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The front cover image is a copy of the work of art by the well-known artist Antoni Tàpies which he donated to the Foundation in 2007.

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Photographs: Elisenda Pons (Eyes of the Sahara, 2001 and Eyes of Inhambane, 2005), Mercedes de la Rosa (Eyes of Maputo, 2002), Ferran Garcia (Sahara, 2006), Isaac Freijo (Eyes of Bolivia, 2006), Jordi Montaner (Tears of Sahara, 2000), Rui Ochoa (A Noite dos Olhos do Mundo, 2007) and other professionals that have documented the activities of the Foundation. Thanks for this solidary help.
WE ADVANCE TOWARDS SUSTAINABLE MODELS

According to the World Health Organization, infectious eye diseases such as trachoma are decreasing in the world. However, blindness and visual deficiencies, caused mainly by cataracts, are still an important barrier to people’s and their community’s development. Poverty underlines its causes at the same time that it perpetuates the diseases.

Eyes of the World made progress during 2007 in the establishment of sustainable models of ophthalmologic care that should provide huge advances in the living conditions of the most vulnerable groups of people around the world.

On the one hand, by encouraging the health authorities of each country to take charge of current eye care activities, by promoting self-management, according to the criteria of equity and excellence that sustains the actions of Eyes of the World, and by fostering the commitment of local professionals to the prevention and treatment of visual deficiencies.

And, on the other hand, by increasing the people’s knowledge of eye health and their access to local health care.

In 2007, we were also able to prosper considerably in the international projection of the Foundation by establishing agreements with important international organizations, mainly Portuguese organizations, to deal with the ophthalmologic vulnerability that primarily affects the people of Mozambique and to contribute, in a decisive manner, to the achievement of the objectives established in the National Ophthalmology Plan of this country.

The Foundation’s work during 2007 benefiting the people with visual deficiencies and without financial resources in the Saharawi refugee camps, in Mozambique and in Bolivia was possible thanks to the involvement of local professionals and to the help of volunteers, associates, donors and collaborators that took part in the ophthalmologic development cooperation activities in multiple ways. To those who believe that health deficiencies of these territories can improve and have decided to act to make it possible, THANK YOU!

Rafael Ribó
President
There are more than 161 million people in the world with visual disabilities: 124 million have reduced vision and 37 million are blind.

Another 153 million suffer from visual disability due to refractive defects (myopia, hyperopia or astigmatism) that has not been corrected. In most of them, vision could be normalized with glasses or contact lenses.

More than 90% of the people with visual disability live in countries with low incomes and limited infrastructures.

Cataracts are still the main cause of blindness, with the exception of the most developed countries.

Cataracts surgery is one of the most profitable treatments that can be done in less developed countries. Throughout the year after the operation, the economic production of the patients can increase up to 1,500% in relation to the cost of the surgery.

The causes of visual disability and blindness related to age are increasing, as is blindness due to diabetes that is not controlled.

On a positive note, up to 75% of the cases of blindness in adults are avoidable with prevention or treatment.

Blindness caused by infectious diseases is decreasing worldwide thanks to actions taken by public health authorities. The number of people affected by blindness caused by trachoma has decreased from 360 million in 1985 to 80 million today.

It is estimated that in the world there are 1.4 million people under 15 years old that are blind. Despite this, half of all of the cases of infant blindness can be prevented with the early treatment of the disease and by correcting congenital anomalies such as cataracts and glaucoma.
WHO WE ARE?

At Eyes of the World we are a group of people who are aware that preventing and curing preventable blindness is a challenge that concerns us all and that have decided to take action to guarantee the universal right to see in the entire world.

GOVERNING BODY 2007: TRUSTEESHIP

Executive Committee
Rafael Ribó i Massó, president
Borja Corcóstegui Guraya, vice-president
Raimon Bergós i Civit, secretary
Núria Ramon i Garcia, general manager
Vicenç Capdevila i Cardona, fundraising manager

Members
Raimon Belenes Juárez, on behalf of the Generalitat de Catalunya (Manager of Institut de Diagnòstic per a la Imatge)
Dolores Gómez Fernández, on behalf of the Local Government of Barcelona (Delegate President of the Área de Salut Pública i Consum)*
Jordi Varela i Pedragosa, on behalf of the City Council of Barcelona (manager of the Institut Municipal d’Assistència Sanitària)
Fernando Iglesias García, on behalf of Fundación ONCE para América Latina, FOAL (general manager)
Salvador Clotas Cierco, manager of the Fundación Pablo Iglesias
M. Isabel Nieto Uresandi (ophthalmologist)
José Juan Martínez Toldos (ophthalmologist)

*After 19th July 2007, in substitution of Margarita Dordella i Cirera

MANAGEMENT BODIES 2007: OPERATIVE TEAM, TERRITORIAL DELEGATES, LOCAL COLLABORATORS AND VOLUNTEERS

Medical supervisors
Dr. Josep Maria Rafart i Arumi - Medical supervisor of Eyes of Sahara program
Dr. Andrés Müller-Thyssen Bergareche - Medical supervisor of Eyes of Mozambique program
Dr. José Juan Martínez Toldos - Medical supervisor of Eyes of Bolivia program
Dra. M. Isabel Nieto Uresandi - Medical supervisor of Eyes of Gaza program

