
ANNUAL REPORT 2014-2015



DEAR FRIENDS OF SEVA CANADA

Last year, you helped Seva Canada and Seva Foundation restore the sight of nearly one million people. One million people had their lives dramatically changed for the better. Children educated, crops planted, animals tended, and household chores completed all because you believe, as we do, that everyone has the right to sight.

You restored the sight of almost 1 million people against incredible odds: a devastating earthquake in Nepal, debilitating poverty in Cambodia, political unrest in Burundi, inaccessible terrain and challenging government systems in China.

Thank you for your faith and determination.



Nancy Mortifee,
Board Chair



Penny Lyons,
Executive Director

In 2014-15, Seva donors helped 978,449 people benefit from accessible eye care services.

59,798 people received sight-restoring cataract surgeries, restoring their dignity, productivity and independence.



PHOTO CREDIT: FRONT COVER AND THIS PAGE: © ELLEN CRYSTAL PHOTOGRAPHY

ABOUT SEVA

Mission

Seva Canada's mission is to restore sight and prevent blindness in developing countries.

Vision

Seva Canada's vision is a world in which no one is needlessly blind or visually impaired.

Guiding Principles

- Our belief in equal access to eye care for all
- Our belief that with adequate resources, all people can meet their own needs
- Our commitment to working with international partners to build local, sustainable eye care programs
- Our respect for cultural, ethnic, spiritual, and other forms of diversity
- Our commitment to inform and inspire Canadians to join us in achieving our mission

CREATING A STRATEGY FOR SEVA CANADA

In May of this year Seva Canada finalized a new 3-year Strategic Plan. Strategic planning ensures Seva will operate proactively instead of reactively. It anticipates, devises and creates the future Seva seeks – a world free of preventable and treatable blindness. The strategy identifies what we believe to be the best and most efficient way to achieve this future – and it is as much about what we will not do as what we will do.

What we won't do is focus on health or human needs beyond

eye care, expand geographically without careful long-term planning, or assume we know more about eye care and treating a population than our staff and partners on the ground.

What Seva Canada will do is focus on universal access to services, provide high-quality, affordable eye care and make it available to all regardless of gender, race, age, income level or geographic location.

We will help build programs that are self-sustaining in

both financial and human resource terms.

We will provide the tools and training to our staff and partners so they can one day maintain their programs without our assistance.

We will study our programs to ensure that what we are doing is actually working and to share our results, successes (and failures) with others. As Churchill once said: "However beautiful the strategy, you should... look at the results."



COUNTRY REPORTS

In all settings, Seva supports ever-expanding eye care systems, including clinical facilities and outreach activities, that provide a broadening range of services to people living in the most remote and rural areas of each country. Expansion includes both serving new places and improving the scope of eye care services within existing eye care facilities (such as adding diabetic care for older patients and surgery for children). Both types of expansion require training, for the former adding new staff, and for the latter increasing the skills and knowledge of the existing team. Eye care system expansion also requires careful program planning and labour-intensive integration of eye care within communities and existing health systems. Some of the data collected in the past year can be found in our country reports.

Programs vary according to the needs of each country. Funding shifts over time as programs

become capable of funding certain aspects of their eye care programs on their own.

SEVA & WOMEN'S MICROFINANCE GROUPS

Seva supports community programs, including women's microfinance groups. Microfinance programs have particular strengths as they empower women to seek better health care; they provide women with additional income, higher status within their villages, and connections to communities of like-minded women. By pioneering the partnerships with existing microfinance groups for community activism, Seva is able to deliver eye care messages and influence health-seeking behaviour. As a result, we have seen significant increases in the number of women receiving eye care.

EYE CARE AT THE COMMUNITY LEVEL

Vision Centres, Primary Eye Care Centres & Community Eye Centres are all the same type of facility but with different names in different countries. Located in areas with no eye care service, these basic eye clinics have proven very successful in providing high-quality eye care to thousands of people. Each facility is staffed with an Ophthalmic Assistant or Nurse that diagnose and treat 90% of all eye conditions and refer those requiring surgery or further care to the nearest hospital.



AFRICA

All Seva Canada funding in Africa flows through the Kilimanjaro Centre for Community Ophthalmology (KCCO) located in Moshi, Tanzania and Cape Town, South Africa. KCCO uses Seva donor support to assist eye programs in Tanzania, Malawi, Burundi, Madagascar and Ethiopia to develop and implement population-based eye care services. This primarily involves developing bridging strategies between hospitals and communities, so that people in poor and remote areas in need of care, receive that care. Seva and KCCO are also currently in the beginning stages of program development in Francophone West Africa starting with the creation of two Community Eye Centres – one in Benin and one in Congo-Brazzaville.

