual impairment, use of eyecare services, willingness to pay for services and how vision related to quality of life which resulted in a government report being released in November 2005. During the reporting year, ICEE has continued its contact with the MOH with a view of renewing its Memorandum of Understanding with the Timor Leste Government and in anticipation of the release of the National Eyecare Framework.

In 2006, ICEE participated in an outreach eyecare service delivery trip to Atauro Island and visited the eyecare nurses in Maliana, Suai and Los Palos to provide assistance with logistics and reporting.

ICEE, in partnership with Ian Melrose, supported activities of Hiam Health - a local NGO established with the purpose of giving support to the patients and outpatients at Dili National Hospital - particularly those in extreme poverty who have no
means of support while they are in hospital and away from their villages. *Hiam Health* focuses on the follow-up care of babies and children who suffer from malnutrition and the education / counselling of their parents / carers in preventative intervention methods.

In partnership with the Silverton Foundation, ICEE supported the activities of *Forum Comunicacoes Juventude Oratorio Don Bosco*, a local NGO established to look after the street children in Dili, providing them with meals, shelter and organising educational activities.

### Vietnam

Vietnam is the easternmost of the Indochinese countries. It has a population of over 80 million people, more than 70 percent of whom live in rural areas. Although there are eyecare services available, they are generally based in urban areas. There are not enough eyecare personnel in Vietnam to provide for its population, especially in rural and remote areas.

Refraction courses are conducted by Vietnamese optometrists at the Ho Chi Minh City (HCMC) Eye Hospital. In late 2005, ICEE collaborated with the Mekong Eye Doctors to manage a Train the Trainers program in Refraction in Vietnam.

The nine week program held at the HCMC Eye Hospital involved three trainers from ICEE. The aim of the program was to increase the capacity of the local refractionists and refraction trainers and to provide them with training materials that can be used for refraction training in future. Teaching methods, ocular anatomy and physiology, and theory and practice of refraction were taught. Four of the trainees were HCMC Eye Hospital refractionists, the other two were from the Vietnam National Institute of Ophthalmology Hospital in Hanoi. Current refraction course trainers at HCMC Eye Hospital also attended the course. They participated in the teaching of part of the course to the trainees.
Nurses are the sole providers of health care on the outer islands of Tuvalu, a small Western Pacific island nation located north of Fiji. ICEE works with the Tuvalu Ministry of Health on an ongoing basis to provide support for local programs. The evaluation and follow-up of eyecare training, continuing support for nurses in the delivery of community eyecare and implementation of continuing education has provided a foundation for a sustainable eyecare program in Tuvalu.

Previously in Tuvalu, ICEE has trained senior nurses in primary eyecare and the dispensing of presbyopic glasses and subsequent refresher courses on dispensing presbyopic glasses and specific training in children’s eyes. Those who had undertaken previous training were called upon to assist in the transfer of skills and knowledge to new course participants. Focus groups were held to facilitate the sharing of experience, and to discuss assistance and barriers to the provision of eyecare in remote island communities.

In June 2006, a Train-the-Trainers and Primary Eyecare Course for one senior and nine junior nurses was conducted in consultation with the Director of Public Health. The Train-the-Trainers course was designed to train a Senior Nurse who had previously undertaken ICEE Primary Eyecare training to become a trainer over a two day period. Together with the ICEE trainer, she delivered Primary Eyecare training to the group of junior nurses. These junior nurses will support the work of the previously trained nurses when they return to their home islands.
Vanuatu is a nation of over 200,000 people living on 83 islands scattered over 450,000 square kilometres of Pacific Ocean. Over 75 percent of its population lives in rural communities. Infrastructure is poorly developed and there are insufficient health facilities and trained health care professionals. Access to eyecare is difficult.

Dr John Szetu, a Solomon Islands eye surgeon, has been instrumental in setting up the Vanuatu National Eye Care Program. The backbone of this program is the training of local eye nurse practitioners to be competent in providing good quality eyecare to the communities in which they live. ICEE has been a significant contributor to the education of these nurses.

All 11 Eye Nurse Practitioners (ENP) in Vanuatu were trained previously by ICEE with a sustainable supply of affordable readymade spectacles being established for the ENPs.

In addition, ICEE has participated in a project aimed at preventing diabetes complications by providing and developing local healthcare services in Vanuatu. Funded by the World Diabetes Foundation, Denmark, this project is in collaboration with the Ministry of Health, Vanuatu, and the Australian and New Zealand Society of Nephrology.
Working with other Vision 2020 partners and NGOs, ICEE’s operations in Sri Lanka discovered a vast need for eyecare services, far beyond post-tsunami relief. Most people had never received an eye examination and were unable to pay for a pair of glasses.