Staff at the head office
Núria Ramon, General Manager
Elisenda Rom, Head of Cabinet and Communication
Anun Jiménez, Head of Administration
Albert de Renzi*, Supplying and Warehouse Technician
Sandra Barroso*, Optical Activities Technician
Bibiana Ruberte, Office Programs Technician
Albert Recarens, Communication Technician

Gloria Arquillo, Funding Management Technician (after October, replacing Maria Abad)
Josep Peris, Financial Management Technician (after November, replacing Àngels Solà)
Sandra Campañón, Administrative Assistant
* Part-time

Staff on the field
Ilaria Ravai, Eyes of Sahara Program Coordinator on the field
Jaime N. Camacho, Representative of Eyes of the World in Bolivia
Mayka Balaguer, Eyes of Mozambique Program Coordinator on the field
Eugenio Langa, Eyes of Mozambique Program Logistics operator on the field

Territorial Delegates
Kike Otaegui, Eyes of World Delegate in the Basque Country
Rosario Martinez, Eyes of the World Delegate in Community of Valencia
Lelo Méndez, Eyes of the World Delegate in Andalusia
Local Collaborators
Ahmedu Abba · Fatma Abdí · Luci Abdi · Mohamed Abed · Hasana Ahmed · Mulay Ahmed · María Luz Ali · Ahmedu Azman · Mahfud Azman · Abdel fattah Chej · Anita Felizardo Elias · Marisol González · Verónica Guaita · Mohamed Habtina · Saad Hadu · Hamudi Hametu · Zain Larosi · Betoula Lazrag · Mahamud Lehibib · Jati Lekibir · Mohamed Mahfaud · Abdu Mohamed · Ammu Mohamed · Dish Mohamed · Hamdy Mohamed · Hamudi Majtar · Mohamed-said Mohamed · Wardad Mohamed · Adelina Pedro · Roxana Rios · Erika Ross · Bachir Salek · Mulay Salim · Chebi Sidahmed · Miguel Siquice · Leïquir Takio · Juana Tapia · Sergio Valente

Volunteers 2007

Ophthalmologists
Rubén Ángeles · Pedro Arbona · Elena Arrondo · Rebeca Atienza · José Azogue · Guillermo Alfredo Bianchi · Franz Buitrago · Pablo Germán Caballo · Maribel Canut · Ricardo Casaroli · Borja Corcóstegui · F. Xavier Corretger · Laura Cortázar · José M. Diéguez · M. Elva Dorado · Fabiola Eder · Daniel Elies · M. Victoria Fernández · Iraki Genua · Lurdana Gomes · Mireia Jornet · Conxita Larena · Ljubica Marasovic · Jesús Martín · Ferran Mascaro · Elena Milla · Rafael Montero · María Moreno · Andrés Muller-Thyssen · M. Isabel Nieto · M. Teresa Noguer · José Ignacio Oztolaza · M. Jesús Pérez · Joan Prat · Josep M. Rafart · Bernardo Sánchez · Josep Torras · Jesús Torres · Ana Wert

Doctors
Begoña Campos · Shirley Cuentas · Maria Mercè Franch · Luis Alberto Pereira · Alfons Sancho

Anaesthetists
Cristina González · David Singer

Nurses/Instrumentalists
Susana Agra · Lola Carralo · Carme Castel · Izaskun Ferrer · M. del Carmen García · M. Pilar Gascón · Tanit Iglesias · María Jiménez · Gladis Ruth Julián · Zaída López · Lelo Ménèdez · Lourdes Rebollo · María Sánchez · Nekane Sanz · Martxiell Seco · Anna Tarragó · Natalia Zapirain · Marivi Zubizarreta

Optometrists
Anabel Baile · Mònica Boluda · Vanesa Budi · Maribel Espino · Rubén Fernández · José Conchi Garcia · Hussein Mohamed · Carlos Pla · Patricia Saavedra · Laura Ventosa · Salvador Vidal

Equipment technicians
Jesús Barragán · José Luis Royo

Eye prosthesis technician
Javier Laiseca

Logistic operators
Txema Sorozabal · Carlos Torre

Non-health professionals
Núria Andreu · Manel Esclusa · Patricia Fernández-Deu · Noelia Jiménez · Adrià Lorente · Laura Parrilla · Elisenda Pons · Marta Serra · Isabel Torres · Conchi Varela · Marc Vila · Glòria Vives

Thank you to the 690 professionals that have shown their interest in helping Eyes of the World, those who were involved in the activities and those who in 2007 were not able to take part directly.
AIMS
Eyes of the World is a non-profit making organization that contributes to the people with visual disorders and without economic resources from the poor countries could receive ophthalmologic care of quality from their local health services and to create the conditions to decrease the incidence of the ocular pathologies in every area.

In addition, Eyes of the World make aware the public opinion of our environment about the deficiencies in the basic health system in those places.

ACTION PRINCIPLES
- Ongoing actions, meaning a long-term commitment made to the population and to local authorities.
- Development and a focus on training as a tool for the future.
- Cooperation, which implies collaboration with other organizations that work in the area and with the authorities and local health care network.
- Efficiency and ability to maximize and control resources and results.