Together, Seva and KCCO have helped hospitals double or triple the number of people who have received sight-restoring surgery.

KCCO and Seva's country-partners conduct thousands of eye examinations through outreach at the community level, identify people requiring sight-restoring cataract or trichiasis surgery and provide the surgery. They also implement initiatives to identify underserved women and improve the ratio of women to men receiving eye care and cataract surgery in target areas. Lastly, they identify children with visual problems and provide the necessary surgery and follow-up care.

BURUNDI

Under the leadership of Dr. Levi Kandeke, Burundi's first ophthalmologist trained in cataract and pediatric surgery,

WHAT IS TRACHOMA?

Trachoma is the leading infectious disease causing blindness whereby inflammation of the upper eyelid causes scarring which can lead the eyelashes to turn inward and scratch the front of the eye. It is a recurrent eye infection, found primarily among women and children. Caused by flies, poor water supply and inadequate sanitation, trachoma can lead to scarring and blindness in adults.

this country's eye care program continues to grow, innovate and excel, serving those who need access to high-quality eye care services.

Seva supported the establishment of an additional Community Eye Centre that serves the remote community of Gatabo. Self-financed through service fees after the initial start-up costs, Community Eye Centres serve 50 to 150,000 people per year and are able to provide a



AFRICA (CON'T)

full range of services including glasses for refractive error, drugs for minor conditions, and referral of complex and surgical cases to the ophthalmologist.

What you've helped accomplish in Burundi:

Services provided:

- 17,728 (15,482) people were seen as outpatients
- 765 (1,181) cataract surgeries performed in the Western Region (this number decreased due to political instability in the country.)
- Seva provided additional equipment for the National Child Eye Health Program and a Child Eye Health Tertiary Facility in Bujumbura.

MADAGASCAR

In Madagascar, the vast majority of people have no access to health care. Eye disease is one of the 10 most prevalent

medical conditions in the country and an estimated 140,000 Malagasy children are visually impaired or blind.

Seva supports direct eye care service delivery, training and program planning at four hospitals: Ambohibao (near the capital city of Antananarivo), Tomatave/Toamasina (on the central east coast), Antsirabe (in the central highlands) and Sambava (in the northeast). Seva funds are targeted to support community outreach activities to rural and remote populations, so that people most in need of eye care have access to treatment.

Seva also supports a nationwide pediatric program by funding clinical services, supplies and transportation, as well as training a network of community workers, called Key

Informants, to find and refer children who need eye care.

To assist with the financial sustainability of the Malagasy programs, Seva Canada donors also funded a cost recovery assessment and plan for the Madagascar programs so they can work toward financial sustainability. In addition, Seva Canada trained our Malagasy partners in marketing and fundraising to increase their revenue and remain competitive against new eye care providers vying for paying patients. These paying patients are needed to subsidize services for the very poor.

What you've helped accomplish in Madagascar:

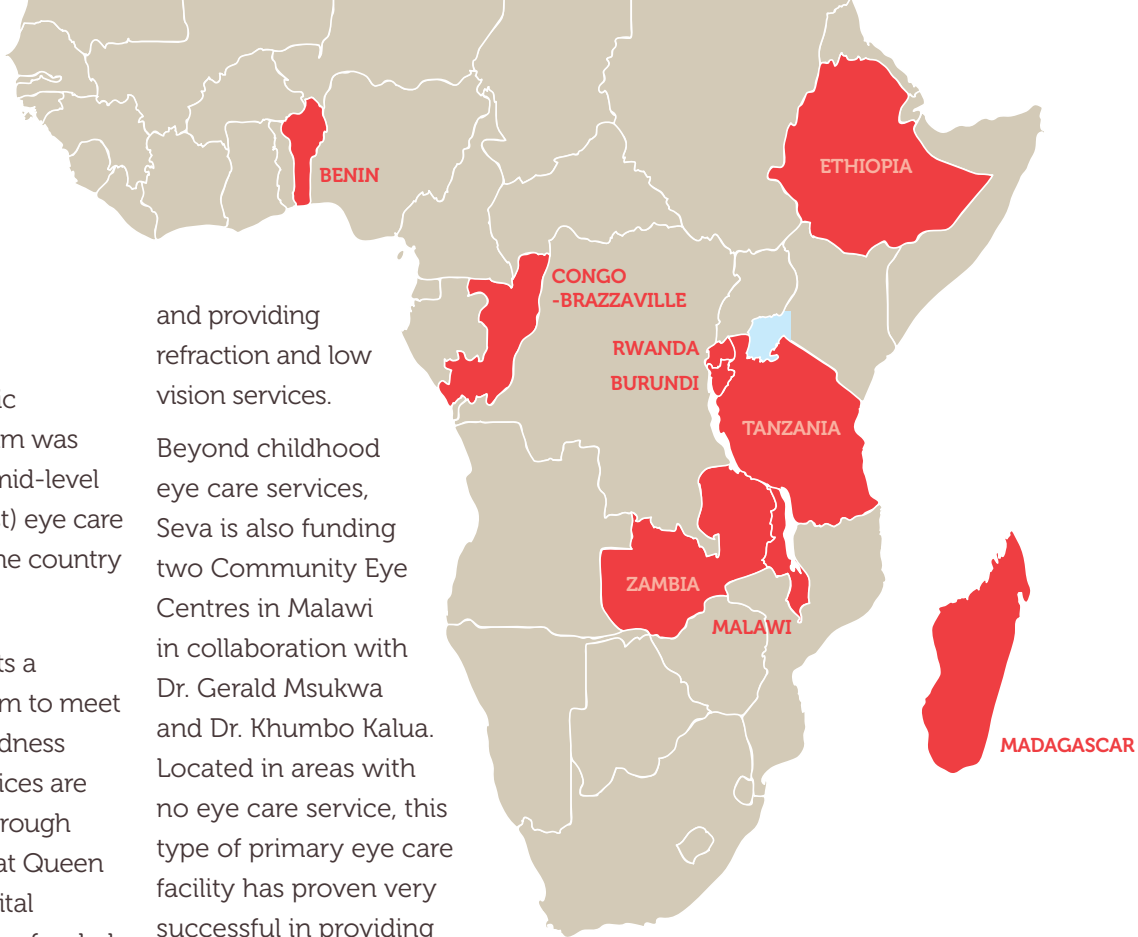
Services provided:

