

# ANNUAL REPORT 08

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© The vision of Saharawi children/Manel Esclusa



© Joaquim before the operation/Carlos Móser



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WE WOULD LIKE TO THANK ALL THOSE WHO HAVE VOLUNTARILY AIDED  
THE EYES OF THE WORLD FOUNDATION IN 2008.

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THANKS

© Cover illustration:

**Shirley learning orbital surgery.** Picture taken from the illustrated feature "Opening Bolivia's eyes" by Elisenda Pons. Shows the practical training of Bolivian residents, subsidized by Eyes of the world.

**The vision of Saharawi children.** The picture, by Manel Esclusa, is taken from the illustrated feature "Opening the Sahara's eyes", and shows Saharawi girls and boys after an eye examination in the camps.

**Joaquim before the operation.** Picture by Carlos Móser, winner of the Eyes of the world photography contest. Shows a Mozambican child prior to undergoing cataract surgery.

**Glasses for Zeina.** Picture taken from the illustrated feature "Opening the Sahara's eyes" by Núria Andreu. Depicts a Saharawi ophthalmology technician trained by Eyes of the world proceeding to an eye examination.

© Other pictures: Mercedes de la Rosa (Eyes of Maputo, 2002), Ferran Garcia (Sahara, 2006), Manel Esclusa and Núria Andreu (Opening the Sahara's eyes, 2006), Elisenda Pons (Eyes of Inhambane, 2005 and Opening Bolivia's Eyes 2008), Toti Ferrer (The Night of Eyes of the world, 2008) and others who volunteered and contributed to documenting the Foundation's activities.

Our most sincere thanks for your contribution and your solidarity.

# LETTER FROM THE PRESIDENT

## EXCELLENCE AND EQUITY IN OCULAR CARE

*Excellence and equity in ocular care constituted the topics up for debate during the month of August 2008 on the occasion of the latest meeting of the International Agency for the Prevention of Blindness, of whose advisory council Eyes of the world forms part.*

*The ideals discussed are as relevant to the societies that surround us as to developing countries. **Excellence** ties with quality in clinical care, as well as certain control standards present in all areas of ocular consultation, treatment and follow-up, although there is no direct link with the use of sophisticated equipment and technology. Beyond those aspects, excellence entails placing emphasis on matters that improve the results of ocular care whilst not always implying an increase in costs. This can be applied to conceptual planning, personalized care and operating systems, amongst other things.*

*Obviously, the lack of infrastructure and resources in poor countries is an obstacle that must be overcome, but there is no reason why one shouldn't strive for excellence and the respect of every individual's right to high quality ophthalmological care.*

***Equity**, which is entrenched in moral justice, prioritises the fair distribution of resources across different groups of people, in accordance with demographical criteria and above individual needs.*

*In poor countries, access to ocular care is limited as well as discriminatory and hinges on a number of variables such as social class, ethnic group and above all, gender. Equity in ocular care entails providing services in a manner that is acceptable, accessible and affordable for everyone.*

*Eyes of the world takes on these challenges through the strategic definition of projects, working towards the growth, in ophthalmological terms, of the world's most vulnerable countries and the implementation of various activities. To this effect, this report outlines significant advances achieved during 2008 in terms of access, for those with visual impairments and no economic resources, to high quality ophthalmological care and appropriate optical correction.*

*In addition to the aforementioned results, it is worth mentioning the significant increase, over the course of 2008, in our societies' recognition of the Foundation and the commitment of all the individuals, contributing organizations, entities and businesses which have partaken.*

*Thank you for your consistent and inspiring support. We count on each and every one of you to carry on opening the eyes of the world.*



Rafael Ribó

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## Did you know that...

- There are **314** million people in the world who are blind or have low vision.
  - **45** million people are blind, **1.5** million of them are under 15 years old.
  - **269** million have low vision, **145** million of them due uncorrected refractive errors. There are **13** million patients who are children aged between 5 and 15.

- **76** million people will have gone blind by 2020 unless they receive effective care.
- **2/3** of all blind people in the world are women and young girls. Men have **twice** as much access to ophthalmological care as women do.
- **90%** of all visual impairment sufferers live in the countries with the least financial resources.
- **80%** of all blindness can be either avoided or prevented.



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# WHO WE ARE AND WHAT WE DO

## TRUSTEESHIP

### Executive Committee

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

### Members

Raimon Belenes Juárez, acting on behalf of the Generalitat de Catalunya (chief executive of the Hospital Clínic de Barcelona)  
 Dolores Gómez Fernández, acting on behalf of the Governing Council of Barcelona (chief executive of the Department of Public Health and Consumer Protection)  
 Sara Jaurrieta i Guarnier, acting on behalf of the Barcelona City Council (town councillor of the district of Sarrià-St. Gervasi)  
 Fernando Iglesias García, acting on behalf of the ONCE Foundation for Latin America, FOAL (general manager)  
 Salvador Clotas Cierco, director of the Pablo Iglesias Foundation  
 M. Isabel Nieto Uresandi, ophthalmologist  
 José Juan Martínez Toldos, ophthalmologist