INTERNATIONAL NETWORK
Throughout 2007, Eyes of the World worked on combining efforts with international entities that work to eradicate avoidable blindness before 2020 within the framework of the program VISION 2020: THE RIGHT TO SIGHT, an initiative of the World Health Organization together with the International Agency for Prevention of Blindness (IAPB), an organization that includes Eyes of the World on its Adviser Committee.
EYES OF THE WORLD TAKES ACTION: DEVELOPMENT COOPERATION PROGRAMS

We open the eyes of poor countries

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COUNTRIES

EYES OF SAHARA

After more than 30 years, the Western Sahara conflict remains unresolved. Despite the election of Peter Van Walsum as United Nations’ envoy in the area, the self-determination referendum agreed to in The Baker Plan still does not have a concrete date.

Social differences are increasing in the camps, due to the creation of an informal economy, and the young population is immigrating to developed countries in search of a better quality of life.

Program: Ophthalmologic and optical care for the Saharawi population; consultations, surgical procedures, prevention and training.

Location: Saharawi refugee camps in Tindouf, Argelia.

Health and ophthalmologic conditions: Food shortages and degradation in the areas of health and education cause the conditions of Saharawi refugees to deteriorate. This deterioration is evidenced by lateness in the development of children, chronic malnutrition and anemia. The Saharawi health care service depends totally on outside help, and the activities linked to projects could not be sustainable if it were not for the NGO’s and other international organizations.

Local Collaborator: Ophthalmology Service of the Ministry of Health of the Saharawi Arabic Democratic Republic (SADR).

Beneficiaries: People suffering from eye problems who go to local health care centers to be treated and also school children who are provided check-ups and Saharawi professionals who receive training.

EYES OF MOZAMBIQUE

Despite social and economic, Mozambique is still the country with the sixth lowest Development Index, according the UNDP (United Nations Development Program). More than 70% of the population lives under the poverty level and the country is still dependant on outside help.

The economic growth and the advances in terms of development have been concentrated in the area of Maputo and in the cities in the southern provinces. This has caused serious regional inequalities. Health care services have improved with the restoration and rebuilding of health care units, staff training and the broadening of health coverage.

Program: Ophthalmologic and optical care (care, prevention, training and equipment) in the Inhambane province and in the Hospital Central of Maputo.

Location: The province of Inhambane and the city of Maputo.

Health and Ophthalmologic conditions: the population of Mozambique lives in unhealthy conditions; over half of the population does not have access to drinking water and the life expectancy is under 50 years old. There are important health and ophthalmologic shortages, with 180,000 blind people and more than 700,000 with eye problems.

One of the goals is to set up a National Ophthalmologic Plan, approved in 2007 by the Ministry of Health, which should reduce blindness by controlling the main causes of pathologies and by developing human resources and infrastructures.

Local Collaborator: Ministry of Health of the Republic of Mozambique and Provincial Health Administration of Inhambane.

Beneficiaries: Population from the province of Inhambane with eye problems that go to their local health care provider to be treated and the health professionals of Inhambane and Maputo trained by the Foundation.
EYES OF BOLIVIA

In Bolivia, the indigenous population and farmers are the more disadvantaged and marginalized groups in a region with big social inequalities. Around the country, there is a lack of health-related infrastructures and resources, and the situation is more serious in rural areas where the access to health services is more difficult due to geographical characteristics.

The year 2007 was a very intense one in politically and socially speaking; there were several demonstrations by the population of the city of El Alto and other towns. Issues such as the hydrocarbon law or the constitutional reform have increased the tension in the political and social life of the country.

- **Program**: Ophthalmologic and optical care for the population of El Alto; consultations, surgical procedures, training and prevention.
- **Location**: City of El Alto and Instituto Nacional de Oftalmologia of La Paz.
- **Health and Ophthalmologic conditions**: 70% of the population in El Alto is in poverty and is discriminated against because of cultural, linguistic and educational differences. The socio-demographic and environmental factors of the city (extremely high levels of solar radiation due to the altitude of the area, air with minimum oxygen quantities, etc.) have left the population in a serious situation with regard to ophthalmologic health.
- **Beneficiaries**: People in poverty from El Alto and its surrounding area who require ophthalmologic care and who go to their health care centers to be treated. Local health professionals and staff that attend the eye care awareness and eye disease prevention sessions.

GAZA (PALESTINE)

Activities of the Eyes of Gaza program have been suspended due to the political and war-based conflicts in the area. Nonetheless, in 2007, Eyes of the World provided support to the activities carried out by City Council of Barcelona which entailed supplying material to the European Hospital of Gaza.

MALI

In December 2007, Eyes of the World went to Mali with the aim of learning about the situation of this African country in terms of ophthalmologic health.

Mali is the country with fifth lowest Development Index according to the UNDP. Although the political situation has been stable since 1985, poverty problems in Mali are of a structural nature. The country depends on international help and has an agricultural sector that is very vulnerable to changes and to recurrent droughts.

During the trip and in the different meetings with local health authorities and ophthalmologic professionals, Eyes of the World gathered data on blindness and the health care of the population, and it is studying the possibility of starting a cooperation project to help the ophthalmologic development in the region of Mopti in 2008.
The activities carried out by Eyes of the World in 2007 centered mainly on local staff training, on the prevention of ocular pathologies and on the equipment of health care centers. Even though the number of surgical commissions has remained the same or even been reduced in some projects, we have obtained similar results to those in 2006 due the reorganization of resources.

The aim of Eyes of the World was to advance in the sustainability of the projects so that the health care services of each territory are able to take responsibility for the planning and management of different lines of treatment aimed at preventing and treating preventable blindness.