Vakinankaratra region:

- 8,166 (5,200) people were examined and treated
- 683 (500) cataract surgeries performed

Sava region:

- 8,848 (7,337) people were examined and treated



- 868 (754) cataract surgeries performed

Facilities & programs established:

- A national Ophthalmic Nurse training program was established, the first mid-level (non-ophthalmologist) eye care training program in the country

MALAWI

In Malawi Seva supports a service delivery program to meet the low vision and blindness needs of children. Services are provided to children through the pediatric program at Queen Elizabeth Central Hospital (QECH) in Blantyre. Seva-funded facilities provide childhood eye care services to the community through various activities, including: training community volunteers and health workers to identify children with visual impairment, implementing radio promotion for health education, providing screening and referral services for the children identified for surgery,

and providing refraction and low vision services.

Beyond childhood eye care services, Seva is also funding two Community Eye Centres in Malawi in collaboration with Dr. Gerald Msukwa and Dr. Khumbo Kalua. Located in areas with no eye care service, this type of primary eye care facility has proven very successful in providing high-quality eye care to thousands of people in greatest need.

The Malawi team trains Key Informants, Surveillance Assistants (government community health workers), Health Centre In-charges, Ophthalmic Clinical Officers, Optometrists and Ophthalmic Registrars from various districts.

The training focuses on how to identify children with visual impairment in the community and how to help them to gain access to the eye care system. Trainings are typically followed by an outreach screening camp in the community where the training occurred.



AFRICA (CON'T)

What you've helped accomplish in Malawi:

- 5,060 (4,900) children were seen at QECH, of which:
 - 127 (145) children had cataract surgery
 - 341 (200) children had other surgery including strabismus and glaucoma
- 12 (3) community outreach activities

Training:

- 311 (103) Key Informants, Surveillance Assistants and Health In-charges trained
- 36 (34) Ophthalmic Clinical Officers, Optometrists and Ophthalmic Registrars trained
- 13 outreach screening camps held following training:
 - 886 children screened (504 males, 382 females)
 - 126 children had cataract surgery
 - 342 children had other surgery

TANZANIA

Tanzania has a population of over 49 million people with 28.2% living below the poverty line, and 320,000 are blind. Seva supports three areas in Tanzania: Mara Region near Lake Victoria, Arusha Region and Manyara Region.

In all three areas, Seva supports community programs, including women's microfinance groups. As a result, we have seen significant increases in the number of women receiving eye care.

Among the Maasai ethnic group in Ngorongoro and Manyara Regions in particular, Seva Canada is funding the screening and treatment of trachoma. In an attempt to treat trachoma, the local Maasai microfinance groups have been educated to identify, refer and encourage people to go for corrective surgery.

In Mara, Seva Canada funds the eye department of the District Hospital including a small team of one ophthalmologist, two ophthalmic nurses, one optometrist and one nurse assistant. Seva also provides funding for community outreach, equipment, consumables, glasses and surgery.