## MEDICAL COMMITTEE

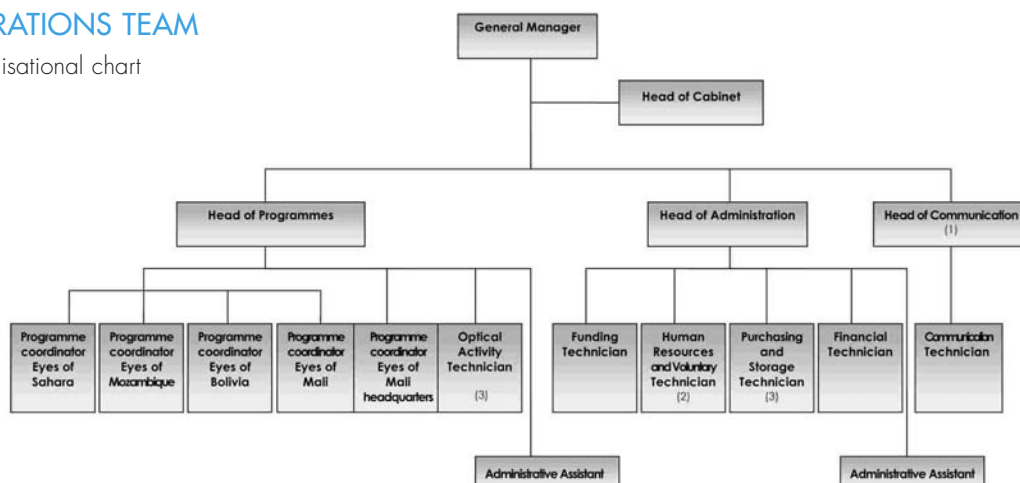
Borja Corcóstegui Guraya, president  
 Ricardo Casaroli-Marano, secretary  
 M. Isabel Nieto Uresandi

### Medical supervisors

Josep Maria Rafart i Arumí, *Eyes of the Sahara*  
 Iñaki Genua Goena, *Eyes of Mozambique*  
 José Juan Martínez Toldos, *Eyes of Bolivia*  
 Andrés Müller-Thyssen Bergareche, *Eyes of Mali*

## OPERATIONS TEAM

Organisational chart



(1) Functions assumed by the  
 Chef of Cabinet  
 (2) Functions assumed by the  
 Area Manager  
 (3) Parttime

## Mission

Eyes of the World is a non-profit entity 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.

Also, to make aware the public opinion of our environment about the deficiencies in the basic health system in those places.



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## TERRITORIAL DELEGATES

Rosario Martínez Navarro, Valencia delegate  
 Lelo Méndez Aragón, Andalucía delegate  
 Kike Otaegi Arizmendi, Basque Country delegate  
 Lurdana Gomes Teixeira, Portugal territorial delegate  
 Hernán E. Gras, Argentina territorial delegate

# WHERE WE OPERATE

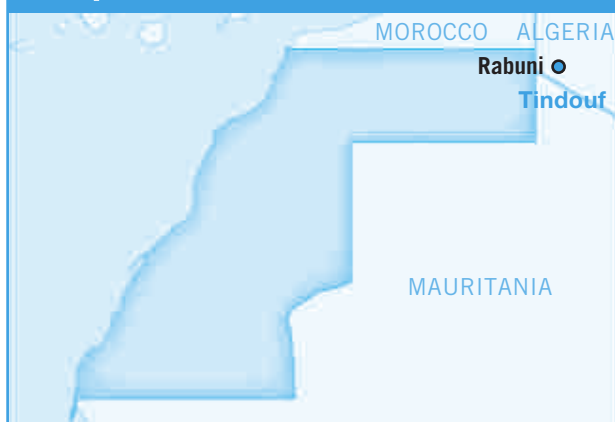
## EYES OF THE WORLD COOPERATION PROGRAMMES



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# Eyes of the Sahara



- The Saharawi refugee camps of Tindouf (Algeria) are divided between the *wilayas* of Smara, Auserd, Dajla and El Aaiun. Each one of these consists of 6 or 7 *dairas*, and the national institutions of 27 February, 9 June and 12 October.
- The population is of approximately 150,000 inhabitants, although there are no accurate figures available to date.
- The dialogue between the Polisario Front and the Moroccan Government regarding the Western Sahara conflict broke down once more in June, with the subsequent removal from office of the special representative of the United Nations, Peter van Walsum.

## HEALTH SITUATION

Saharawi healthcare relies on external aid, and project-related activities cannot be viable without the presence of non-profit organisations and other international agencies.

### Structure

- There is a basic healthcare infrastructure in place which caters for the bare necessities and is divided between primary healthcare in *daira* health centres, secondary care in the regional hospitals of the *wilayas* (El Aaiun, Smara, Auserd and Dajla), and specialist care in the National Hospital of Rabuni, the Mother and Child Unit and General Hospital of Bola.
- Ophthalmological surgery can only be performed in Rabuni and Bola.
- There are four optical centres, spread across the *wilayas*, which run both workshops and clinics, and two practices without any optical workshops.

### Staff

- Since 2008, an on-site ophthalmologist has been assigned to the camps: Dr. Jalil Jatri, trained courtesy of Eyes of the world.
- There are 13 ophthalmological technicians practising in the clinics and optical workshops.

### Pathologies

- The main pathologies are cataract, glaucoma and corneal problems. There are major refractive defects observed amongst the child population.

# Eyes of Mozambique



- The province of Inhambane and the city of Maputo (the country's capital) are located in the southern area of the Republic of Mozambique, which is divided into ten provinces.
- With a surface area exceeding 64,000 km<sup>2</sup>, the province of Inhambane has a population of over 1,300,000 inhabitants.
- Despite the advances registered over the past decade, the country remains highly vulnerable in the face of natural catastrophes, as was demonstrated during the floods and cholera outbreak registered in early 2008.

