COUNCIL OF MEMBERS MEETING
October 1-2, 2009 (Thursday / Friday)
InterContinental Hotel, Melbourne

MINUTES

Date/Time -  
1st Session: October 1, 2009 (Thursday) Melbourne: 0900 – 1745
2nd Session: October 2, 2009 (Friday) Melbourne: 0900 – 1300

Venue -  Rialto 2 & 3, InterContinental Hotel, Melbourne

1. Welcome

C. Garms welcomed the members, observers and the invited guests

Traditional Welcome lead by Joy Murphy (Senior Elder of the Wurundjeri People)

C. Garms introduced Joy Murphy, a Senior Aboriginal Woman Elder of the Wurundjeri People. In her role as an Elder, Joy has had the privilege to welcome many people that have come to her Father’s traditional country including many international guests and notably Mr. Nelson Mandela, Mr. Martin Luther King and HRH Queen Elizabeth II. Joy has been involved with Aboriginal issues for thirty years, has held executive positions across all sectors of Government and is an honorary Professor of Wunburne University of Technology, Chair of the Wilin Centre for Indigenous Cultural Arts and Development at the Victorian College of Arts, Patron for The Black Arm Band, Board member of Fraynework Multimedia and Patron for Parliament of World Religions. Joy is a storyteller of dreamtime stories featured on the ABC and World Tales on SBS. She is co-producer and co-director of a number of cultural performances and is a published short story writer.

Joy Murphy welcomed everyone to Melbourne by telling stories and history of the Wurundjeri People. She also thanked H. Taylor and IAPB members for their commitment in helping their indigenous community in many serious health issues.

C. Garms thanked J. Gersbeck of VISION 2020 Australia and her team for making all the arrangements for the IAPB Meetings. He also thanked Prof. Hugh Taylor for bringing everyone to Melbourne and his hospitality and to The Hon. Dr. Barry Jones for arranging the gala dinner which gave opportunity for IAPB members to meet Government representatives and other VIPs.

C. Garms announced and congratulated:

- Mr. David Green, recipient of the University of Michigan Humanitarian Service Award
- Dr. Ahmed Trabelsi, recipient of American Academy of Ophthalmologist Secretariat Award
- Dr. Muhammad Babar Qureshi, recipient of Prince Abdul Aziz Ahmad Al Saud Prevention of Blindness Award
- Helen Keller International, recipient of the Champalimaud Award for 2009
- Professor Hugh Taylor, recipient of the Helen Keller Award

C. Garms informed that Prof. Barrie Russell Jones passed away in Tauranga, New Zealand last August 19, aged 88. He was one of the band of New Zealanders who came to Britain to further their postgraduate training and then stayed to make ground making contributions to medical science in Britain and throughout the world. In 1963, he was appointed as the first professor in the newly established Chair of Clinical Ophthalmology in the University of London. He was a visionary with genuine compassion and recognised that academic ophthalmology had social responsibility. So in 1981 he resigned from the Chair of Clinical Ophthalmology to establish and lead the International Centre for Eye Health, a new department of preventive ophthalmology at the Institute. Its purpose was to apply the science of epidemiology and the principles of public health to eye health in the developing world. C. Garms asked the members to stand up for a minute of silence in memory of Prof. Barrie Jones.
1.1 Adoption of the Agenda [attached]

C. Garms informed that because of other commitments, The Hon Bob McMullan will arrive only at around 10:30, therefore the agenda will be arranged accordingly.

1.2 Minutes of the Last Meeting [attached]

Minutes of the last meeting held last August 24, 2009 in Buenos Aires, Argentina were approved.

1.3 Matters Arising

There were no matters arising that are not covered in the Agenda of this meeting.

2. IAPB Update

2.1 Report from the Chairman

C. Garms updated members about IAPB since the last Council meeting in Buenos Aires:
- Dr. Larry Hansen had resigned because he was not able to obtain funding due to the global financial crisis and without additional funds, he did not see how he could advance the operation of IAPB and therefore felt that he was not able to fulfil what he had been tasked to do.
- Immediately after the resignation of Dr. Larry Hansen, P. Ackland who was the programme director was asked to take on this position as Acting CEO and he was appointed as CEO at the Board of Trustees Meeting in Bahrain.
- IAPB had lost some corporate patrons/sponsors which had resulted in significant financial constraints. Despite the financial problems, IAPB had managed to maintain daily operations and kept the budget in compliance to the guidelines and reserves policy.

C. Garms thanked P. Ackland for accepting the assignment as IAPB’s CEO and his commitment and hard work to manoeuvre IAPB through troubled waters and personally thanked him for the good collaboration.

Another highlight of this year was the adoption of the Action Plan for Prevention of Avoidable Blindness at the 2009 World Health Assembly which is a major milestone for PBD. I. Kocur will address this in his presentation. C. Garms thanked I. Kocur and his team for all his hard work.

C. Garms explained that after the financial crisis, it was necessary to review the strategy of IAPB and therefore in the last Board of Trustees meeting in Bahrain, a significant part of the meeting was used to discuss future policies and strategies of IAPB.

He added that following the discussions in Bahrain, the strategic plan and operational plan was developed. The strategic plan outlines the strategic objectives & approaches for the next quadrennium. The annual operational plan based on the strategic approaches outlines the activities and budget allocation which will be revised every year. This will be covered more in detail in Agenda Item 3.