What you've helped accomplish in Tanzania:

Services provided:

Mara region:

- 9,462 (11,100) people examined and treated
- 988 (800) cataract surgeries performed

Training:

KCCO expanded the microfinance program to one more district in the Mara Region, training a total of 30 microfinance members. The new microfinance members in:

- Mara referred a total of 235 (161 female, 74 male) patients to both the eye clinic directly and to the outreach screening camp

- Ngorongoro District referred 25 (17 female, 8 male) patients who received trichiasis surgery for trachoma in two surgical camps

ETHIOPIA

With over 96,500,000 people, Ethiopia is the second-most populous country in Africa. More than 80% of Ethiopians live in rural areas without access to safe drinking water or sanitation. This lack of water and sanitation results in a potentially blinding infectious eye disease called trachoma, a disease that disproportionately impacts women.

Seva Canada is funding community outreach programs in two Ethiopian locations: Bahir Dar and Debre Berhan, both in the country's Amhara Region. In both locations, Seva Canada supports gender equity in the community by training representatives from microfinance groups to identify, promote, refer and support women who have trouble

accessing eye services. In Debre Berhan microfinance members referred a total of 36 people (20 female, 16 male) who received cataract surgery.

Seva Canada also supports the eye units in government hospitals in Debre Berhan and Bahir Dar by providing funds for training, community outreach, surgery, glasses and medicines.

RWANDA & ZAMBIA

The programs in Rwanda and Zambia were funded from other sources this year and did not require Seva Canada support.

FRANCOPHONE WEST AFRICA

Francophone West Africa has received significantly less funding and attention from international organizations for aid and development in the past 20 years. As a result, it has experienced very low levels of medical development.

Seva Canada is funding Community Eye Centres (CECs)

in Congo-Brazzaville and Benin, modeled on eye care centres in India, Nepal and Burundi.

Seva Canada is funding the development of a CEC in Pointe-Noire, the country's second largest city. Led by a Congolese ophthalmologist, Dr. Freddy Geraud Ngabou, this facility will be operational by late 2015. Dr. Ngabou is also working to strengthen management and leadership capacity so the team can replicate CECs throughout the country.

In Benin, Seva Canada is funding a CEC with Dr. Amadou Alfa Bio. The CEC will be located in Parakou in northern Benin, and will become the first eye care facility in the entire region.



INDIA

Seva continued to work closely with our primary partner in India, the Aravind Eye Care System. Aravind is a world leader in its model of high-quality, high-volume, affordable, sustainable, community-oriented eye care. Its innovative financial structure allows fees from one-third of paying patients to subsidize services for the two-thirds of patients who cannot afford

the costs. Aravind's creative cross-funding model is now the standard in all Seva-supported programs.

This dynamic partnership now focuses on:

- building Aravind's research capacities as a training and consulting resource for eye care programs in the Indian subcontinent and worldwide;
- developing a network of Vision Centres to bring eye care to the village level and serve India's rural poor;

- human resource development and capacity building of eye care personnel and institutions worldwide.

Seva also assists Aravind to act in a mentoring role to other eye care institutions interested in increasing their capacity and productivity. This program has expanded to include approximately 50 hospitals in 22 countries. This program not only assists hospitals with clinical services but also develops Vision Centres to bring eye care to the village level.



EGYPT

With a population of 82 million people, Egypt possesses the technical capacity to restore sight to its 820,000 blind residents, two-thirds of whom are women. However, due to inadequate awareness, access and acceptance, available eye

care services are rarely used even when free.

Through the Nourseen Foundation, an Egyptian eye care NGO dedicated to serving the country's rural poor, Seva donors supported trachoma work in Menia governorate, a region in Middle Egypt.

Seva donors also support the Nourseen Foundation in building a community ophthalmology

network including mobile caravans that are used to treat, refer and transport patients to hospital for eye care.





GUATEMALA

Guatemala is one of the poorest nations in Latin America. Nearly 37% of the population lives on less than \$2 a day and roughly 15% of people lack access to health care. An estimated 80,000 Guatemalans are blind from cataracts and thousands more children, women and men go blind every year or are functionally blind due to lack of access to glasses.

Currently, Visualiza Eye Care System, Seva's partner in Guatemala, provides approximately 30% of the

cataract surgeries in the country with only 2% of the nation's ophthalmologists.

Seva provides direct support to Visualiza's clinical services, program capacity building, outreach to new areas, and childhood blindness programs including surgeries and school screenings. Seva also supports Visualiza's growing role as a training institute for mid-level ophthalmic staff and a mentor to other eye care programs in Central and South America that



are interested in increasing their capacity and efficiency.