### Commissions distributions by programs and areas of action:

<table>
<thead>
<tr>
<th></th>
<th>Medical</th>
<th>Training</th>
<th>Research, preparation, follow-up and assessment</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eyes of Sahara</td>
<td>5*</td>
<td>3</td>
<td>1</td>
<td>9</td>
</tr>
<tr>
<td>Eyes of Mozambique</td>
<td>3</td>
<td>6</td>
<td>1</td>
<td>10</td>
</tr>
<tr>
<td>Eyes of Bolivia</td>
<td>4</td>
<td>4**</td>
<td>1</td>
<td>9</td>
</tr>
<tr>
<td>Activities in Mali</td>
<td>-</td>
<td>-</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>12</td>
<td>13</td>
<td>4</td>
<td>29</td>
</tr>
</tbody>
</table>

*Two child eye check-up commissions have been included; one is for consultations in the field territories
** Three training courses by videoconference have been included
CARE OF BASIC OPHTHALMOLOGIC NEEDS

Distribution of patients per program and per type of ophthalmologic care:

<table>
<thead>
<tr>
<th></th>
<th>Consultations and check-ups</th>
<th>Surgical procedures</th>
<th>TOTAL TREATMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eyes of Sahara</td>
<td>3,099*</td>
<td>264</td>
<td>3,363</td>
</tr>
<tr>
<td>Eyes of Mozambique</td>
<td>2,634</td>
<td>537</td>
<td>3,171</td>
</tr>
<tr>
<td>Eyes of Bolivia</td>
<td>5,567</td>
<td>249</td>
<td>5,816</td>
</tr>
<tr>
<td>TOTAL</td>
<td>11,300</td>
<td>1,050</td>
<td>12,350</td>
</tr>
</tbody>
</table>

* It includes 1,940 check-ups carried out in the framework of prevention campaigns.

CONSULTATIONS AND CHECK-UPS

Within the Eyes of Sahara program, a total of 3,099 consultations and check-ups were carried out, 1,940 of which were done in the monitoring commissions among the child population and the remaining 1,159 were carried out in the National Hospital of Rabuni during the medical-surgical commissions. A follow-up of assisted patients was carried out using the ophthalmologic card, consultation records and the patient database, based in the international code established by the World Health Organization with regard pathologies and surgical procedures.

From a total of 2,634 consultations and check-ups done in Mozambique, 2,482 were carried out at the Provincial Hospital of Inhambane, where 1,980 people were visited and 502 were visited for the second time. In many cases, the large number of patients caused the build up of a waiting list. Also, coordination with districts was reinforced, especially with the district of Massinga, to make it easier for patients to access health care. Also, within the framework of training courses in the Central Hospital of Maputo, 113 consultations and 39 second consultations were carried out.

In terms of commissions in Bolivia, the total number of consultations and check-ups was 5,567 (3,349 consultations and 2,218 check-ups). Cataracts were the most frequent pathology, but there were also cases of pterygium, glaucoma and retinopathies. Beside, specialized care at the Bolivian-Dutch Municipal Hospital, the Foundation moved 16 communities of the Bolivian Altiplano where a follow up of patients who had undergone surgery was carried out. Also, we provided care and referrals to those people in need of ophthalmologic treatment.

SURGICAL PROCEDURES

At the Saharawi camps, 264 surgical procedures were carried out at the National Hospital of Rabuni, 80% of which were cataracts procedures. In Mozambique, the number of procedures reached 537. 480 were done at the Provincial Hospital of Inhambane within the framework of medical commissions, while 57 were done to patients at the Central Hospital of Maputo. Nearly half of the cases were related to the cataract pathology, although there were also cases of conjunctivitis and glaucoma. At the Bolivian-Dutch Municipal Hospital, within the framework of medical-surgical commissions, 249 surgical procedures were recorded, most of them performed on elderly patients.
STRENGTHENING OF LOCAL TECHNICAL CAPACITIES

GRANTS AND TRAINING STAYS

In 2007, the Saharawi Khalil Khatri finished his training process. This doctor, who specializes in ophthalmology at the Hospital de l’Esperança in Barcelona thanks to the grant awarded by the Foundation, successfully passed the final exam to attain specialization at the Instituto Superior de Ciencias Médicas in Havana, Cuba. In 2008, Dr. Khatri may be back to the refugee camps to perform his professional task in different times of the year.

Abel Dos Santos Polaze carried out his second year of the grant. This doctor from Mozambique alternated a period of eight months training at the Hospital de l’Esperança with four months of residency in Mozambique. Also, Dra. Margarida Chagunda, resident doctor at the Central Hospital of Maputo, traveled to Barcelona with a grant awarded by the Spanish Ministry of Foreign Affairs together with the Foundation Eyes of the World and she was trained at the Instituto de Microcirugía Ocular (Ocular Microsurgery Institute) for six months.

In the program Eyes of Bolivia, the ophthalmologist José Carlos Morote Román was awarded a three-month grant to carry out a training stay at the Instituto de Microcirugía Ocular in Barcelona where he has specialized in the use of phacoemulsification in cataracts surgery, knowledge that he will apply to the health care system in his country. Two residents from the National Institute of Ophthalmology, Shirley Cuentas and Luis Alberto Pereira, who started their studies in La Paz in 2007, are going to be supported in their specialization by the Foundation.