## HEALTH SITUATION

Specialised medical care is scarce, especially the specialties that are not considered a priority, such as ophthalmology.

### Structure

- The province of Inhambane has a healthcare network which 101 units: a regional hospital, two rural hospitals, 67 health centres and 31 points of care.
- The Central Hospital of Maputo is the benchmark healthcare unit for the various regional centres.

### Staff

- Eight of the ten provinces provide an ophthalmology service in their respective regional hospitals, although there isn't always an ophthalmologist present on the premises. This is the case with Inhambane for instance, with just two technicians in charge of ophthalmology.
- The majority of ophthalmologists are concentrated in Maputo, with seven staff: five are national specialists who regularly practise at the Central Hospital of Maputo, a Mozambique native who practises on a sporadic basis, whilst the seventh is a foreign ophthalmologist.
- There are 32 ophthalmology technicians to cover the services of all the regional and rural hospitals.

### Pathologies

- There are 160,000 blind in Mozambique and 600,000 with eye problems due to corneal pathologies, glaucoma, trachoma, malnutrition, trauma or degenerative diseases. There has been a National Ophthalmological Plan in place in the country since 2007.

# Eyes of Bolivia



- The city of El Alto is located in La Paz, one of the nine administrative divisions present in the country, adjacent to the Seat of Government and 4,100 metres above sea level.
- It constitutes a powerful example of urban population density: its population is growing at a rate exceeding 5% yearly and comprises approximately 950,000 inhabitants.
- The country went through a very troubled year on a both political and social level, due to the clashes between the followers and opponents of President Evo Morales.
- This situation has given rise to periodic regional gridlocks, shortages of basic products and foodstuffs and a general increase in the cost of living and unemployment.

## HEALTH SITUATION

Bolivian healthcare services revolve around primary care and are unable to cater for more than three quarters of the population due to socio-economic reasons and inadequate transport.

### Structure

- The public healthcare system is made up of health centres limited to primary care, level two hospitals which cater for only a few specialist areas (like the Bolivian-Dutch Municipal Hospital and the Municipal Corea Model Hospital) and a handful of level three hospitals which treat specialties across the board.
- There are some specialist centres which cater for some therapeutic areas; one of these is the National Institute of Ophthalmology (INO, acronym in Spanish), the only state-level teaching and research centre.

### Staff

- Bolivia has about 230 ophthalmologists, the majority of whom operate in private practices concentrated in the main towns.
- The remainder of the country practically lacks any eye specialists.

### Pathologies

- Pathology-induced blindness and visual impairment affect over 400,000 individuals.

# Eyes of Mali



- In terms of its administration, Mali is divided into eight regional areas and one district which is in fact its capital, Bamako.
- The Mopti region has a surface area of 79,000 km<sup>2</sup> and a population that exceeds 1.5 million people.
- One of Mali's characteristics is its highly fragile economy, one that relies mainly on agriculture and river fishing.
- The incidence of pathologies stands at almost 60% and is mainly rural.
- 10 % of the population is nomadic.

## HEALTH SITUATION

The country's capacity in terms of services is low whilst the demand is high due to the predominance of infectious, parasitic and malnutrition-derived diseases, coupled with the lack of drinking water.

### Structure

- Mali's healthcare structure focuses on primary care.
- The healthcare system is distributed according to a four-level pyramid structure: central, intermediate (which includes the Sominé Dolo Regional Hospital of Mopti), operative and first-line.
- The district of Bamako has a benchmark ophthalmology centre, the African Institute of Tropical Ophthalmology (IOTA, acronym in French), whose main purpose is training.

### Staff

- The majority of ophthalmological services are concentrated in Bamako, with 65% of the country's ophthalmologists practising there (17 out of 26 staff).
- There is only one ophthalmologist on staff at the Mopti Ophthalmology Service, and only three advanced ophthalmology technicians.

### Pathologies

- There are an estimated 150,000 blind, mainly as a result of cataract, glaucoma, trachoma, refractive defects or trauma.
- There is a National Ophthalmology Plan in place for 2006-2010.



# HOW WE ACHIEVE THIS

## IMPROVING OCULAR HEALTH IN POOR COUNTRIES

### Distributing commissions according to the intervention territory and objective:

	Training	Medical	Survey, preparation, follow-up and evaluation	TOTAL
Sahara	2	3	2	7
Mozambique	7*	2	2	11
Bolivia	8**	3	-	11
Mali	-	-	2	2
<b>TOTAL</b>	<b>17</b>	<b>8</b>	<b>6</b>	<b>31</b>

\* 5 courses in the framework of 3 commissions

\*\* 3 videoconference-based training sessions are included

### Distribution of patients per intervention territory and type of ophthalmological care provided:

	Consultation	Surgical operation	Total number of patients treated
Sahara	1,958*	234	2,192
Mozambique	1,313	403	1,716
Bolivia	3,489	197	3,686
Mali	-	-	-
<b>TOTAL</b>	<b>6,760</b>	<b>834</b>	<b>7,594</b>

\* Including 703 consultations carried out within the framework of prevention campaigns

### “There is happiness in her eyes, no more tears”

Marcela Condori is a 70 year old Bolivian lady. She is a widow and lives in the Masaya region (which is located in La Paz, in the province of Los Andes), with her daughter, son-in-law and granddaughter. Their sustenance comes from agriculture and their income is very low, barely allowing them to survive.

A bilateral cataract left her in darkness for six years, complicating her dire personal, financial and family situation further still. Thanks to the Eyes of the world Foundation, she has recovered her eyesight to the extent that she can once again see.