2.2 Report from the CEO [PowerPoint]

P. Ackland thanked VISION 2020 Australia for the arrangements that they have made for the IAPB meetings. His report highlighted achievements in the last few months since he took over as the CEO of IAPB:
- Developed a Strategic Plan which was approved by the Board of Trustees at their meeting earlier this week and which gives a blueprint of what IAPB plans to do in the next four years.
- The WHO Draft Action Plan which was adopted in the WHA and I. Kocur will give an update on this followed by a breakout session where members will be divided into different groups to discuss on the implementation of the Action Plan.
- A VISION 2020 anniversary event is planned for March 2010 in Geneva. More details will be covered under Agenda Item 14.1.
- Plan for a publication that highlights the achievements of VISION 2020 in the first 10 years.
IAPB may approach members for sponsorship.

- Launching of VISION 2020/USA in April 2009, hopefully this national body will become as influential and effective in advocacy as VISION 2020 Australia.
- VISION 2020 Australia and partner organisations have been involved in negotiations with the Australian Government and the Avoidable Blindness initiative which will be covered in the opening address of Mr. Bob McMullan.
- On World Sight Day, thanks to P. Courtright for writing the report, materials have been produced and distributed to regions.
- IAPB will launch its new logo, and website later in the Council meeting.
- The importance of trachoma and onchocerciasis control in the prevention of blindness was re-affirmed and both are still priority diseases within VISION 2020. The drug donations from Merck and Pfizer meant that there was a good chance of eliminating these diseases from many countries by 2020. The existing NGDO group for onchocerciasis and the International Coalition for Trachoma Control had agreed to double up as IAPB programme committees.
- CBM, Sightsavers International and ORBIS continue to be loyal supporters of the VISION 2020 workshop programme and these workshops will continue to run in all regions.
- The VISION 2020 UK Links programme of the ICEH which links 19 UK training institutions with their counterparts, mainly in Africa had been evaluated. It is hoped that the achievements of this programme will be shared with members in future meetings.
- The Standard Chartered Bank’s Seeing Is Believing programme was proceeding really well and J. Conlon will make a presentation later in the meeting. Many members are involved in phase three and four of the programme.
- On Carl Zeiss, the training and equipment provision for the first three centres is almost completed and in mid-November, there will be an official launch ceremony for the Nigeria centre. P. Ackland thanked the HR Programme Committee members who have been managing this effort.
- The status on the Eye Fund and Capacity Building Grant will be presented later in the meeting.

P. Ackland informed members that one of the biggest challenges facing IAPB right now is resources, which until now, IAPB has been dependent upon members’ contribution. To implement the action plan and to make ambitions a reality, it is essential to seek new ways of generating income for IAPB and to achieve the goals of VISION 2020.

Additional financial support obtained so far include:

- EU fund of 180,000 Euros for work in Southern Africa through a coalition led by Sightsavers International of which IAPB was a member. Dr. Daniel Etya’ale who will be seconded to IAPB to work as the regional co-ordinator for Africa will now have the funds for some activities when he moves to South Africa next year.
- CBM pledged 70,000 Euros for IAPB’s work in Europe with a focus upon HR development.
- CBM, Sightsavers International and ORBIS have pledged $200,000 in support of the VISION 2020 workshop programme.
- OGS have granted $100,000 for three years to employ a senior advocacy person within IAPB.

During the course of the week:

- The Fred Hollows Foundation agreed to match the OGS contribution of USD$100,000 for three years to support the IAPBs advocacy capacity.
- IER have confirmed financial support of $200,000 a year for five years to support IAPB’s income generation strategy.

P. Ackland expressed his gratitude to the financial support from members which are very important to advance the development of IAPB.

P. Ackland added that several regional plans have been converted into income generation plans which will become a basis for negotiations with potential donors.

IAPB needs to be as efficient as possible and there are many back office improvements underway particularly with membership dues collection, a new accounts package, 2008 audit, new IT systems with shared e-mail and document control systems across the whole organisation and development of HR policies.

He stressed how important it is for members to pay their membership dues promptly as
chasing up unpaid fees had taken up a huge amount of staff time which is not a good use of IAPB’s limited resources.

He concluded that the focus in the next three months will be to conduct a scoping study to look at the most likely sources of income for IAPB, to recruit an advocacy person and organising the ten year anniversary in Geneva.

3. IAPB Strategic Plan [tabled + PowerPoint]

P. Ackland explained that the Strategic Plan outlines the Strategic Objectives and Approaches for the quadrennium based on the discussions that took place in the board meeting in Bahrain last March 2009. This Strategic Plan had been approved by the Board of Trustees earlier in the week. He presented the main strategic aim and objectives included in the plan to the Council and pointed out that the vision and mission of IAPB have not changed from earlier years.

Comments and questions were received regarding Governance and membership matters. P. Ackland replied that these will be reviewed in 2010 and a suggested way forward will be discussed with the Board.

4. Update from WHO [PowerPoint]

I. Kocur acknowledged the assistance and support provided by the VISION 2020 partners to the WHO while developing the Draft Action Plan for the prevention of avoidable blindness and visual impairment. The technical quality of the Action Plan has been acknowledged in the World Health Assembly this year by many member states. This document is very unique for the Global Initiative in the sense that it has been fully supported by all WHO member states.

I. Kocur described the added value of the VISION 2020 partnership for the work at global, regional and national levels, and the need to collect in a systematic way more data and information in order to adequately evidence the accomplishments of VISION 2020 to date. He expressed observations on how various partners and Ministers of Health can and should work with WHO headquarters and WHO country and regional offices. He also briefly reported on the meeting of the WHO Monitoring Committee for the Elimination of Avoidable Blindness.