ICEE has developed a three-part plan to overcome blindness and vision impairment in Sri Lanka. One part of this plan is the provision of glasses to those affected by the 2004 Boxing Day tsunami. Another is to educate and train a local workforce, and a third is to establish self-sustaining vision centres in the north, east and central highlands of the country, areas where the need for eyecare is generally most pressing.

Achievements:

ICEE’s Sri Lankan program has recorded considerable achievements.

During the year July 2005 - June 2006, 10 Australian volunteer optometry teams, each team containing approximately five optometrists, travelled to Sri Lanka to conduct 2-week eye clinics. Between them, these teams provided eye examinations to 24,750 people and provided 20,874 pairs of spectacles free-of-charge.

Concurrently during this 12-month period, a total of 15 weeks formal ICEE eye training was provided to Sri Lankan mid-level personnel. This formal training was supplemented by practical experience for the trainees as they practiced their new skills alongside the volunteer optometry teams. The result of this training is 15 trained Sri Lankan health workers able to perform eye examinations and dispense spectacles. Six of these trainees, “Optometric Therapists”, are now working independently in their communities of Batticaloa on the east coast and Kilinochchi in the north.

ICEE, in collaboration with the Fred Hollows Foundation Australia (FHF), has planned and designed an ICEE Vision Centre to be built in the northern Sri Lankan city of Kilinochchi. ICEE will be responsible for the primary health care portion of the facility. ICEE trained Sri Lankan mid-level health personnel will perform primary eyecare examinations. They will dispense ready-made or custom-made spectacles through a small optical workshop where glasses will be manufactured to order. The FHF will construct a surgical facility on the premises for patients requiring ophthalmologic attention.

In partnership with Sri Lanka’s MJF Charitable Foundation (MJFCF), ICEE commenced provision of eyecare services for the 500,000 people residing in the Hill Country region of Sri Lanka in April 2006.
The initiative was launched to address the visual needs of impoverished tea plantation workers and their families and to offer glasses or referrals where appropriate. Plans have been developed to establish the first Hill Country Vision Centre near Pelmadulla, a collaborative project between ICEE and MJFCF, to provide ongoing and sustainable eyecare services for the Hill Country population. Vision Centres, to be staffed by ICEE-trained optometric therapists, are also proposed for towns in the east, west and central tea plantation regions.

During service delivery visits to the country by the volunteer Australian optometry teams, ICEE has collected data on various eye conditions. This data now provides the basis for a formal population based survey which will determine the needs of the tea plantation population and inform strategies for developing better eyecare services in the country.

The Swiss-based NGO, International Resources for the Improvement of Sight (IRIS), provided funding for ready-made glasses to be distributed free-of-charge in 2006 to examined patients who would otherwise not be able to afford glasses. IRIS, MJFCF and another local Sri Lankan NGO, the Centre for Health Care, also provided in-country transportation, accommodation and food for the visiting optometry teams.
Africa bears the burden of the world’s blindness, with rates up to seven times higher than those in the developed world. Added to this, there is a critical lack of optometrists in the majority of countries with Schools of Optometry only existing in Nigeria, Ghana, Tanzania and South Africa.

Within South Africa, great inequalities exist in the access people have to eyecare. The Department of Health (DOH) estimates 85 percent of the population relies on public health care, though only 2 percent of optometrists are employed in the public sector. With the public sector unable to attract sufficient numbers of optometrists, particularly in rural areas, ICEE has developed programs to assist in filling the gap. The programs in place in Africa now include training courses, development of delivery models, mobile community optometrist programs and affordable spectacle supply solutions.

Achievements:

For 2005-2006, South Africa was the focus of ICEE’s refraction training, where 29 ophthalmic nurses were trained. In countries such as Nigeria, Cameroon and Uganda the objective during this period was to evaluate existing ICEE training programs and offer mentorship programs to previously trained ICEE trainers.

A pilot project on the training of primary health nurses in the use of ophthalmoscopy was conducted at the end of 2005 for the Eastern Cape Province in South Africa - the most underprivileged province with accessibility problems.

In Gauteng province, ICEE ran an awareness workshop for their health promotions team, which was attended by approximately 40 promoters.

The provision of low vision services has been ICEE’s focus in South Africa in the previous year. This has increased awareness among optometrists in low vision and ICEE has worked closely with the South African National Low Vision Committee to ensure that optometrists are trained to provide low vision services in public hospitals.