“She no longer needs to rely on her relatives and is once again able to carry out habitual tasks all on her own. She can work in the garden, take her herd to pasture and go to places she had been unable to visit for six years due to her condition. She partakes in religious activities and shares experiences with the members of her community. There is happiness in her eyes, no more tears”, Maria Ali, the social worker in charge of her follow-up tells us.



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# 1 Training local staff

## TRANSFER OF KNOWLEDGE AND PRACTICAL STAFF TRAINING

We have trained...

### Sahara

- **5 ophthalmology technicians** in paediatric refraction who are now able to carry out eye tests in children on their own.
- **11 midwives, 26 healthcare managers and 7 heads of dispensary** for children's eye health and the detection of congenital ocular pathologies through five seminars.
- **3 male nurses and 1 female nurse** from the Rabuni National Hospital received training in ophthalmological instrumentation, basic general anaesthesia and pre- and post-operative care.

### Mozambique

- The **5 ophthalmologists and 2 residents** who regularly work for the Central Hospital of Maputo have continued to build up their specialist knowledge, which has enabled them to help patients with orbital and retinal pathologies, teaching them how to implant ocular prostheses.
- **20 ophthalmology technicians** trained in Cuba and operating in both regional and provincial hospitals have had their degrees certified, improved their diagnostic skills and are now able to carry out peripheral ocular surgery.
- Dr. **Abel dos Santos** completed his third year thanks to a grant scheme shared between Barcelona and Maputo, which should enable him to integrate into the public healthcare system as an ophthalmologist in his own country once his specialist training is completed.
- **2 ophthalmology technicians, 3 nurses and 3 nursing assistants** for the Provincial Hospital of Inhambane in surgical and diagnostic techniques, and ophthalmological care and instrumentation.

### Bolivia

- **4 residents** (2 first year and 2 second year) whose training at the National Institute of Ophthalmology is funded through grants. This will provide the country's public healthcare system with an increased ophthalmologist headcount once their training is completed. These four residents complemented their studies with training in surgical and diagnostic technique during Eyes of the world commissions and gained some practical training during visits to rural communities.
- About **twenty ophthalmologists and residents of the National Institute of Ophthalmology** received training in various techniques on the most common ophthalmological pathologies through three videoconference-based clinical sessions and five in-situ master sessions, aimed at improving the quality of the country's ophthalmological care.
- **14 paediatricians** from El Alto were trained in retinopathy of prematurity for the early detection of ocular pathologies.
- **27 community physicians** from the Bolivian-Dutch Healthcare Network were able to integrate the consultation rota with ophthalmologists from the hospitals of El Alto, thus acquiring the skills required in order to provide first-line healthcare in the field of ocular health.
- **2 ophthalmologists, 6 nurses from the Bolivian-Dutch Municipal Hospital and 1 nurse from the Municipal Corea Model Hospital** trained in surgical and diagnostic technique and ophthalmological care and instrumentation.

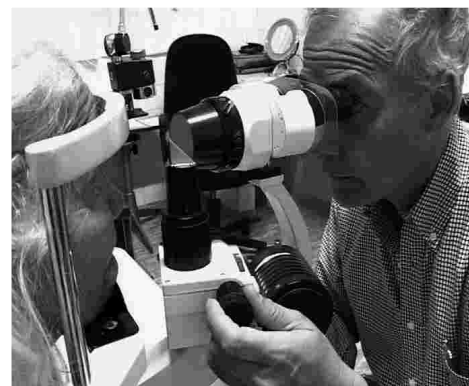
### Mali

- **2 first year ophthalmology residents** at the African Institute of Tropical Ophthalmology funded through grants.
- **1 glasses assembly technician** at the IOTA who will run optical workshops at Mopti Hospital once his training is completed.

### **"Training is our priority"**

"This year, training healthcare staff has once again topped the list of our action priorities, the objective being to ensure that they are able to look after local ophthalmology services in the medium term and attend to the visual deficiencies of the population. The number of training commissions organised was increased, thus reducing attendance overload and, consequently, the number of consultations and operations carried out by Eyes of the world. In order for ophthalmological care to progress in those countries, we must provide them with the necessary means to do so and support them until they are able to stand on their own.

*Dr. Borja Corcóstegui, vice-president of the Eyes of the world Foundation*



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### **"It pleases people to know that they will be cared for by a Saharawi ophthalmologist"**

The Saharawi ophthalmologist trained by Eyes of the world, **Dr. Jalil Jatri**, has been providing ophthalmological care in the camps as per the agreement drawn up between the Foundation and the Ministry of Health of the Government of the Saharawi Arab Democratic Republic (SADR).

Dr. Jatri has visited the Sahara on two occasions, the first of which coincided with a medical-surgical commission. He has carried out **161 consultations and 52 operations**. His presence has allowed a considerable expansion in ophthalmological care and patient follow-up.

"I am proud to be returning to help my people. It fills me with satisfaction to see them so happy at the knowledge that there is a Saharawi ophthalmologist there to look after them. My presence brings advantages in terms of the possibility to attend to ocular pathologies that require closer follow-up, as is the case with glaucoma. Since these are my people, my work comes in very handy: I have an in-depth knowledge of Saharawi pathologies, I use the most suitable surgical techniques and I speak their language, the consultations both speedier and easier ..."