Opening Address by The Hon Bob McMullan MP, Parliamentary Secretary for International Development Assistance

C. Garms introduced The Hon Bob McMullan and stated that he was pleased he was able to come to the IAPB meeting. Mr. McMullan is the Parliamentary Secretary for International Development responsible for the delivery of Australia’s overseas aid program. He has been a member of the Australian Parliament since 1988 and held a number of Government positions over the last 20 years. Mr. McMullan has been the Parliamentary Secretary for International Development since the election of the Rudd Labour Government in 2007.

Mr. McMullan gave his opening address thanking members for their work that made it possible for them to make a lead in the prevention of blindness. He stated that :

- The Australian Government will fund a Manila-based WHO Regional Blindness Prevention Coordinator position for at least two years.
- In line with the amendment earlier this year to the aid section of the Australian Labour Party’s National Platform, the Australian Government would enhance its advocacy efforts to gather further support and funding for blindness prevention from other governments and organisations across the globe.
- He is personally committed to placing blindness prevention and the rights of people with disabilities at the centre of Australia’s aid program.
- To ensure the continuation of funding by the Australian Government for blindness prevention efforts, it is essential that agencies demonstrate the positive impact and cost effectiveness of the current ABI programs.

Mr. McMullan also noted that while enormous progress has been made in transforming the lives of the world’s poorest people, there remains tremendous potential for placing disability at the centre of development practice and that it is very important to provide evidence of the value of this work and information about the people that are benefitting from these initiatives and programmes.

C. Garms thanked Mr. Bob McMullan for his time and enormous support to VISION 2020.
5. **Presentation on Partnership for VISION 2020** [PowerPoint]

K. Naidoo gave a presentation on partnership for VISION 2020 and that a paradigm shift is needed if the goals of VISION 2020 are to be achieved. He added that we need to shift to a broader development and anti-poverty agenda to really contextualise our work. According to him, the greatest success in this paradigm shift is in the area of trachoma. It is important that IAPB seek out partnerships because although resources may not be available at times, through partnering, more can be achieved in the prevention of blindness. K. Naidoo concluded that partnership outside of eye care with broader civil society should be considered and seen as an integral part of the strategy.


**VISION 2020 and the wider development agenda**

Group Discussions, Feedback and Plenary Discussion

P. Ackland explained that the WHO Action Plan for the prevention of avoidable blindness and visual impairment has five objectives and 53 accompanying actions. The actions are assigned amongst three key VISION 2020 stakeholders.

There are 19 proposed actions for Member States, 20 for the WHO Secretariat and 14 for International Partners.

The purpose of this session is:

- Participants will gain a greater working knowledge of the contents of the WHO Action Plan
- Attempt to prioritise the 53 actions
- Think about new partnerships for VISION 2020

Council members were divided into six groups. Groups 1 & 2 were to look at the Member State actions; Groups 3 & 4 the WHO Secretariat actions and Groups 5 & 6 the International partner actions. The groups were asked to:

- Rank the actions on the impact / ease of implementing chart
- Identify which are the top three actions that IAPB and its members need to advocate for and possibly support to achieve
- Under objective 4 of the WHO Action Plan, the International Partners (i.e. IAPB and its members) are asked to liaise with other international organisations and agencies with broader development agendas in order to identify opportunities for collaboration. The groups were asked to prioritise up to three organisations that members feel IAPB should try to liaise with and outline what they may be able to contribute towards achieving VISION 2020.

The groups reported back the outcome of their discussions and their feedback summarised in Appendix 1.

**ACTION:** P. Ackland to structure the outcome and summarise the recommendations for further consideration.

7. **AGM** [attached + PowerPoint]

The Annual General Meeting was held on Oct. 1, 2009 at 1415 hours with more than 30 members of the Council of Members present and participating. The minutes of the AGM are circulated separately.

8. **Programme Committees and Discussion Groups**

8.1 **Display of Achievements & Plans and Member Discussion with the Committee’s Representatives** [Displayed Posters, also included in PowerPoint file]

P. Ackland asked members to look at the posters listing out achievements and plans of the nine programme committees and discussion groups that were posted around the room. He also asked the representatives of the groups standing by the posters to explain further and answer questions.
8.2 Update on Programme Committees & Discussion Groups [PowerPoint]

V. Sheffield made a presentation on membership and how committee structures could work in order to maximise participation from IAPB members.

9. Break Out Session 2: Maximising the contribution of Programme Committees and Discussion Groups to VISION 2020 [PowerPoint]
Group Discussions, Feedback and Plenary Discussion

P. Ackland explained that IAPB currently has board committees, programme committees and discussion groups. After introducing the various committees and discussion groups, he raised the question of how best can the programme committees and discussion groups make a contribution towards achieving IAPB’s third strategic objective, and what does IAPB needs to do to make their work more effective. He also raised the question of whether IAPB needs a completely new approach to all these committees and groups. The advantages and disadvantages of having big versus small groups were listed out and the following questions were raised for members to discuss in their groups:

- Do we still need the distinction between programme committees and discussion groups – should we just have “focus groups” that can work in flexible ways?
- Should we have more or less programme committees and discussion groups (or focus groups)?
- Would it be better just to have one VISION 2020 programme advisory panel whose remit is to advise the Executive staff and convene expert groups to look at specific issues as and when required?

Members were asked to discuss the questions listed above in their groups and to make recommendations as to what they think is the most effective way forward.

The groups reported back the outcome of their discussions which are summarised in Appendix 2.

ACTION: P. Ackland to structure the outcome and summarise the recommendations for further consideration.

10. Regional Reports and Plans

10.1 Reports by Regional Chair on Achievements
[attached: Africa I EMR I Europe I Latin America I North America I SEA ]
[tabled + PowerPoint: Western Pacific region]

The Regional Chairs highlighted the achievements made in their regions referring the documents that were distributed prior to the meeting.