What you've helped accomplish in Guatemala:

- 37,753 (11,017) outpatients screened
- 2,124 (583) cataract operations





CAMBODIA

Working in Cambodia since 1998, Seva provides high-quality eye care in 5 provinces to a population of 2.5 million people – about 1/5 of the Cambodian population. In Cambodia, 18% of people live below the poverty line and 181,680 people are blind.

In each province, Seva Cambodia supports Eye Units in provincial government hospitals and the non-governmental Angkor Hospital for Children in Siem Reap. Seva also funds community outreach, education programs and clinical services including cataract surgery and training of local doctors, nurses, administrators and support staff.

Seva Canada primarily supports the Banteay Meanchey Eye Unit, a facility within the Government General Hospital that includes an outreach clinic and dedicated ophthalmology-operating centre.

Eye Unit staff include an ophthalmologist, refractionist, and 3 ophthalmic nurses. The community ophthalmology program has 2 full-time field workers who travel to remote areas to find and screen patients as well as school teachers trained in basic eye care screening and referral.

Cataract surgery is conducted on an ongoing basis by the full-time ophthalmologist residing at the Banteay Meanchey Eye Unit. Seva Canada funds medicines and supplies and the cost of transportation for poor patients from villages throughout the province to the eye unit and from the eye unit back to their villages.

What you've helped accomplish in Cambodia:

Services provided:

Seva partner Eye Units:

- Examined 29,785 (24,850) outpatients

- Performed 10,142 (8,557) eye surgeries including 4,275 (3,760) for cataract

Seva Cambodia & Eye Unit staff:

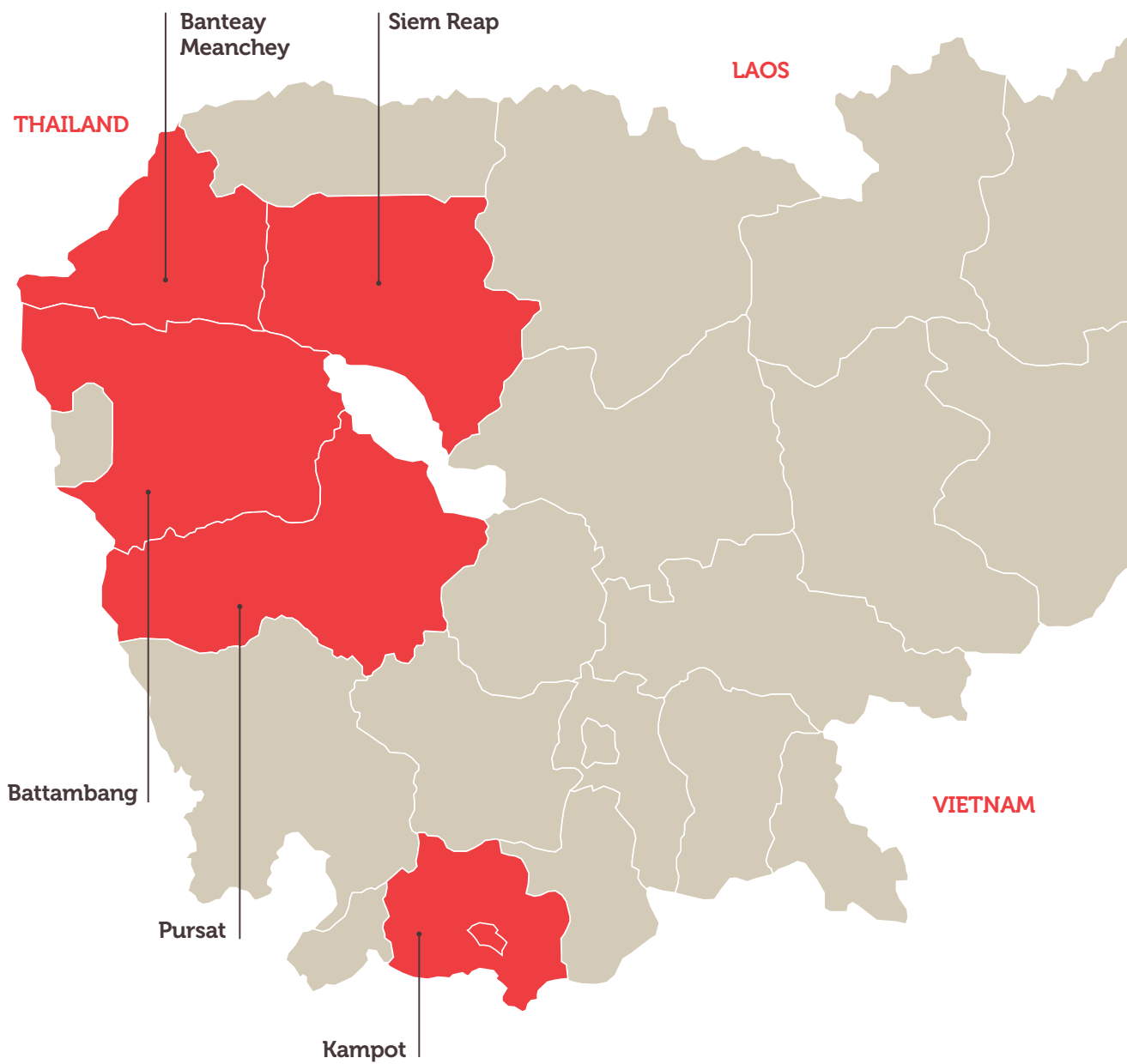
- 26,617 (23,417) patients were screened
- 41,847 (52,323) children were examined through school screenings and 1,357 (1,348) students were provided free eyeglasses