### **"Distance training allows access to the best experts and maximises resources"**

2008 saw the Foundation celebrate the third edition of the **Eyes of the world Cybercampus**, an initiative which allows the distance-training of local staff in ophthalmological subspecialties via videoconference. To date, this event has been organised within the framework of the *Eyes of Bolivia* programme, with the support of the National Institute of Ophthalmology and the Bolivian Ophthalmological Society.

The training activity coordinator and secretary of the Medical Committee of Eyes of the world, **Ricardo Casaroli**, tells us that "this initiative was born in order to provide the sound theoretical knowledge required to complement the training activities of the INO, the objective being to improve the level of ophthalmological care in the Bolivian public healthcare system. This model has been extensively praised and has gleaned excellent reviews, so we can indeed say that it is working".

"New technologies allow fast, fluid, real-time communication between Barcelona and La Paz and a full interaction through the setup of rounds of debate where questions are answered and experiences shared. This long-distance system enables access to the best experts in the various fields of ophthalmology whilst maximising resources. Eyes of the world is committed to providing consistent, high quality training. This is our path".



© Eyes of the world



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## 2 Preventing ocular pathologies

### PROMOTING OCULAR HEALTH, EARLY DETECTION AND PATHOLOGY PREVALENCE STUDIES

#### Sahara

- **703 children** from the nursery schools of Smara, El Aaiun and Auserd have undergone checkups by optical technicians in order to allow the timely prevention of ocular illnesses. Those suffering pathologies received treatment courtesy of the paediatric commission.
- Data was collected for Dr. Jalil Jatri's **prevalence study**, in accordance with the procedure established by the Department of Statistics of the Faculty of Medicine, University of Barcelona, which should make it possible to determine the main blindness-causing ocular pathologies.

#### Mozambique

- The **patients** who were operated on within the framework of the medical commissions were provided with information in order to guarantee proper post-operative care.
- **11 triagem**s (nursing assistants) from the province of Inhambane completed a course where they were taught to carry out initial patient selection and the subsequent case referral. The work of *triagem*s trained in 2007 was supervised, all of them obtaining positive evaluations.
- A methodology was devised for the implementation of a **trachoma prevalence study** in the province of Inhambane, under the lead of the ophthalmologist Andrés Müller-Thyssen. The document is currently under assessment by the Ministry of Health of Mozambique.

#### Bolivia

- **235 primary school teachers** from the educational centres of the Bolivian-Dutch Healthcare Network were given 10 seminars on basic ocular healthcare and the detection of visual accuracy problems.
- **Community leaders, representatives of associations for adults, and parents** from 21 rural communities were educated on the importance of ocular hygiene and the prevention of pathologies



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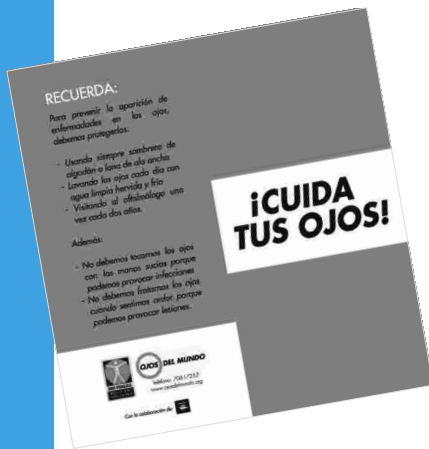


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**“We have been able to prevent pathologies simply by providing some behavioural guidelines”**

In the framework of the *Eyes of Bolivia* programme, the Foundation has distributed about **30,000 leaflets** in order to raise Bolivia's awareness of the importance of ocular health, the prevention and early detection of ocular pathologies and referrals to healthcare centres. The leaflets were distributed in hospitals and primary healthcare centres, during visits to the community and in schools.

The representative of Eyes of the world in Bolivia, **Jaime N. Camacho**, explains that “the leaflets complement the prevention talks we give for the benefit of patients who request ophthalmological care. People instantly identify these with Eyes of the world. Using simple sentences such as ‘you must wash your eyes every day’, ‘we must go to the ophthalmologist when we experience problems with our eyesight’ or ‘bring our children if they find it hard to keep up in the classroom or do their homework’, we provide very simple behavioural guidelines which enable the prevention of a large number of ocular pathologies”.



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## VISION 2020: the Right to Sight

Over the course of 2008, Eyes of the world has been working towards the eradication of avoidable blindness in the most vulnerable countries by 2020, and its objectives are outlined in the **VISION 2020: the Right to Sight**. This is a joint initiative by the World Health Organisation and the International Agency for the Prevention of Blindness (IAPB), an organisation which brings together about 100 international agencies, including the Eyes of the world Foundation.



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# 3 Supplying healthcare centres with equipment

## DONATION OF OPHTHALMOLOGICAL AND OPTICAL MATERIAL, EQUIPMENT AND INSTRUMENTS

### Sahara

- **Ophthalmological equipment:** 1 phacoemulsifier, 1 computerised air tonometer, 1 slit lamp
- **Optical equipment and materials:** 1 template cutter, 1 optotype projector, 1 lens edger, 4,397 presbyopia glasses, 2,431 pairs of sunglasses, 4,440 uncut lenses and 3,002 glasses frames