A Refractive Error program, developed in partnership with the Red Cross Air Mercy Service helps to deliver screening and refractive services through over 25 “flying” and land-based clinics in KwaZulu Natal, South Africa.

KwaZulu-Natal has 11 health districts now serviced by 31 DOH optometry posts. Eight district optometrists have been appointed in the 2005-2006
year. Three new clinics have been established by ICEE this year. As the DOH takes over a clinic’s operation, ICEE moves to establish a clinic in a new area. In the past year, five clinics have been handed over to district health and six clinics are in the process of being handed over – with only three districts now requiring visits by ICEE.

In November 2005, a pilot evaluation of this service was undertaken. The evaluation looked to analyse two key areas: patient satisfaction with the service and the glasses delivery service itself. The sample size yielded data that has led to invaluable planning and operational considerations and the study formed the foundation for a bigger, full-scale evaluation planned for September 2006.

IC EE has recently signed an agreement with the Eastern Cape Province Ministry of Health (MOH), which enables ICEE to be the sole consultant on refraction issues, provide service delivery and spectacles and assist in developing delivery models that can be implemented throughout the country.

**National Refractive Error Program**

In order to address the low ratio of optometrists in South Africa’s public sector, the National Refractive Error Program (NREP) has been established with the aim of using private sector human resources to deliver services in the public sector at no-cost to the state.

Under the NREP, private optometrists provide services and glasses on a roster system. The concept was well-received when presented to the South African National Prevention of Blindness Vision 2020 Committee by ICEE. The pilot site for the program was launched at RK Khan Hospital in Durban, KwaZulu-Natal, in August 2005. The program is also now operational in Gauteng and North West, with two new sites in Heidelberg and Rustenburg Hospitals to be implemented imminently.

The program provides management, monitoring and evaluation, while ICEE works with the district and hospitals on screening and referral sites as well as the supply of affordable glasses. The launch of NREP clinics in more than 20 locations is dependent upon negotiation with institutions, optometrists and ophthalmology departments to establish sites.

**NFP Practical Sessions in Malawi**

Rapid Assessment of children participating in a Sight Savers International (SSI)-supported integrated schools program in Malawi was conducted in four main areas - Lilongwe, Blantyre, Balaka and Salima - in late 2005. A group of 22 trainees saw a total of 463 patients and presented findings indicating that about 30 percent of the children had low vision with only 5 percent of the children found to be blind. About 17 percent of children who needed glasses did not own them. Some children needed surgical correction and there was not a single low vision device in use.

As a follow-up to this program, a collaboration has
been formed between ICEE and SSI. The intention is to address the concern that these children with correctable visual impairment are currently attending integrated schools for the blind and visually impaired. The project will offer a comprehensive assessment to these children. Following this, those children with refractive error will be given glasses, those with low vision will be fitted with the appropriate devices and a small number will be referred for other eyecare services. This project will also seek to improve the skills and knowledge of existing eyecare professionals by offering on-the-job training. Awareness of eye problems as a health issue will also be addressed within the local communities.

IAPB Southern Africa

In November 2005, the Southern Africa Regional Chair, Professor Kovin Naidoo, hosted the IAPB Southern Africa Meeting coordinated by ICEE attended by 14 representatives of NGOs and government eyecare providers. Zambia, Zimbabwe, Mozambique, Swaziland and South Africa were represented at this first regional meeting since the establishment of IAPB. The aim of the meeting was to form a relationship with all stakeholders to ensure that eyecare activities are coordinated throughout regions, to enable country audits and to facilitate the formation of partnerships to keep all stakeholders informed on the progress of eyecare.
In January 2006, ICEE opened its West Africa office in Nigeria. In the last year ICEE has established a Community Eye Health Course (an IAPB / Vision 2020 initiative) at the University of Calabar Teaching Hospital. The objective is to train practicing optometrists in refractive error and low vision with the aim of providing them with the skills to plan and implement affordable and accessible refractive services for local communities.

There is currently a refractionist training course operating at several sites in Cameroon which has recently been evaluated by ICEE. A partnership with the Nigerian Optometric Association has also been formed.
In January 2006, ICEE opened an East African regional office in Uganda. Initially its activities focused on advocacy and the task of developing local awareness of its presence and services. This involved establishing links with the DOH and other stakeholders in Uganda, including the National Eyecare co-ordinator and NGOs such as SSI, the Christian Blind Mission International, Lions Aid Norway and the Uganda Association for the Blind.