On Africa, K. Naidoo reported that there have been a wide range of activities and workshops around the Africa region and referred attendees to the regional report that was circulated with the documents. He highlighted the Human Resource Development, Infrastructure and Disease Control initiatives ongoing in various parts of Africa. A meeting with WHO AFRO has been secured to increase collaboration between IAPB and WHO. Furthermore, he stated that the report only includes information of those who responded before the deadline and if any organisations want to include details of their activity in Africa, then they need to send the information on time. No late information will be accepted.

On the Eastern Mediterranean, A. AlRajhi reported that most of their activities have been around workshops in developing capacity and generating data for planning and advocacy through conducting RAAB workshops. National and district eye care planning workshops were also held across the region. In Somalia, they managed to do the national planning workshop which has been delayed due to security issues. There was a district planning workshop in Yemen and another in Sudan will soon take place. In Palestine, after 2-1/2 years of postponement, there will be a national planning workshop soon, this has been delayed in the past due to visa and security issues. For Refractive Error services – Regional School eye health guidelines have been developed by local and international experts. The HR working group in EMR has been established and a strategic regional HR plan will be developed at a meeting in December in Cairo. In terms of the next regional meeting, the theme will be “Glaucoma treatment and control strategies in the region”. For the future regional programmes, they plan to support the training and establishment of PHACO training centres, support establishment of mid level personnel training centres and continue development and review of
VISION 2020 district plans in the region.

A. AlRajhi expressed the region’s gratitude to the government of Saudi Arabia for spearheading the advocacy activities and presenting the draft resolutions at WHO meetings over the past 4 years. It is because of these efforts that they managed to have the “PB Action Plan” approved at the last WHA meeting in May 2009.

For the, C. Garms informed that V. Klauss sent his apologies and S. Resnikoff, the Co-chair in that region will report in his place. S. Resnikoff reported that:

- He would like to express gratitude to members who have supported eye care programmes in Europe such as CBM and Lions Club and to I. Kocur because he continues to run programmes in Prague in addition to his current job.
- Major effort has to be put into changing and improving health insurance schemes to ensure that they are including eye health in their schemes. The bad news is that there was no mention of eye health or eye care in the EU Report on the main chronic diseases in Europe; and this shows that more has to be done in terms of thinking out of the box and going beyond traditional partners.
- The good news is the better relationship with Russia and a new Group C member from Russia so finally, there will be some data from that country.

For the Latin America, J. Batlle reported on the political situation while V. Lansingh reported on the VISION 2020 status in the region. Movement in VISION 2020 in Latin America was initially perceived as the “bad boys” trying to turn over the establishment, but has gained momentum and now VISION 2020 is included regularly in many health policy forums. All 19 countries in Latin America have signed the declarations, 14 of them have national plans and the leverage to implement the programmes has been substantial. The Executive Committee of PAHO recommended an avoidable blindness plan for the region and signed the regional eye care strategy in June. They expressed gratitude to ORBIS, CBM and Lions for the support given to this region. There have been success in cataract surgery, and on the average, there was a 100% increase in the rate of cataract surgeries in the last five years. Byelaws have been created for the VISION 2020 Committees and they meet once or twice every year.

For North America, K. Spahn reported that the biggest development was the launching of VISION 2020/USA on April 30th with 40 organisations as members. She noted it was the first time many of these groups had ever been in a room together. For WSD, VISION 2020/USA will host a congressional briefing in Washington DC on gender and blindness. The day before WSD, prominent members of the US Congress and the Governor of the state of Alabama will unveil a statue of Helen Keller in the Capitol Building, which will remain on permanent display in the Visitor’s Centre. (Note: this is the first time a statue of a person with a disability has been put up in the US Capitol.) President Obama is scheduled to be at the event, and opportunities will be sought to make use of this event to draw attention to prevention of blindness.

On South East Asia, C. Garms informed that R. Husain could not attend the event because of visa problems but has forwarded the report on South East Asia which was included in the Council documents.

On Western Pacific, J. Gersbeck reported that there has been great progress in establishing the global consortium, and through an innovative approach, advocacy efforts have positioned Australia at the forefront in the region and globally. She explained how the formation of the consortium had strengthened the collaboration of Australian NGOs providing benefits and opportunities and outlined some of the challenges overcome along the way. Referring to Mr. McMullan’s opening address J. Gersbeck said his offer for the Australian Government to advocate for the prevention of blindness with other governments was most welcomed. The Australian Government’s support and Mr. McMullan’s offer of assistance is very positive, however, in order to secure future funding, it is vital that outcomes are demonstrated and data gathered to build a strong evidence base and compelling case for ongoing action.

C. Garms thanked everyone who has been the driving force in what has been achieved so far in various regions.
10.2 Update on Regional Human Resource Development Committees

This was covered in the report of the Regional Chairs.

10.3 Discussion on Regional Funding Plans and Priorities for 2010

P. Ackland explained that in early 2008, the regions were asked to prepare regional business plans. The original plans of Africa, South East Asia, Europe, Latin America and South East Asia were converted into income generating plans. Four regional income generating plans for Africa, South East Asia, Europe, Latin America and South East Asia had so far been completed and the remaining regions would follow. To implement all the aspirations of the seven regional plans would require in the order of US$4.5 Million per year.

He explained that in his view, the first priority was to get WHO focal persons for the prevention of blindness and IAPB regional co-ordinators in post for all the regions. He outlined which posts were currently vacant and urged members to financially support these posts.