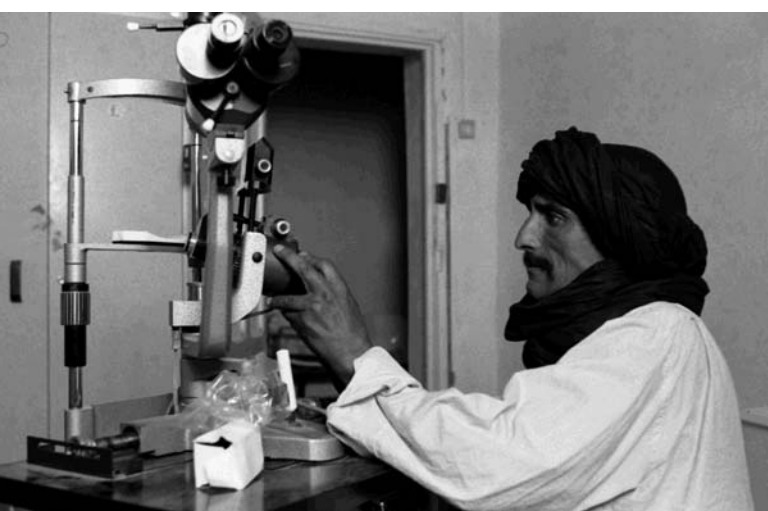
### Mozambique

- **Ophthalmological equipment:** 1 Yag laser, 1 biometer, 1 autorefractometer-keratometer
- **Optical equipment and material:** 1 centring device, 1 oven, 1 template cutter, 1 projector, 180 optotypes, 1 slit lamp, 1 frontophocometer, 1 sample box, some trial glasses, 1 automatic lens edger, 1 manual lens edger, 1,795 presbyopia glasses, 1,352 pairs of sunglasses, 2,060 uncut lenses and 1,815 glasses frames

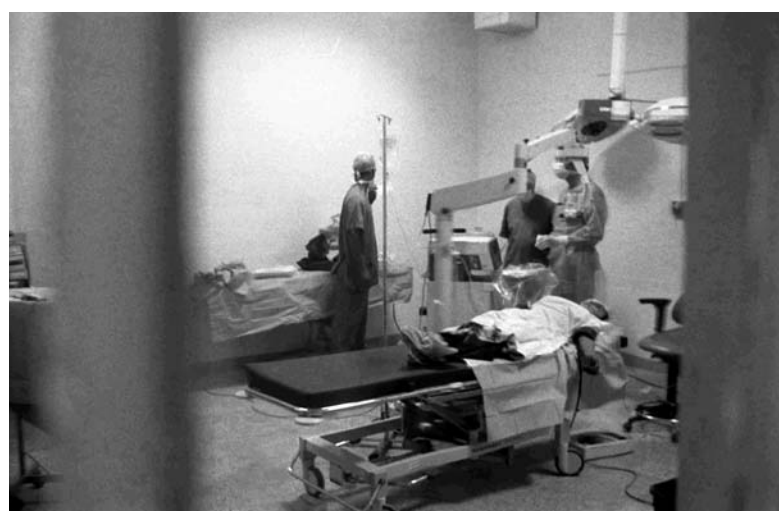
### Bolivia

- **Ophthalmological equipment:** a comprehensive ophthalmology clinic has been set up in the Municipal Corea Model Hospital and equipped with 1 autorefractometer-keratometer, 1 slit lamp, 1 tonometer, 1 indirect ophthalmoscope, 1 direct ophthalmoscope and 1 retinoscope. The second operating theatre of the Bolivian-Dutch Municipal Hospital is now fully equipped with the addition of two 2 skiascopic rulers, 1 set of strabismus prism lenses, 1 Yag laser and cataract forceps. Further additions include an angiograph for the National Institute of Ophthalmology.
- **Optical equipment and materials:** 12 optotypes, 2 optotype projectors, 1 sample box, some trial glasses, 436 graduated glasses, 517 presbyopia glasses and 533 pairs of sunglasses

The ophthalmological equipment needed to carry out surgical operations and consultations scheduled within the framework of commissions, and to guarantee work for local professionals in between commissions was donated, along with non-ophthalmological material and equipment, thus contributing to existing infrastructures.



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© Ferran Garcia/Eyes of the world

**"A simple pair of glasses signifies a major improvement in quality of life"**

Almost 50% of those who suffer from some kind of visual deficiency could correct their refractive defects with a simple pair of glasses, something which those inhabiting the poorest parts of the world do not have access to.

Since May, an **optical workshop** has been available in the province of Inhambane, providing low cost glasses which are suitable for the visually impaired. This is the second optical clinic in the country, the only one previously in existence being based in Maputo. Over the course of the year, an average of twenty pairs a month were assembled, and twelve presbyopia glasses handed out.



© Eyes of the world



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Running the optical workshop is made possible thanks to the presence of two ophthalmology technicians and one assembly technician, all of whom were trained by Eyes of the world and are now in charge of the daily activities of the facility. The assembly technician, **Anita Felizarda**, says that "it brings me great satisfaction to be able to work for the Ocular Bank and help the inhabitants of the province to overcome their eye problems. In addition to doing a job I enjoy, I feel privileged to be able to experience feelings of human warmth. When you give a patient a pair of glasses and they realise that these improve their eyesight, they share their smiles and gestures of appreciation with you, which is priceless. A simple pair of glasses can lead to a significant improvement in quality of life".

In the framework of the *Eyes of Mali* programme, work has already begun towards setting up an **optical workshop** in the **Sominé Dolo Regional Hospital**. To date, there haven't been any glasses assembly centres available in the whole of the Mopti region and the only public optician in the country is located in Bamako, in the IOTA facilities. Actions this year have focused on carrying out a feasibility study in order to assess the viability of implementing the service, identifying its potential location and defining the necessary materials and equipment.