VIDEOCONFERENCE COURSES (EYES OF THE WORLD CYBERCAMPUS)

This is the second year that Eyes of the World has set up a project to train in ophthalmology through videoconference in the program Eyes of Bolivia. This initiative entailed three courses that allowed 20 ophthalmologists and ophthalmology students to be trained in the sub-specialization of glaucoma, phacoemulsification and neuroophthalmology.

Also, a session about keratoplasty was carried out through videoconference. This session was done on the occasion of the XXII Bolivian Ophthalmology Conference, as an invitation by the Bolivian Association of Ophthalmology.
TRAINING IN THE FIELD

Thirteen optical technicians from the different wilayas that belong to the Saharawi camp staff continued with their training. Therefore, they have received a course on basic ophthalmologic knowledge, which focused on glaucoma and also on pediatric ophthalmology and eye health, within the framework of the children eye check-up program. Also, in 2007, a quality control plan for the surgeries and workshop was set up to evaluate the working and effectiveness of technicians’ work. This quality control plan resulted overall in a very positive assessment. During the medical-surgical commissions, two nurses from the National Hospital of Rabuni were trained in instrumentation and anesthesia techniques.

In Mozambique, training was concentrated at the Central Hospital of Maputo and it was addressed at ophthalmologists and local residents (the staff is formed by eight professionals) that received theoretical and practical sessions on orbit and oculoplastic surgery, the retina and ocular prostheses. Two courses were also organized on equipment maintenance, which were addressed at maintenance technicians and at nursing staff (with six attendees). For the latter, the course dealt with aspects related to the working, set-up and cleaning of the ophthalmologic equipment.

In-situ training played an important role in the program Eyes of Bolivia 2007. Through commissions, volunteers of the Foundation transferred practical knowledge to the staff at the Bolivian-Dutch Municipal Hospital. In particular, seven professionals were trained: two nurses in instrumentation, three ophthalmologists in oculoplastic surgery and cataracts surgery by phacoemulsification and two doctors, residents of the National Institute of Ophthalmology, in diagnosis and patient care. Theoretical training in oculoplastic surgery was provided through a lecturer within the framework of a medical commission, where 20 professionals from the INO were able to attend.

Furthermore, a training process of a rural doctor from the community of Quime was set up. Eyes of the World volunteers provided him with theoretical and practical knowledge relating to basic eye health.

“Go on Eyes of the World, fighting against avoidable blindness, go on always and don’t stop” is the chorus of the song that Julian Felizberto Manganhe composed for the Foundation in 2007. The song was sung by children in Posto Social de Alegria in Guava (Maputo), who are sons and daughters, sisters and brothers and friends of Eyes of the World patients.

Julian, 40 years old, resident of the neighborhood of Mahotas in Maputo, knows what it means to suffer from eye problems. When he was 23 years old, he lost his sight completely due to badly diagnosed and late treated cataracts.

Julian Felizberto explains that he agreed to compose the song for Eyes of the World “to contribute to raising awareness among people and also to convince them to visit hospitals. I have lost my sight due to cataracts, but nowadays, this illness can be treated.” Juan recognizes the work done by the Foundation in his country: “They prevent situations like mine. My life is really difficult. I am an unemployed person and with family responsibilities. I have some knowledge but I have never been able to show it due to a lack of opportunities.”
RESOURCES FOR EYE HEALTHCARE CENTERS

MATERIAL, EQUIPMENT AND INSTRUMENTATION

Eyes of the World provided the hospitals of reference of each program with the necessary equipment to complete the ophthalmologic units. It also provided instrumentation and consumables to ensure that the units remain operational and continue to be sustainable.

Besides the reference eye healthcare centres, Eyes of the World has also provided the General Hospital of Chicuque (Mozambique) and the primary unit of Quime (Bolivia) with medical materials and drugs, thus geographically expanding the ophthalmologic care of these two countries. Throughout the year, the Foundation supplied replacement units and made it easier periodically monitoring the equipment; the latter activity was carried out by volunteers that also provided training to local staff.

Material and equipment provision has been boosted during the commissions’ period, allowing professionals in the field to carry out visits and surgical procedures in the safest manner possible. For example, at the Provincial Hospital of Inhambane, there was donated materials for 2,000 visits and 600 surgical procedures.

Throughout 2007, non-ophthalmologic material and equipment was added to the already-existent infrastructures: a refrigerator to properly preserve drugs in the operating room at the National Hospital of Rabuni, a glass cabinet and a shelf to store the surgical material and a folding screen to organize the visitor area at the Bolivian-Dutch Municipal Hospital.

<table>
<thead>
<tr>
<th>Ophthalmologic equipment and instrumentation</th>
<th>Optical material</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eyes of Sahara</td>
<td>3,260 presbyopia glasses, 60 special prescription glasses, 1,978 sun glasses, 1,619 frames, 1,500 lenses</td>
</tr>
<tr>
<td>1 slit lamp, 1 phacoemulsificator,</td>
<td></td>
</tr>
<tr>
<td>3 direct ophthalmoscopes, 2 phoroptors,</td>
<td></td>
</tr>
<tr>
<td>2 template machines, 2 cross-cylinders,</td>
<td></td>
</tr>
<tr>
<td>1 retinoscope handle</td>
<td></td>
</tr>
<tr>
<td>Eyes of Mozambique</td>
<td>–</td>
</tr>
<tr>
<td>1 helper viewer for surgical microscopy</td>
<td></td>
</tr>
<tr>
<td>Eyes of Bolivia</td>
<td>1,165 presbyopia glasses, 509 prescription glasses, 1,270 sun glasses</td>
</tr>
<tr>
<td>1 phacoemulsificator, 6 optotypes, 2 test</td>
<td></td>
</tr>
<tr>
<td>glasses, 1 eye test board</td>
<td></td>
</tr>
</tbody>
</table>

INFRASTRUCTURES

The main infrastructure activity was the building of a new area at the Hospital of Dajla. This work was financially supported by the Foundation together with Médicos del Mundo and it made it possible to provide the workshop with the space next to the optician.