In response to a question about refractive error in China, N. Wang and W. He explained the situation in China and that because of VISION 2020, progress has been made in the change of attitude among Chinese Government Officials. Three areas to be considered were:

- HR: many hospitals do not have specially trained optometrists
- Networking: 86% of blindness is happening at country level population. Farmers find it difficult to pay for surgeries without the help of the Government and a national regional plan is necessary to solve this problem
- Optometry: China is only starting to have licensing programme and a regulated education system for Optometrists.

They suggested that it is best to have a separate IAPB office or region for China to focus on issues in China.

C. Garms showed his appreciation that VISION 2020 is becoming a catalyst for the Government in China to address prevention of blindness. IAPB will consider how to support this.

11. Resource Mobilisation

11.1 Eye Fund [PowerPoint]

C. Garms reported that D. Green sent his apologies and that he would be making the report on D. Green’s behalf. The Fund is anticipated to close in mid October 2009 and will be approximately $14.25M in debt financing given to eye care programs that are self financing but serving a substantial percentage of patients for free or below cost. It is one of the few examples of social investing outside of micro-finance. The Eye Fund will support three sustainable eye care programs:

- Eye Foundation Hospital (Nigeria) $7,000,000—building and equipment
- Fundacion Vision (Paraguay) $250,000—construction of a new building
- He Eye Hospital (China) $7,000,000—expand capacity and new facilities

The closing of the eye fund has been delayed due to ICEE and OEU pulling out after the funds were raised, necessitating a new financial model and approval of the investors. Present delays include lingering regulatory issues in China and documentation issues in Nigeria.

Some investors are putting into what is called “equity” or “first loss cushion” funding, where they take a very low return (1%) and also are the first to absorb any losses the fund incurs. Deutsche Bank and several foundations are playing the role of equity investors and this has reduced the risk of the fund sufficiently to bring in the other investors including the French and US government.
Senior notes (Fixed 6 month USD Libor + 100 bps)
Storebrand 2,000,000
Stiftung Fons Margarita 301,616

Subordinated notes
A note (return tbd - reference US T Bill + 150 bps)
Agency Francaise de Development 5,749,192
US Overseas Private Investment Corporation 5,749,192
B Note (2% p.a. fixed)
Bernard Newcomb Foundation 500,000
Equity (1% dividend)
Deutsche Bank Americas Foundation 1,050,000
COFRA Foundation 250,000
Janet Mackinley 200,000
Total 15,800,000

Deutsche Bank is aiming for a closing date of sometime in October 2009. The Eye Fund team are presently focusing working out solutions for regulatory issues for the China investment.

11.2 Capacity Building Grant Fund [PowerPoint]

C. Garms reported on D. Green’s behalf that the grant fund is accompanied by a $1.55 million grant fund to provide capacity-building, training, and consultation to help loan recipients and other eye care programs create and boost financial sustainability, while still remaining focused on serving the lower economic strata.

Capacity building grant fund donors:
Approximately $1.55M has been raised from the following sources-
Lavelle Fund 1st grant $250,000
Lavelle Fund 2nd grant $400,000
FMO (Dutch government bank) $700,000
Goodman Family Foundation $200,000
Total $1,550,000

It was originally designed that the grant fund would launch when the eye fund closed. Due to delays in the closing of the eye fund, the call for proposals for the grant fund has also been delayed. This request will go out at the beginning of October, and hopefully dispersing of funds will take place by January 2010.

11.3 Optometry Giving Sight [PowerPoint]

C. Miller introduced Optometry Giving Sight and gave an update on how it works, areas where funds are allocated to, highlights and campaigns in 2009, breakdown of donor income since its inception, financial goals including the actual and forecast figures, projected outcomes from 2007 to 2009, key projects and proposed how OGS and IAPB can work together through continued assistance and support and mutual promotion of partnership.

11.4 Standard Chartered “Seeing is Believing” [PowerPoint]

J. Conlon gave an update on the Seeing is Believing Programme and reassured members that despite the current financial crisis, the programme will still continue. She shared the commitment of Standard Chartered Bank in these projects and hope that the Phase 4 will raise $10 Million which will be matched by the bank. She reiterated the commitment of the bank not only financially but also to ensure transparency and the commitment of their staff to VISION 2020.

She added that they are working with the International Business Leadership Forum (iblf) on a model practice which will be made available hopefully by the end of the year to demonstrate benefits of working within eye care that could be useful for the Council and interested parties.

12. New Website

A. Smith presented on what the new website will look like to give the council an idea of the final design. This is work in progress and the new website will go live before the end of the year. Members raised concerns about how the intended data that underpins the map will be kept up to date.
P. Ackland confirmed that some of the information will come from the data that I. Kocur had collected for the WHO monitoring committee and that key contacts would be identified in each country with responsibility for updating the information.

It was suggested that areas covered by members can be updated and included in the website.

13. **New Logo and Corporate Image** [PowerPoint]

P. Ackland introduced the new IAPB logo and a “lockup” logo design that links IAPB and VISION 2020. A. Smith confirmed that the new logos will be available for use by members in due course, once the style guide is available.

14. **Future Events and Meetings**

14.1 **Ten Year Anniversary** [PowerPoint]

P. Ackland presented on the proposal for a major event to mark the half way stage of VISION 2020 which looks at achievements so far and the challenges for the next decade. He informed the Council that the event is currently set for 18th March 2010 in Geneva. However this may change depending on the availability of keynote speakers, sponsorship packages, etc. He will confirm as soon as possible the dates. Some members recommended that because of the time pressure, it would be better to postpone the event and to combine it with the World Sight Day in October.

Although members prefer to attend national events in their own country for the World Sight Day, it was felt that in this case, it will be advantageous to combine the anniversary event with the World Sight Day instead of having two events within a relatively short period of time.