ICEE initiated low vision practical training for optometrists from Tanzania and Uganda. This has involved several projects and workshops in the region, including the Vision 2020 national planning workshop in Uganda. Through this ICEE has provided technical support for the screening of more than 500 low vision children in SSI’s integrated education program in Uganda. ICEE was also instrumental in the formation of the Low Vision Working group in Uganda and is currently on the technical task force.

The involvement of ICEE together with the Ethiopian Government and ORBIS International in establishing the soon to be launched Optometry School in Ethiopia, this year led ICEE Optometrists to visit the country.

A primary reason for their visit was to provide training and continuous professional development for the Ethiopian eye care cadres. The training group was composed of optometry technicians, ophthalmic nurses, optometrists and ophthalmologists and consisted of intensive morning lessons in theory followed by practical sessions at Menelik II Hospital in Addis Ababa.
Fundraising Activities

Currently, fundraising income is generated from the following sources: National Sunnies for Sight Day, Grandparents With a Grand Vision, Optometry Giving Sight, special events, corporate sponsorship and general public contributions.

Optometry Giving Sight

The core of the ICEE mission is uncorrected refractive error. With this in mind, ICEE has formed a partnership with the IAPB and the World Council of Optometry. 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 World Council of Optometry are critical in mobilising the funds needed to make a difference. This unique collaboration also gives all optometrists worldwide the opportunity to participate in addressing preventable blindness.

National Sunnies For Sight Day

On February 24, 2006, an estimated 300,000 Australians took part in ICEE’s National Sunnies for Sight Day. National Sunnies for Sight Day invites all Australians to wear sunglasses to work or purchase a piece of merchandise in order to help raise awareness of the importance of eye health and to raise funds for ICEE’s blindness prevention projects around the world. Just on 2,300 organisations took part in what is becoming a major event on the “charity calendar”. Schools, optometric practices, kindergartens, hospitals, sporting clubs and many workplaces across the country all became involved in this popular day.

Gala Dinner

In February, ICEE held its annual gala dinner and as the formal campaign launch of National Sunnies for Sight. The event was held at Melbourne’s prestigious Plaza Ballroom on Collins Street.

Grandparents With A Grand Vision

ICEE’s campaign “Grandparents With A Grand Vision”, invites all grandparents to consider the special relationship they have with their grandchildren and then, in turn, make a donation to help give a person sight. Grandparents are invited to give sight to a person in the developing world by making a donation on behalf of each grandchild.
Board of Directors

Scientia Professor Brien Holden BAppSc PhD DSc OAM, ICEE Chair

Brien Holden is Scientia Professor of Optometry at the University of New South Wales (UNSW), Chief Executive Officer of the Institute for Eye Research and Deputy Chief Executive Officer of the Vision Cooperative Research Centre (Vision CRC). He was Founder and Director of the Cornea and Contact Lens Research Unit (CCLRU) and the Cooperative Research Centre for Eye Research and Technology (CRCERT).

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 the World Health Organisation (WHO) 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.

Professor Deborah Sweeney BOptom PhD, ICEE Board Member

Professor Deborah Sweeney is the Chief Executive Officer of the Vision CRC. Previously Professor Sweeney was Executive Director for the CRCERT and the CCLRU of the School of Optometry and Vision Science at the UNSW. 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. 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 (AOA; 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 CRC and previously through the CRCERT. 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 a 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 UNSW 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 President of 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 (1994-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 UNSW in 2001; and the Padmashri Award (Republic Honour from the President of India) in 2002.

**Professor Kovin Naidoo, BSc BOptom OD MPH, ICEE Board Member and Director of ICEE Africa**

Professor 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 Fullbright Scholar, Professor 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 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. Professor Naidoo was chosen as the African Optometrist of the Year for 2002/3 in recognition of his work in blindness prevention in Africa.
Information required under the ACFID Code of Conduct