Eyes of the World also supported the refurbishment of the building where the Ophthalmology Service of the Provincial Hospital of Inhambane was transferred and the foundation was laid to build an optician’s workshop at this hospital.

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PREVENTION OF EYE PATHOLOGIES

EYE CHECK-UPS

Eyes of the World carried out eye check-ups of primary students at the Saharawi refugee camps, primarily at the primary schools of the wilayas of El Aaiun and Dajla, at the special schools of Dajla and Smara and at the blind schools of Dajla. In total, 1,940 children were given eye exams, 133 of which had pathologies and received treatment, while 131 had refractive defects and were given glasses.

PREVENTION AND AWARENESS ACTIVITIES

Within the framework of the child eye check-ups commission, five lectures were carried out, which were addressed at children from the school of Dajla to improve the prevention of eye diseases.

In Mozambique, different courses on basic ocular health were organized for the triagens that have acquired knowledge to do a first selection of patients and the subsequent referral of patients. Two courses were provided for the triagens from the health care network of the province of Inhambane, which were attended by 25 students, and a course in the district of Jangamo, which was attended by four triagens.

The latter course was part of a pilot project of staff training in prevention and awareness in Jangamo that also has included the training of six health care visitors. These are people with direct contact with the population, visiting them at their homes to inform them about different topics, such as eye health.

In addition, 30 lecturers were given on post-surgical treatment to patients from the Provincial Hospital of Inhambane and their families. And, 1,000 posters on visual health were printed to be distributed at the health care centers of Inhambane. This material includes basic advice to prevent eye illnesses among the population.

In the program Eyes of Bolivia, eight lectures on awareness in eye health were given in the town of El Alto and in other rural communities. The lectures were attended by 890 people, including groups of mothers, neighbors, adult associations, etc. Leaflets published by Eyes of the World about visual health were distributed (100,000 copies) with basic advice on ophthalmologic health, focusing on the necessity of visiting a doctor.

STUDIES

Under the program Eyes of Sahara, a pilot project was carried out dealing with the prevalence of the main eye pathologies that cause blindness. The study was organized by an ophthalmologist and an epidemiologist, and the information was collected in the field by an ophthalmologist and a local optician. The results from the study are expected to be implemented throughout 2008.

A survey of the traditional midwives in the wilayas of Dajla and El Aaiun was also carried. This survey confirmed the low level of knowledge that they have about detecting congenital pathologies that cause blindness. Another survey was done among the population which confirmed the influence that traditional medicine has in the camps.

In Bolivia, a study was started which deals with the possibility of ophthalmologic care at the health care centers of El Alto and its surrounding areas. This study should help define the future strategic actions on eye health to be taken in the region. The project was carried out by social workers at the Bolivian-Dutch Municipal Hospital who recorded data from 120 public and private health care centers. Another study on the prevention of pathologies among the population of El Alto was designed. This study will be done in 2008 by the doctors of the INO, taking into account about 12,000 medical histories corresponding to patients treated at the Ophthalmologic Service.
INFORMING ABOUT OPHTHALMOLOGIC REALITY

Throughout 2007, Eyes of the World showed the ophthalmologic reality of poor countries to our society, informing, in a precise and thorough way, about the ocular health situation in the different territories and the link between the health conditions of those countries and poverty.

Specifically, Eyes of the World made presentations at professional forums related to ophthalmology health in Spain and in Portugal, where it provided information and material to the attendees.

<table>
<thead>
<tr>
<th>Congress</th>
<th>Place</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>International Congress for the Prevention of Blindness in Developing Countries</td>
<td>Logroño</td>
<td>26th – 27th Oct.</td>
</tr>
<tr>
<td>International Refractive Surgery Congress</td>
<td>Barcelona</td>
<td>14th Dec.</td>
</tr>
</tbody>
</table>

The Foundation also took part in debates on cooperation related to health and gave lecturers addressed at health professionals and at non-health professionals interested in the health development of poor countries.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Speaker</th>
<th>Place</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spanish Ophthalmology Society Congress</td>
<td>Dr. José Juan Martínez Toldos</td>
<td>Las Palmas de Gran Canaria</td>
<td>29th Sept.</td>
</tr>
<tr>
<td>Royal Academy of Medicine Forum</td>
<td>Dr. Borja Corcóstegui</td>
<td>Barcelona</td>
<td>9th Oct.</td>
</tr>
<tr>
<td>Lecturer about the ophthalmologic precariousness in poor countries and consequences for the quality of life of the people</td>
<td>Dr. Andrés Müller-Thyssen</td>
<td>San Sebastián</td>
<td>10th Oct.</td>
</tr>
<tr>
<td>International Congress for the Prevention of Blindness in Developing Countries</td>
<td>Dr. Andrés Müller-Thyssen</td>
<td>Logroño</td>
<td>27th Oct.</td>
</tr>
</tbody>
</table>

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AWARENESS CAMPAIGNS

Throughout 2007, Eyes of the World used two photography exhibitions to promote reflection and raise the awareness of people of the eye health needs of thousands of people around the world.