**ACTION:** P. Ackland to follow up.

14.2 **World Sight Day**


14.3 **World Ophthalmology Congress (WOC) 2010** [PowerPoint]

B. Spivey presented on the WOC 2010 in Berlin. The WOC 2010 will be held from June 5 to 9, 2010 in Berlin, Germany.

C. Garms reported that B. Spivey had suggested a VISION 2020 video be included in the opening ceremony which would be an excellent opportunity to reach out to the ophthalmologists and other participants attending the event. B. Spivey would be willing to develop together with H. Taylor and S. Resnikoff the storyboard and IAPB members who have their own PR and media department could be approached to provide technical and financial support for the production of this video. The video can be made available to IAPB members.

I. Kocur suggested to include a statement from the Director General or a senior representative of WHO to support the VISION 2020 and the partnership in the video.

14.4 **Next Council of Members Meeting**

C. Garms announced that the next Council Meeting will be held together with the VISION 2020 Anniversary event in Geneva and that members will be advised of the date once it is confirmed.

15. **Any Other Business**

B. Holden invited everyone to attend the Refractive Error Programme Committee Meeting in the afternoon from 14:30 at the Rialto 2 & 3, InterContinental Hotel.

Jerry Vincent reported about the development of guidance and standards for appropriate eye care in disasters and humanitarian emergencies and urged any agency that has staff with direct experience dealing with humanitarian emergencies or natural disasters to contact him at the International Rescue Committee (IRC) at Jerry.Vincent@theIRC.org to help in reviewing drafts of these guidelines.
as they are developed. [PowerPoint]

K. Naidoo announced that the 2nd World Congress on Refractive Error will be held in Durban from Sept 20 to 22, 2010 and will include a session on Development and Poverty as well as specific sessions on Refractive Error issues. High Profile development figures will be invited.

P. Hoare presented a proposed software solution for converting the VISION 2020 Standard List into an on-line catalogue – linked with the VISION 2020 website. [PowerPoint]

I. Kocur thanked VISION 2020 Australia and shared his recent experience with China Disabled People’s Performing Art Troupe in China which might be approached to seek their support to the VISION 2020 Global Initiative agenda.

C. Garms on behalf of IAPB members, showed his appreciation to the VISION 2020 Australia team particularly Jennifer Gersbeck and Matthew Fagan as well as H. Taylor by presenting gifts for making all the arrangements in order to make the IAPB meeting as smooth as possible.

There being no other business, the Council of Members meeting adjourned at 1300, Melbourne Time.
Present at the IAPB Council of Members Meeting

on October 1-2, 2009, at InterContinental Hotel, Melbourne

Officers
1. Mr. Christian G. Garms, IAPB President and Chairman of the Board
2. Prof. Hugh R. Taylor, IAPB Vice President
3. Mr. Adrian Poffley, IAPB Treasurer

Special Guests
1. The Hon Bob McMullan, Parliamentary Secretary for International Development Assistance, Australia
2. Ms. Joy Murphy, Senior Elder of the Wurundjeri People

Members
1. Dr. Abdulaziz AlRajhi, IMPACT-EMR and EMR-IAPB
2. Prof. Frank A. Billson, Foresight Australian Overseas Aid / Prevention of Blindness Ltd. & Save Sight Institute
3. Dr. Robert Chappell, World Council of Optometry (WCO)
4. Ms. Joanna Conlon, Standard Chartered Bank (Seeing is Believing)
5. Mr. Brian Doolan, The Fred Hollows Foundation
7. Dr. Clare Gilbert, International Centre for Eye Health / London School Hygiene & Tropical Medicine
8. Mr. Robert L. Guest, The Royal Australian and New Zealand College of Ophthalmologists
9. Dr. Danny Haddad, International Trachoma Initiative (ITI)
10. Dr. Caroline Harper, Sightsavers International (SSI)
11. Prof. Dr. Wei He, He Eye Hospital
12. Mr. Job Heintz, Himalayan Cataract Project / Tilganga Eye Centre
14. Mr. Arnt Holte, World Blind Union (WBU)
15. Prof. Jill Keeffe, Centre for Eye Research Australia
16. A/Prof. Richard Le Mesurier, IAPB Regional Chair for Western Pacific
17. Ms. Janet Leasher, UNESCO
18. Dr. Prakash Mirchandani, Tulsi Chanrai Foundation
19. Dr. Paul Mitchell, Association for Research in Vision & Ophthalmology (ARVO)
20. Prof. Kvin Naidoo, International Centre for Eyecare (ICEE) and IAPB Regional Chair for Africa
21. Dr. G. Chandra Sekhar, L.V. Prasad Eye Institute (LVPEI)
23. Ms. Kathy Spahn, Helen Keller International (HKI)
25. Ms. Maureen Tam, Hong Kong Society for the Blind (HKSB)
26. Mr. Mohan Jacob Thazhathu, ORBIS International
27. Mr. Johannes Trimmel, Light for the World
28. Dr. Jerry Vincent, International Rescue Committee (IRC)
29. Dr. Ningli Wang, Beijing TongRen Hospital (Beijing TongRen Eye Centre)