Operating statement for the year ended 30 June 2006

<table>
<thead>
<tr>
<th></th>
<th>2006 $</th>
<th>2005 $</th>
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</thead>
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<tr>
<td><strong>REVENUE</strong></td>
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<td>Donations and gifts - monetary &amp; non-monetary</td>
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<tr>
<td>Legacies and bequests</td>
<td>-</td>
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<td>Grants</td>
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<td></td>
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<tr>
<td>AusAID</td>
<td>-</td>
<td>-</td>
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<tr>
<td>Other Australian</td>
<td>1,862,000</td>
<td>2,073,000</td>
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<tr>
<td>Other overseas</td>
<td>1,063,232</td>
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<tr>
<td>Other income</td>
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<tr>
<td>Sale of goods</td>
<td>4,712</td>
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<td>Royalties</td>
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<tr>
<td>Miscellaneous</td>
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<td>229,942</td>
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<tr>
<td>Investment income</td>
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<tr>
<td><strong>TOTAL REVENUE</strong></td>
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<td>4,713,865</td>
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<tr>
<td><strong>EXPENSES</strong></td>
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<tr>
<td>Overseas projects</td>
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<tr>
<td>Funds to overseas projects</td>
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<td>Community education</td>
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<td>Fundraising costs</td>
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<td>Public</td>
<td>615,426</td>
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<tr>
<td>Government, multilateral and private</td>
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<tr>
<td>Administration</td>
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<td><strong>TOTAL EXPENSES</strong></td>
<td>3,875,296</td>
<td>4,547,149</td>
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Excess of revenue over disbursements (shortfall)
before extraordinary items 325,016 166,716
Extraordinary items - -
Excess of revenue over disbursements (shortfall)
after extraordinary items 325,016 166,716
Funds available for future use at the beginning of
the financial year (76,545) (243,261)
Amounts transferred to reserves - -
Funds available for future use at the end of
the financial year 48,471 (76,545)

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.

INTERNATIONAL CENTRE FOR EYECARE EDUCATION LIMITED

Information required under the ACFID Code of Conduct

Balance Sheet as at 30 June 2006

<table>
<thead>
<tr>
<th></th>
<th>2006 $</th>
<th>2005 $</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ASSETS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash &amp; cash equivalent</td>
<td>1,479,788</td>
<td>1,203,517</td>
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<tr>
<td>Plant and equipment</td>
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<td>18,462</td>
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<tr>
<td>Other</td>
<td>235,872</td>
<td>230,846</td>
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<td><strong>TOTAL ASSETS</strong></td>
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<td>1,452,825</td>
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<td><strong>LIABILITIES</strong></td>
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<tr>
<td>Trade &amp; other payables</td>
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<td>1,413,882</td>
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<td>Provisions</td>
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<td><strong>TOTAL LIABILITIES</strong></td>
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<tr>
<td><strong>NET ASSETS/(LIABILITIES)</strong></td>
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<td>(76,545)</td>
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<tr>
<td><strong>EQUITY</strong></td>
<td></td>
<td></td>
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<tr>
<td>Funds available for future use</td>
<td>248,471</td>
<td>(76,545)</td>
</tr>
<tr>
<td><strong>TOTAL EQUITY/(DEFICIENCY IN EQUITY)</strong></td>
<td>248,471</td>
<td>(76,545)</td>
</tr>
</tbody>
</table>
Independent Audit Report to the members of International Centre for Eyecare Education Limited

Audit Opinion
In our opinion, the information reported in the summarised financial report set out on pages 19 and 20 is consistent with the annual statutory financial report from which it is derived and upon which we have expressed our audit opinion in our report to the members dated November 2006. For a better understanding of the scope of our audit this report should be read in conjunction with our audit report to the statutory financial report.

Scope
We have audited the financial report of the International Centre for Eyecare Education Limited for the year ended 30 June 2006 in accordance with Australian Auditing Standards.

SWT Sydney

John R Warton

Sydney

Dated this 29 January 2006
INTERNATIONAL CENTRE FOR EYECARE EDUCATION LIMITED

DIRECTOR’S DECLARATION

The directors of the company declare that:

1. The financial statements and notes, are in accordance with the Corporations Act 2001:
   a) comply with Accounting Standards and the Corporations Regulations 2001; and
   b) give a true and fair view of the financial position as at 30 June 2006 and the performance for the year ended on that date of the company;

2. In the directors’ opinion there are reasonable grounds to believe that the company will be able to pay its debts as and when they become due and payable;

3. The statement of financial performance gives a true and fair view of all income and expenditure of the company with respect to fundraising appeals;

4. The statement of financial position gives a true and fair view of affairs with respect to fundraising appeals conducted by the company;

5. 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 Board of Directors.

Professor Brian Layland (Director)

Professor Debbie Sweeney (Director)
Acknowledgements

ICEE wishes to thank all those individuals, communities and companies who have supported ICEE in the past year. Without your assistance, ICEE would not be able to achieve its goal of Giving Sight. Special thanks also go to the volunteer optometrists and others who have generously given their time to be part of the ICEE eyecare visits throughout the world. The generosity of all of these people are gratefully acknowledged by ICEE.