Community-based training:

- 11 (4) field workers received refresher training
- 277 (323) school teachers received training on visual acuity measurement and primary eye care
- 101 (91) health center staff received training on primary eye care

Professional training programs:

- 2 candidates received 6 months of refraction training
- 1 (1) candidate received 3 months of refraction training





NEPAL

Nepal is a tiny, mountainous country with a population of almost 30 million people. The challenges of its diversity and geography, combined with continuous political upheavals, have resulted in Nepal being one of the world's least-developed nations.

Seva currently supports an ever-expanding network of facilities and activities that reach the most remote and rural areas in Nepal. Program expansion includes training of additional personnel and development of new programs such as screening for chronic diseases like diabetic retinopathy, pediatric programs and utilizing microfinance groups to identify and refer community members who need eye care.

Seva supports programs through;

- Lumbini Eye Institute in Lumbini Zone (including three

secondary hospitals and six Primary Eye Care Centres

- Bharatpur Eye Hospital in Chitwan District (including 3 Primary Eye Care Centres)
- Nine other locally operated Primary Eye Care Centres in far western and eastern Nepal

What you've helped accomplish in Nepal:

Services provided:

- Seva partner eye hospitals and Primary Eye Care Centres (PECCs) examined 508,236 (470,993) outpatients and performed 34,305 (32,942) cataract surgeries
- Seva-supported eye camps screened 41,850 (65,761) patients and performed 8,469 (13,508) cataract surgeries
- The school screening program examined 138,930 (155,148) children and provided 4,224 (2,924) free glasses

New facilities & programs established:

- 1 new hospital in Thori, south central region affiliated with Bharatpur Eye Hospital
- 1 (1) new secondary eye hospital was established in Kapilvastu, western Nepal
- 3 new Primary Eye Care Centres established (Chainpur, Salyantar, and Sarlahi)

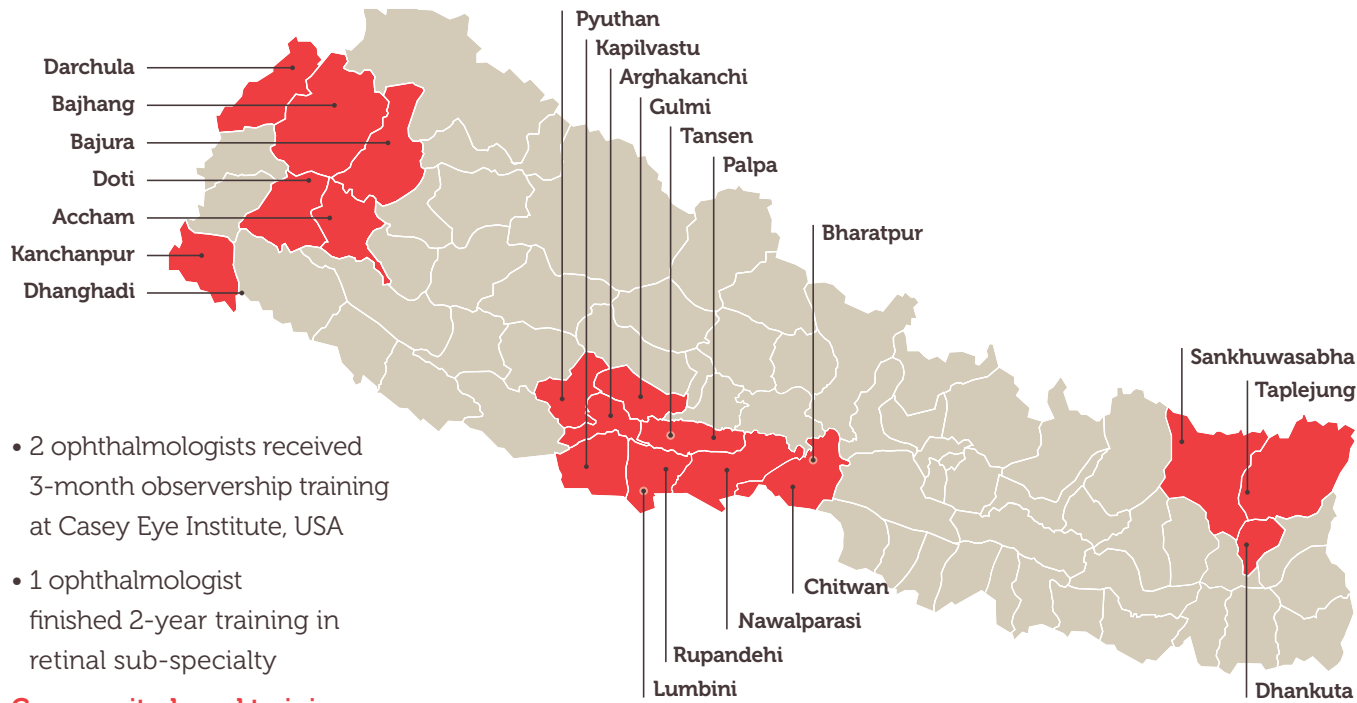
Training:

Professional training programs (capacity building):

- A 3-year Ophthalmic Assistant training program was established in Bharatpur Eye Hospital (40 students/year)

Professional training:

- 3 (5) candidates received scholarships to undergo MD residency in ophthalmology
- 1 (1) candidate received a scholarship to undergo Ophthalmic Assistant training



- 2 ophthalmologists received 3-month observership training at Casey Eye Institute, USA
- 1 ophthalmologist finished 2-year training in retinal sub-specialty

Community-based training:

- 2,798 (1,873) Female Community Health Volunteers received training on primary eye care
- 1,477 (1,464) school teachers received training on visual assessment and primary eye care





TIBETAN AREAS OF CHINA

The Tibet population endures harsh weather, high altitude, strong ultraviolet rays and a sporadic food supply. These conditions result in a high prevalence of eye disease, including cataracts. The Tibet Autonomous Region alone has over 30,000 people who are blind due to cataracts.

Seva supports over 70% of all eye care provided in the Tibet Autonomous Region and Tibetan areas of Qinghai, Szechuan, Gansu and Yunnan Provinces. Almost all of the eye care is planned, conducted, and managed by Tibetans who are trained by Tibetan eye care experts.

Seva's Tibetan team works with local government hospitals and the Public Health Bureau to establish clinical services and to train local doctors

throughout the region. To date, Seva has trained 1,181 Tibetan eye care personnel, from rural health workers to nurses to ophthalmologists.

Seva Tibet also assists eye care programs with the planning, implementation, and monitoring and evaluation of 13 facilities that serve about 5 million people. For new programs, Seva Tibet provides training, equipment and supplies to increase cataract surgical volume, improve optical shops, and conduct school and community outreach. In larger and more mature programs in Lhasa and Darstedo, Seva Tibet strengthens pediatric services and promotes subspecialty care for adults, as well as helping to move toward financial self-sustainability through service fees.

What you've helped accomplish in the Tibetan Areas of China:

Services provided:

- 102,985 (68,231) outpatients examined
- 7,032 (6,724) cataract surgeries performed both in hospital and eye camps
- 919 (1,195) free eye glasses provided
- 5,052 (4,075) glasses sold through optical shops

Training:

- Seva Tibet staff and the Menzhikang Hospital for Traditional Tibetan Medicine (MZK) launched the Tibet Cataract Surgery Training Center within Menzhikang Hospital dedicated to training local cataract surgeons
- 1 ophthalmologist completed 2nd-year general ophthalmology training at Aravind Eye Care System in India

- 1 ophthalmologist underwent 3 months of training in pediatric ophthalmology at Tianjing Eye Hospital
- 2 ophthalmologists completed their final year of a 2-year training program in Harbin, China
- 3 ophthalmologists underwent 3 months of subspecialty training in corneal transplantation, glaucoma, and oculoplasty at the Shantou Eye Centre, Guangdong
- 48 (61) other eye personnel (nurses & hospital workers) received training, mainly through the Kham Eye Centre



HELPING ZHA OUT OF THE DARKNESS

Zha Qie is a 72-year-old woman from a Tibetan village called Jiang She. She was nearly blind when she arrived at the Seva-supported Kham Eye Hospital to receive sight-restoring surgery, and she told us her story:

12 years ago, Zha Qie's husband was working in a neighbouring town, about an hour's drive from her home. One day Zha Qie went to visit him, and had a very bad accident, losing both of her legs. Several years later she began to lose her sight.