<table>
<thead>
<tr>
<th>Title</th>
<th>Author</th>
<th>Location</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Museu Torre Ballálovina, Santa Coloma de Gramenet</td>
<td>11th - 29th Apr.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Sala de Cultura, Abrera</td>
<td>29th Nov. - 19th Dec.</td>
</tr>
</tbody>
</table>

SOLIDARITY EVENTS AND GATHERINGS

Eyes of the World encouraged the public to participate in and actively commit to the ophthalmologic development of the most vulnerable societies in the world by organizing and taking part in activities designed to increase the number of people interested in the work done by the Foundation. Such activities included the celebration of the sixth Anniversary of Eyes of the World by the members of the Patronage and the Operative Team, collaborators and volunteers who went to the Parliament of Catalonia on July 4th.

INTERNET AND MEDIA IMPACT

Eyes of the World was mentioned in the main media in Spain and in Portugal. On World Sight Day (celebrated on October 11th), a TV commercial and a radio break showed the cooperation work done by the Foundation.

Also, Eyes of the World participated in the radio program El Matí de Catalunya Ràdio, presented by Antoni Bassas, which aired in April from Mozambique to promote the situation there and to talk about Catalan cooperation.

The Foundation has published the main information about its work on its website [www.eyesoftheworldfoundation.org] and in the newsletter sent to volunteers, associates, collaborators and financial supporters every three months by e-mail.
THE NIGHT OF EYES OF THE WORLD

For the first time, the Foundation organized the annual awareness and fundraising dinner outside Spain. A Noite dos Olhos do Mundo was held at the Centro Cultural Belem in Lisbon on November 16th, 2007. People from the Administration, institutions and Portuguese companies participated, and it had the support of two important Portuguese organizations: the António Champalimaud Foundation and the Calouste Gulbenkian Foundation.

A total of 263 people contributed to the dinner and 180 attended, where they were able to learn first hand from Eyes of the World representative about the main activities done during the year and the results achieved. The event, presented by the journalist Julio Isidro, also had the participation of the well-known singer of fados Katia Guerreiro, and Dr. Marcelo Revelo da Sousa gave a speech.

On November 11th, 2007, Eyes of the World received the ONCE Catalunya Award for Solidarity and Achievement in recognition of its work caring for people with ophthalmologic disabilities in the countries that need it most.

Miguel Carballeda, president of ONCE, giving the prize to Núria Ramon, general manager of Eyes of the World.
## Financial Report

### Income

<table>
<thead>
<tr>
<th>Source</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Institutional Foundation Sponsors</td>
<td>200,460.00</td>
</tr>
<tr>
<td>Other Institutions</td>
<td>424,285.88</td>
</tr>
<tr>
<td><strong>Total Public Income</strong></td>
<td><strong>624,745.88</strong></td>
</tr>
<tr>
<td>Companies and institutions</td>
<td>474,693.24</td>
</tr>
<tr>
<td>Members</td>
<td>24,816.36</td>
</tr>
<tr>
<td>Occasional donors</td>
<td>79,859.20</td>
</tr>
<tr>
<td>Material and equipment donations</td>
<td>23,091.79</td>
</tr>
<tr>
<td>&quot;The Night&quot; income</td>
<td>157,306.09</td>
</tr>
<tr>
<td>Other incomes</td>
<td>7,988.91</td>
</tr>
<tr>
<td><strong>Total Private Income</strong></td>
<td><strong>767,755.59</strong></td>
</tr>
<tr>
<td><strong>Total Income</strong></td>
<td><strong>1,392,501.47</strong></td>
</tr>
</tbody>
</table>

**Public Income Share**: 44.9%  
**Private Income Share**: 55.1%

### Expenses

<table>
<thead>
<tr>
<th>Program</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cooperation for the development</td>
<td>775,380.59</td>
</tr>
<tr>
<td>Ophthalmologic treatment</td>
<td>103,987.97</td>
</tr>
<tr>
<td>Equipment and material supplies</td>
<td>310,163.34</td>
</tr>
<tr>
<td>Training</td>
<td>63,946.60</td>
</tr>
<tr>
<td>Prevention studies and campaigns</td>
<td>5,055.68</td>
</tr>
<tr>
<td>Technical coordination, on the field follow-up and evaluation</td>
<td>289,121.41</td>
</tr>
<tr>
<td>New programs research</td>
<td>3,105.99</td>
</tr>
<tr>
<td>Sensitization</td>
<td>150,708.56</td>
</tr>
<tr>
<td>External advertising and awareness campaigns</td>
<td>58,640.33</td>
</tr>
<tr>
<td>Operating expenses</td>
<td>92,068.23</td>
</tr>
<tr>
<td><strong>Total Administration and Fundraising</strong></td>
<td><strong>188,100.21</strong></td>
</tr>
<tr>
<td>Fundraising</td>
<td>12,321.42</td>
</tr>
<tr>
<td>Central services</td>
<td>172,311.05</td>
</tr>
<tr>
<td>Trusteeship</td>
<td>3,467.74</td>
</tr>
<tr>
<td><strong>Total Expenses</strong></td>
<td><strong>1,114,189.36</strong></td>
</tr>
</tbody>
</table>

**Expenses in Action Programs Share**: 83.1%  
**Administration and Fundraising Share**: 16.9%

*The positive remainder from 2007 is to be applied to action programs in 2008.*
Throughout 2007, ties with companies, individuals and supportive entities was established, helping to develop cooperation activities and to strengthen the social support and presence of Eyes of the World in the Spanish, Catalan and Portuguese society.