Observers
1. Mr. Phillip Albano, Lions Clubs International Foundation (LCIF)
2. Dr. Juan Battle, Comite Nacional Para La Prevencion De La Ceguera
3. Dr. Garry Brian, The Fred Hollows Foundation (NZ)
4. Ms. Rashin Choudhry, The Fred Hollows Foundation
5. Ms. Reshma Dabideen, International Centre for Eyecare Education
6. Ms. Maryanne Diamond, World Blind Union (WBU)
7. Dr. Iain Dunlop, Royal Australian and New Zealand College of Ophthalmologists, The
8. Mr. Matthew Fagan, VISION 2020 Australia
10. A/Prof. Dr. Prut Hanutsaha, Maharat Nakhon Ratchasima Regional Hospital (MNNRH)
11. Mr. Ross Hardy, The Fred Hollows Foundation
12. Ms. Heidi Haug, World Blind Union (WBU)
13. Mr. Philip Hoare, Sightsavers International
14. Ms. Gabi Hollows, The Fred Hollows Foundation
15. Dr. Ailian Hu, Beijing TongRen Hospital (Beijing TongRen Eye Centre)
16. Mr. John Jeffries, CBM Australia
17. Dr. Ivo Kocur, World Health Organization
18. Mr. Nick Kourgialis, Helen Keller International (HKI)
19. Ms. Stephanie Lehoczky, The Fred Hollows Foundation
20. Ms. Caroline Llewellyn, International Centre for Eyecare (ICEE)
21. Ms. Ingrid Mason, CBM
22. Mr. Clive Miller, Optometry Giving Sight
23. Mr. Jim O’Sullivan, Operation Eyesight Universal (OEU)
24. Ms. Kristen Pratt, AusAID
25. Dr. Mansur Rabiu, EMR
26. Dr. Serge Resnikoff, Laboratoires Théa
27. Ms. Virginia Sarah, The Fred Hollows Foundation
28. Mr. Bill Shields, International Eye Foundation (IEF)
29. Dr. Pawasoot Supasai, Maharat Nakhon Ratchasima Regional Hospital (MNNRH)
30. Dr. Geoffrey C. Tabin, Himalayan Cataract Project / Tilganga Eye Centre
31. Ms. Kirsty Ward, The Fred Hollows Foundation
32. Ms. Pamela Williams-Jones, The Fred Hollows Foundation (NZ)
33. Ms. Sarah Wilson, The Fred Hollows Foundation
34. Mrs. Payorn Yuvanichananont, Maharat Nakhon Ratchasima Regional Hospital (MNNRH)

Apologies
1. HRH Prince Abdulaziz Ahmad Abdulaziz Al Saud, IAPB Regional Chair for Eastern Mediterranean
   (Proxy: Dr. Abdulaziz AlRajhi)
2. Dr. Maria Leonor Beleza, Champalimaud Foundation
3. Mr. Mohammed Tawfik Bellow, Ebsar Foundation
4. Mr. Mike Brace, Vision 2020 UK
5. Mr. Al Brandel, Lions Clubs International Foundation (LCIF)
6. Dr. Natalie Briggs / Mr. Jeremy Jaile, Vision Aid Overseas (Proxy: Chairman)
7. Dr. Giuseppe Castronovo, Agenzia Internazionale per la Prevenzione della Cecità-Sezione Italiana
8. Mr. Moloy Chakravorty, Mission for Vision (MFV) (Proxy: Dr. Prakash Mirchandani)
9. Mrs. Grace Chan, Asian Foundation for the Prevention of Blindness (AFPB)
10. Dr. Suresh R. Chandra, Combat Blindness Foundation (CBF)
11. Ms. Agnes Chung, World Eye Organisation
12. Dr. Paul Courtright, Kilimanjaro Centre for Community Ophthalmology (Proxy: Ms. Kathy Spahn)
14. Dr. Anne Kopp, Fundacion Vision and IAPB Regional Chair for Latin America
15. Ms. Patricia Ferguson, Operation Eyesight Universal (OEU) and IAPB Regional Chair for North America (Proxy: Mr. Christian Garms)
16. Prof. Allen Foster, CBM (Proxy: Mr. John Jeffries)
17. Mr. Ted Francavilla, The Lighthouse International
18. Dr. Suzanne Gilbert, Seva Foundation (Proxy: Ms. Victoria Sheffield)
19. Dr. Ilene K. Gipson, Women’s Eye Health Task Force (WEHTF)
21. Mr. Simon Hampel, Right to Sight
22. Dr. John Hardman, The Carter Centre
23. Dr. Adekunle Olubola Hassan, Eye Foundation Hospital & Lambo Eye Institute
24. Mr. David Herman, AMD Alliance International
25. Dr. Wladimir Hogenhuis, Merck & Co. Inc.
26. Mr. Ton Ten Hove, Dark and Light Blind Care
27. Prof. Rabiu Husain, IAPB Regional Chair for South East Asia
28. Mr. Terje B. Iversen, Norwegian Association of the Blind and Partially Sighted (NABP)
29. Dr. Michael Kaschke, Carl Zeiss AG (Proxy: Mr. Christian Garms)
30. Dr. Josef Kasper, Swiss Red Cross (Schweizerisches Rotes Kreuz)
31. Dr. May Khadem, Health for Humanity
32. Prof. Muhammad Daud Khan, Pakistan Institute of Community Ophthalmology (PICO)
33. Prof. Dr. Volker Klauss, IAPB Regional Chair for Europe (Proxy: Mr. Christian Garms)
34. Mr. Ja-Kyoung Koo, Vision Care Service
35. Dr. Klaus Kraemer, Sight and Life (DSM Nutritional Products Ltd)
36. Ms. Faye Kragt, Christian Eye Ministry International Aid
37. Ms. Penny Lyons, Seva Canada Society
38. Prof. KPS Malik, All India Ophthalmological Society (AIOS)
40. Dr. Marilyn Miller, The Bernadotte Foundation for Children's Eyecare Inc. (Proxy: Ms. Kathy Spahn)
41. Dr. P. Namperumalsamy, Aravind Eye Hospital & Postgraduate Institute of Ophthalmology
   (Proxy: Chairman)
42. Dr. Francisco Belisario Navarro, Instituto Popular Para Los Ojos
43. Dr. André-Dominique Negrel, Organisation pour la Prevention de la Cecite (OPC)
   (Proxy: Dr. Serge Resnikoff)
44. Dr. David Parke, American Academy of Ophthalmology (AAO)
45. Prof. Louis Pizzarello, Edward S Harkness Eye Institute
46. Dr. Harry Quigley, Dana Center for Preventive Ophthalmology (Proxy: Chairman)
47. Mr. Patrick Quinn, Fighting Blindness
48. Dr. Mohammed Babar Qureshi, Comprehensive Health and Education Forum (CHEF) International
49. Mr. Rafael Ribo, Eyes of the World Foundation (Fundacio Ulls del Mon)
50. Dr. Kyung Hwan Shin, Korean Foundation for the Prevention of Blindness (KFPB)
51. Mr. Stephen Silverton, British Council for Prevention of Blindness (BCPB)
52. Mr. Jeff Todd, Prevent Blindness America (Proxy: Chairman)
53. Dr. Ahmed Trabelsi, Nadi Al Bassar
54. Dr. Anusak Tungpibul, Maharat Nakhon Ratchasima Regional Hospital (Proxy: Dr. Prut Hanutsaha)
55. Dr. Eric J. Van Agtmaal, Asian Eye Care
56. Ms. Carmel Williams, The Fred Hollows Foundation (NZ) (Proxy: Dr. Garry Brian)
57. Mr. Steve Winyard, Royal National Institute for Blind (RNIB)
58. Prof. Khalid Zaghloul, Ainy Organisation