**Patron & Major Sponsor**
Special acknowledgment should be given to the Institute for Eye Research, Patron of ICEE.

**Major Partners**
- Institute for Eye Research
- Vision Cooperative Research Centre, Australia
- Centre for Eye Research Australia
- LV Prasad Eye Institute, India
- International Agency for Prevention of Blindness
- Aboriginal Health and Medical Research Council
- Aboriginal Medical Services, Commonwealth of Australia
- Australian Medical Aid Foundation
- Centre for Health Care, Sri Lanka
- Christian Blind Mission International
- International Resources for Improvement of Sight
- MJF Foundation
- Red Cross Air Mercy Service, South Africa
- Sight Savers International
- VisionCare NSW
- Vision 2020
- Vision 2020 Australia

**Professional Bodies and Associations**
- Nigerian Optometric Association
- Open Training and Education Network
- Optical Distributors and Manufacturers Association
- Optometrists Association Australia
- Optometrists Association Australia (NSW)
- Optometrists Association Australia (QLD & NT)
- Optometrists Association Australia (VIC)
- Optometrists Association Australia (TAS)
- Optometrists Association Australia (WA)
- Optometrists Association Australia (SA)
- Royal Australian and New Zealand College of Ophthalmologists (NSW)
- Royal Australian College of Surgeons
- Royal Flying Doctors Service
- World Council of Optometry
- World Optometric Foundation

**Industry**
- Advanced Medical Optics
- BOC Instruments
- CIBA Vision Australia
- Essilor Asia Pacific
- Essilor Australia
• Hoya Lens Australia
• Marchon Eyewear (General Optical) Australia
• Precision Optics

Optometry
• Eyecare Plus
• Kosmac and Clemens Optometrists
• Merrington's Optometrists
• OptiWear
• Paul Brown Optometrist
• ProVision
• The Optical Superstore

Corporate Supporters
• Bullseye Direct
• Channel Nine
• Collins Booksellers
• Createl Publishing
• FAL Lawyers
• Fernwood Women's Health Club
• Freehills Lawyers
• Greenacres Instant Lawn
• Hocking Stuart Estate Agents
• Marriner Theatres
• Perkins Shipping Darwin
• Sew Quick
• Southern Cross Talk Radio
• Superprint

Universities
• Fudan University School of Business Management, Shanghai, China
• School of Optometry, Queensland University of Technology
• School of Optometry, University of KwaZulu-Natal, South Africa
• School of Optometry and Vision Science, University of New South Wales
• Victorian College of Optometry

Government
• Dili National Hospital
• Department of Health South Africa
• Department of Health KwaZulu-Natal
• Eastern Cape Province Ministry of Health
• Federal Department of Health and Ageing, through the Office of Aboriginal and Torres Strait Islander Health NSW
• Guido Valadares National Hospital (Timor Leste)
• Health Insurance Commission
• Ministry of Health, Timor Leste
• Ministry of Health, Tuvalu
• National Centre for Health Education and Training (Timor Leste)
• NSW Department of Community Services
• NSW Government Rural Aerial Health Service
• National Eye Institute (USA)
• RK Khan Hospital, Durban

NGOs and Foundations
• Australian Council for International Development
• Evangelical Lutheran Church, Tanzania
• Fo Naroman
• Fred Hollows Foundation
• Fred Hollows Foundation, New Zealand
• Mekong Eye Doctors
• Optometric Vision Research Foundation
• Silverton Foundation
• Ryder Cheshire Foundation Tibar, Timor Leste
• Task Force Sight and Life
• The City of London Tsunami Appeal
ICEE Offices and Staff

ICEE Global
Level 4 Rupert Myers Building University of New South Wales
NSW Sydney 2052 Australia  Email: icee@icee.org

- **Professor Brien Holden** Executive Chair
- **Amanda Davis** Chief Operating Officer - Management and Operations
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- **Judith Stern** Director – Public Health Education
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ICEE is grateful for the support it receives from its Patron, the Institute for Eye Research (IER). The Institute is a not-for-profit organisation and a leading international medical research institute dedicated to eye health and vision care for all. The Institute is an innovator in the field of giving. Since its inception, the Institute has given millions of dollars of cash and in-kind support to ICEE and shared the vision to give more than just sight, but hope to 250 million people around the world with refractive error.

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

ICEE is a Task Force member of the Vision 2020: The Right to Sight initiative, established by World Health Organisation (WHO), 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.

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