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# 4 Raising public awareness

## ACTIONS TO RAISE AWARENESS OF THE OPHTHALMOLOGICAL REALITY OF DEVELOPING COUNTRIES

### Exhibitions

*Eyes of Inhambane*, by Elisenda Pons. Palau Robert, Barcelona. 18 September – 31 October

*Opening the Sahara's eyes*, by Manel Esclusa and Núria Andreu. Museum of Art and History, Reus. 8 Oct. - 30 Nov.

*Eyes of the Sahara*, by Elisenda Pons. Ernest Lluch Cultural Centre, San Sebastian. 22 December - 17 January 2009



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### Talks

*Blindness, poverty and development*, by Rafael Ribó. Universitat Politècnica de Catalunya, Barcelona. 5 May

*Opening the Sahara's eyes*, by Ilaria Ravai. Municipal Theatre, la Bisbal d'Empordà. 28 May

*Opening the eyes of the world. Fighting avoidable blindness in the poorest countries*, by Carlos Móser and Carles Pla. "Tecla Sala" Metropolitan Cultural Centre, l'Hospitalet de Llobregat. 30 October

### Conferences

Spanish Ophthalmological Society Conference (stand). Seville. 24-27 September

### Contributing events

Seventh Anniversary of *Eyes of the world*. Joan Miró Foundation, Barcelona. 17 July

*Eyes of the world* Golf Tournament, Club Serres de Pals, Girona. 11 October

1 photography contest. *Giving back eyesight: another way to fight poverty*

### Press and internet

170 mentions in the main Catalan, Spanish and international media

154 placements of the advert in spaces of solidarity provided by audiovisual media

25,500 yearly website hits ([www.eyesoftheworldfoundation.org](http://www.eyesoftheworldfoundation.org)), including new content

4 editions of the three-monthly Newsletter





© Eyes of the world

### Donation of a series of sculptures by Andreu Alfaro to the Foundation

The famous Valencian sculptor **Andreu Alfaro** donated a series of sculptures from his work *Eyes of the world* to the Foundation, demonstrating his commitment to those in need. This is a conceptual sculpture, made from stainless steel and marble, where Alfaro shows the dark eyes of those who cannot perceive light and which symbolises the strength and integrity of those who fight for a brighter future.

Andreu Alfaro's donation joins those of other artists of international prestige who chose to show their solidarity towards the foundation, like the painter **Antoni Tàpies** and the photographer **Manel Esclusa**.

### The Night of Eyes of the world

The Foundation organised the annual fundraising dinner in Barcelona, the purpose of which is to raise awareness and present annual accounts. The seventh edition of the **Night of Eyes of the world** was held at the Hotel Juan Carlos I, with top representatives from the worlds of Catalan politics, business, culture and healthcare in attendance, as well as representatives from other communities of the Spanish state like Madrid and the Basque Country.

About 300 people attended the dinner, clear evidence of society's commitment to the Universal Right to Vision despite the fragile current state of financial affairs. This benefit event was championed by the journalist Antoni Bassas and the actress Emma Vilarasau, with the participation of Joan Barril and Joan Ollé who broadcast their show *El Cafè de la República* live on Catalunya Ràdio from the room where the event was being held. The evening ended with a musical performance by Maria del Mar Bonet, accompanied by Dani Espasa.



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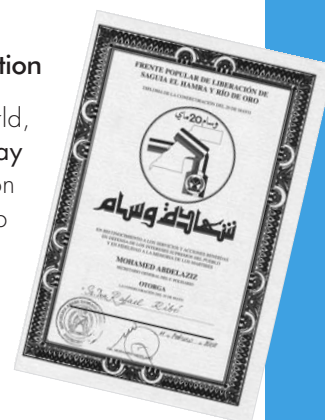
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### Acknowledgements received by the Foundation

In February, the president of Eyes of the world, Rafael Ribó, was decorated with the **20th May Medal**, which is Saharawi's highest distinction of honour, by the President of the Saharawi Arab Democratic Republic, Mohamed Abdelaziz, in consideration of the efforts "made by the Foundation to relieve the suffering of Saharawi refugees by guaranteeing healthcare and providing medical equipment".

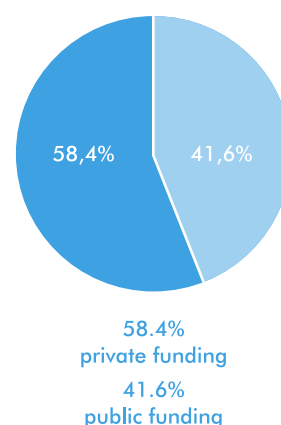


# FINANCIAL REPORT

## HOW OUR FUNDS ARE DISTRIBUTED

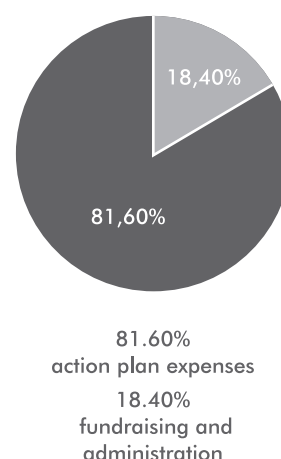
### INCOME

<b>PUBLIC FUNDING</b>	<b>731,670.37</b>
Institutional sponsors of the foundation	208,399.00
Other institutions	523,271.37
<b>PRIVATE FUNDING</b>	<b>1,027,613.33</b>
Businesses and entities	463,845.72
Members	30,102.63
Sporadic donors	117,240.22
Material and equipment donations	230,799.88
"The Night" donations	174,055.84
Other funds	11,569.04
<b>TOTAL INCOME</b>	<b>1,759,283.70</b>