PUBLIC COFINANCERS

Foundation sponsors

Local authorities

City Hall of Abrera · City Hall of Arenys de Munt · City Hall of Cambrils · City Hall of La Bisbal d’Empordà · City Hall of L’Escala · City Hall of L’Hospitalet de Llobregat · City Hall of Reus · City Hall of San Sebastian-Donostiako Udala · City Hall of Santa Coloma de Gramenet · City Hall of Sitges

Other public organizations

Corporació Sanitària de Barcelona · Institut Municipal d’Assistència Sanitària · Servei Català de la Salut

COLLABORATING ORGANIZATIONS

Collaborating entities

Laboratories and organizations related to the health field

Ajl · Alcon Cusi · AMO · Bloss Group · Braun Medical · Col·legi Oficial de Metges de Barcelona · Corneal · Dicagaf · Digemsa · Etnia Barcelona · Eurooptica · Farma-Lepori · Fundació Jesús Serra · Fundación para la Cooperación y Salud Internacional Carlos III · Hoya Lens · Institut Català de la Retina · Instituto de Oftalmología Avanzada · Laboratori Aragó · Medical Mix · Productos Loring · Rayner · Reymon · Sanguésa · Sofymed · Sucesores de P. Molina · Suministros Hospitalarios · Sunoptic · Topcon · Tuscania Occhiali · Yodel Internacional

Other supporting entities

Arena Shots · Associació de Veïns de Sant Narcís · Bancaja · Bazar Internacional de Luxemburg · Buitet Bergós · Caja Madrid · Catalana d’Iniciatives · Cecermon · Consorci per a la Normalització Lingüística · Consulmóvil · Dream Team · Fundació Antoni Serra Santamans · Fundació Miarnau · Fundació Privada Girbau · Fundació Privada Matías Gomá Serra · Fundació Raval Solidari · Fundación Alicia Koplowitz · Grup Solidari Palau Tordera · Hoteles Ercilla · MRW · Pere Rius · Techno Trends · UOC/Campus per la Pau i la Solidaritat · VK Comunicación

A special thanks to the ophthalmologic health care centers that provided us with the dozens of professionals from all over Spain and Portugal that participated in the international cooperation programs of Eyes of the World in 2007.
SUCCESES AND CHALLENGES

EFFECTIVE RESOURCES MANAGEMENT

In 2007, we motivated some changes in the organization and we applied new criteria addressing the effective management of human, material and financial resources:

1. We planned multi-annual projects to continue with ongoing cooperation activities and we framed each one in a global strategy.

2. We boosted the follow-up systems and assessment of the projects with the aim of assessing the impact of our activity and improve the actions on the field.

3. We broadened the result of our onsite activities by fostering group work and coordinating health organizations devoted to international cooperation, since we are aware that getting closer means that we will get better results in our aim to eradicate preventable blindness by 2020.

4. We made a commitment to the systematic and resolute inclusion of optometry care in cooperation programs. According to the recent data of the World Health Organization, refractive defects can be a barrier to children’s progress at school, reduce the work-related options and production of adults, and, generally speaking, causing difficulties in their quality of life. In this respect, correcting refractive problems with the appropriate lenses is among the most effective eye health treatments with regard to its cost.

5. Finally, we strictly and transparently managed available resources and provided detailed information to everyone interested and linked to the Foundation.

For 2008, we intend to take a bigger step forward in the sustainability of projects by supporting the health authorities in each territory in the establishment of integral plans relating to ophthalmologic care. We also expect to broaden our area of intervention with the establishment of an ophthalmologic development cooperation program in Mali, and to consolidate the organization by prioritizing effective activities that are stable over the long run.

Núria Ramon i García
General Manager
WILL YOU CLOSE YOUR EYES TO THEIR FUTURE?

WE CAN CONTINUE OPENING EYES TO THE WORLD WITH YOUR SUPPORT

Name and Surname: ___________________________ 

Identity Card: _______________________________

Address: _________________________________

Town: ________________________________

Postcode: ________________________________

Telephone number: __________________________

E-mail: __________________________________

Yes, I would like to contribute to the Eyes of the World Foundation with the quantity:

☐ 10€/month ☐ 30€/month ☐ 50€/month ☐ Unique donation ________€

☐ Other amount ________€ ☐ monthly ☐ three-monthly ☐ annual

Do you want your donation to be annually updated with the CPI (Consumer Price Index) increase? ☐ Yes ☐ No

I request that all the receipts presented by the Foundation, Eyes of the World, as association instalment, would be charged in my account until further notice.

Name of Bank: ______________________________

Account number: ____________________________

Date and Signature: ___________________________

You can also make donations in the bank: La Caixa

Account number: 2100 0478 88 0200234832

THANKS

* The Foundation Eyes of the World will add the information you have given up to a file and will use it to manage your contributions. You may exercise your right to cancel, access, modify and rectify your data by writing to the address of the Foundation: c/ Drassaní 160-166, 08015 Barcelona.