She wept as she told us that she did not want to live any longer. Her husband had health problems, and she did not know how she could care for him without her legs or her vision. Her two daughters cared for them both, but it was a struggle as they were poor.

However, the girls were devoted to their parents, and insisted on helping. Zha Qie's eldest daughter was with her at the hospital and explained: "We sustain ourselves selling potatoes. I've tried my best to look after her with the little I have, but this burden is too great for our family to bear. Our mother has lost both her legs. We cannot endure seeing her blind also."

One day a friend told them of a Seva outreach screening coming to the area, giving people free eye testing. On the appointed day, Zha Qie and her daughter met the Seva eye care team and together they learned that Zha Qie's blindness was curable; it was an operable cataract, which was soon treated at the hospital.

Zha Qie was so happy to have her sight back, relieved of the



worry that she would be blind for the rest of her life. She gave a very thankful smile and said in an excited voice: "I am so grateful to all the doctors, nurses and donors who have helped me.

They are all like my own children, helping me out of the darkness to finally see. Thank you."

FINANCIALS

STATEMENT OF OPERATIONS AND CHANGES IN NET ASSETS FOR THE YEAR ENDED JUNE 30, 2015



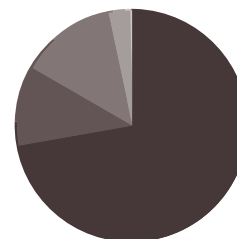
REVENUE	2014/2015	2013/2014
Foreign Affairs, Trade and Development Canada (formerly CIDA) program grants	197,910	216,129
Project grants and contracts	160,735	164,852
Donations	1,066,486	1,337,013
Donations In-Kind	1,171	28,039
Special events, presentations & net merchandise sales	46,245	17,526
Interest and other income	6,762	3,500
Other Government revenue	-	12,000
	1,479,309	1,779,059

COST OF GOODS SOLD		
Opening inventory	7,836	8,684
Purchases	8,682	5,766
Closing inventory	(9,563)	(7,836)
	6,955	6,614
	1,472,354	1,772,445

EXPENSES		
Program payments	918,295	997,863
Program administration	235,313	252,956
Fundraising	200,367	194,683
General administration	130,648	111,073
	1,484,623	1,556,575

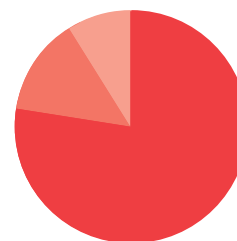
EXCESS OF REVENUE OVER EXPENDITURES	(12,269)	215,870
NET ASSETS, BEGINNING OF THE YEAR	565,991	350,121
NET ASSETS, END OF YEAR	553,722	565,991

SOURCES OF SUPPORT



Individuals & Corporate	72.4%
Foundations & Grants	10.9%
Government	13.4%
Products & events	3.1%
In-Kind	0.1%

YOUR DONATIONS AT WORK



Programs	77.7%
Fundraising	13.5%
Administration	8.8%

Seva's complete audited financial statements are available online at seva.ca/publications/annual-reports

LOOKING AHEAD

Next year, together with our donors, supporters, staff and partners we will restore the sight of another million people. One million people; the number sounds impressive and it represents a huge collective effort, but it is not enough.

Available eye care programs currently meet only 10% of what is needed to eliminate preventable or treatable vision

loss estimated at 228 million people. We must dramatically increase availability of eye care services to meet this unmet need.

Scaling up service delivery to give sight to more people goes beyond the provision of surgery, glasses and medicine, the building blocks of Seva's programs. We need to provide more training – not just in clinical services but in skills such

as management, cost recovery, and marketing. We need to increase our partner's capacity to increase both efficiency and productivity of existing services. And we need to get bold and creative and invest in financially sustainable eye care models like Vision Centres which provide year-round care to a community and generate enough revenue to self-sustain and expand services.

We need to fuel an eye care revolution. The rate of expansion of high-quality eye care is the only criteria for success.



OUR THANKS

Government

Department of Foreign Affairs, Trade and Development Canada (DFATD)

Foundations & Grants

BCGEU Diane L. Wood International Solidarity and Humanity Fund

The Benevity Community Impact Fund

Canadian Union of Public Employees
British Columbia

Charity Intelligence Canada

Chimp Foundation

Crossroads United Church

Grayross Foundation

Home Depot Foundation

ICROSS CANADA

Karuna Fund

Kim Family Foundation

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Somerset Foundation

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Spencer Family Fund

St. Mark The Evangelist Catholic Church

UNIFOR Social Justice Fund

United Way

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