### EXPENDITURES

<b>ACTION PLANS</b>	<b>1,225,246.41</b>
Development Cooperation	1,093,033.81
Ophthalmological treatment	51,167.51
Provision of materials and equipment	567,331.79
Training	132,946.79
Prevention studies and campaigns	12,389.51
Technical coordination, on the field follow-up and evaluation	329,198.21
<b>Raising awareness</b>	<b>132,212.60</b>
External promotion and raising awareness campaigns	64,633.89
Operating expenses	67,578.71
<b>FUNDRAISING AND MANAGEMENT</b>	<b>276,351.48</b>
Fundraising	13,888.67
Central services	259,010.47
Trusteeship	3,452.34
<b>TOTAL EXPENDITURES</b>	<b>1,501,597.89</b>



\* The positive balance of the financial year 2008 will be applied to the actions plans of the year 2009.

# FINANCIAL BACKING AND CONTRIBUTING ENTITIES

## ENTITIES, COMPANIES AND ASSOCIATIONS THAT MAKE OUR WORK POSSIBLE

### PUBLIC FINANCIAL BACKING

#### Foundation sponsors



#### Local authorities

City Hall of Abrera · City Hall of Cambrils · City Hall of l'Escala · City Hall of l'Hospitalet de Llobregat · City Hall of Matadepera · City Hall of Reus · City Hall of Sabiñánigo · City Hall of Sant Sebastià/Donostiako Udala · City Hall of Santa Coloma de Gramenet · City Hall of Sitges · City Hall of Torrent · City Hall of Urretxu/Urretxuko Udala

#### Other government agencies



Consorci Sanitari de Barcelona · Corporació Sanitària de Barcelona · Institut Municipal d'Assistència Sanitària · Servei Català de la Salut

### CONTRIBUTING ORGANIZATIONS

#### Contributing entities



#### Laboratories and entities linked to the world of health

AJL · Alcon Cusí · AMO · Angelini Farmacéutica · Bcn Trade Emplacement · Braun Medical · Col·legi Oficial de Metges de Barcelona · Croma-Pharma · Dicogaf · Digemsa · Etnia Barcelona · Eurooptica · Fundació Jesús Serra · Fundación para la Cooperación y Salud Internacional Carlos III · Hospital General de l'Hospitalet · Jaytesa Uno · Laboratori Aragó · Medical Mix · Novolent · Productos Loring · Rayner · Sangüesa · Sofymed · Sucesores de P. Molina · Suministros Hospitalarios · Topcon · Yodel Internacional

#### Other supporting entities

Bancaja · Bufet Bergós · Caja de Ahorros de Navarra · Caja Madrid Obra Social · Col·legi d'Educadores i Educadors Socials de Catalunya · Consorci per a la normalització lingüística · Consulmóvil · Dones en Acció de Serra · Estels 98 · Fundació Antoni Serra Santamans · Fundació Aspasim-Vicenta Verdú · Fundació Cajamar · Fundació Joan Miró · Fundació privada Girbau · Fundació privada Matias Gomà Serra · Fundació privada Miarnau · Golf Serres de Pals, Arenales de Mar · Grupo Hoteles Ercilla · Imagen en Acción · LaQuimera · MRW · Polongo · Techno Trends · Universitat Politècnica de Catalunya · UOC-Campus per la Pau · VK Comunicació

Special thanks to the ophthalmology healthcare centres which enabled dozens of professionals from Spain, Portugal and Argentina to partake in cooperation programmes for the development of the Eyes of the world foundation in 2008.

# SUCCESS STORIES AND CHALLENGES

## A STEP TOWARDS PERMANENCE

2008 saw us make headway in the **permanence** of our facilities in the field and the reinforcement of our commitment to the **public administrations** of the countries we work with.

In that respect, we have provided support in devising and executing effective ophthalmological development strategies in each territory and have gained, amongst other things, a greater degree of involvement by the Ministry of Health of the Saharawi Arab Democratic Republic in ocular health-related preventative policies, ensuring that it takes ownership for the management and organisation of the activities of the Ophthalmology Service.

Likewise, we have promoted the continuity of ophthalmological and optical care in each territory throughout the year by local staff previously trained by Eyes of the world within the framework of their own public health systems. During this year, specifically:

Aside from Dr. Jalil Jatri's work in the field, the clinics and optical workshops of Saharawi camps operated all year through, attending to over **3,500** patients, carrying out **1,500** refractions and assembling about **400** pairs of glasses.

The local staff of the Provincial Hospital of Inhambane carried out over **900** consultations and created medical history files in order to allow proper patient follow-up.

The staff of the Bolivian-Dutch Municipal Hospital and the Municipal Corea Model Hospital saw about **4,500** patients during the period between commissions by Eyes of the world, and visited over **1,000** patients from the rural communities of the Bolivian altiplano.

Achieving these figures was made possible thanks to the fact that we fostered **training** as the main strategy for our cooperation activities, aware that passing on knowledge and empowering local healthcare staff is the way to make sustainable ophthalmological care models a reality, not to mention the control of ocular pathologies, infrastructure development and basic healthcare.

Núria Ramon i Garcia  
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:

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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 us to a file and will use it to manage your contribution. You may exercise your right to cancel, oppose, access and rectify your data by writing to the address of the Foundation: calle Tamarit 144-146, entl 2 (08015). Barcelona.



# ANNUAL REPORT 08



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