**IAPB Office**
1. Mr. Peter Ackland, IAPB CEO
2. Mr. Tim Morris, IAPB CFO
3. Mr. Tejpal Balantrapu, IAPB Communications Coordinator
4. Ms. Sally Crook, Standard Chartered “Seeing Is Believing” Programme Manager
5. Dr. Van Lansingh, IAPB Regional Coordinator
6. Ms. Abi Smith, IAPB Communications Manager
7. Ms. Evelyn Uy, IAPB Corporate Affairs & Administration Manager
October 1-2, 2009
IAPB Council of Members Meeting
InterContinental Hotel, Melbourne

AGENDA

Date / Time  Topic  By

OCTOBER 1, 2009 [THURSDAY]

0900 – 0950  1. Welcome  C. Garms

1.1 Traditional Welcome lead by Joy Murphy (Senior Elder of the Wurundjeri People)
1.2 Opening Address by The Hon Bob McMullan MP, Parliamentary Secretary for International Development Assistance
1.3 Adoption of the Agenda [attached]
1.4 Minutes of the Last Meeting [attached]

0950 – 1020  2. IAPB Update  C. Garms, P. Ackland

2.1 Report from the Chairman
2.2 Report from the CEO

1020 – 1030  3. IAPB Strategic Plan [attached*]  P. Ackland

1030 – 1100  4. Update from WHO  I. Kocur

4.1 Update on Collaboration with WHO
4.2 Update on the Action Plan for the Prevention of Avoidable Blindness and Visual Impairment

1100 – 1130  BREAK

1130 – 1140  5. Presentation on Partnership for VISION 2020  K. Naidoo


1245 – 1415  BREAK

OCTOBER 1, 2009 [THURSDAY]

1415 – 1445  7. AGM [attached: Minutes | Resolution]  C. Garms

7.1 Annual Accounts of the Charity and Audit Report [attached]
7.2 Appointment of Auditor for 2009
7.3 Directors / Trustees
7.4 Any Other Business

1445 – 1545  8. Programme Committees and Discussion Groups  P. Ackland

8.1 Display of Achievements & Plans and Member Discussion with the Committee’s Representatives
8.2 Update on Programme Committees & Discussion Groups

1545 – 1615  BREAK

1615 – 1745  9. Break Out Session 2: Maximising the contribution of Programme Committees and Discussion Groups to VISION 2020  P. Ackland

10. Regional Reports and Plans  Reg. Chairs

10.1 Reports by Regional Chair on Achievements [attached: Africa | EMR | Europe | Latin America | North America | SEA | Western Pacific*]

10.2 Update on Regional Human Resource Development Committees  Reg. Chairs & P. Ackland

10.3 Discussion on Regional Funding Plans and Priorities for 2010 [attached: Africa | Europe | Latin America | South East Asia ]  Reg. Chairs & P. Ackland


11.1 Eye Fund
11.2 Capacity Building Grant Fund
11.3 Optometry Giving Sight
11.4 Standard Chartered “Seeing is Believing”

1145 – 1200  12. New Website  P. Ackland & A. Smith

1200 – 1215  13. New Logo and Corporate Image  P. Ackland & A. Smith

1215 – 1245  14. Future Events and Meetings  P. Ackland, A. Smith, B. Spivey, C. Garms

14.1 Ten Year Anniversary
14.2 World Sight Day
14.3 WOC 2010
14.4 Next Council of Members Meeting

1245 – 1300  15. Any Other Business  C. Garms

[attached: IRC Guidance in Emergencies & Disasters*]

* Tabled at the meeting
APPENDIX I

Results from the Group Exercise to prioritise the activities laid out in the WHO Action Plan for the Prevention of avoidable blindness and visual impairment.

The Action Plan has 5 objectives and 53 activities. The activities are assigned to member states (19 proposed activities); the WHO secretariat (20 activities) and International partners (14 proposed activities).

Council members were divided into 6 groups – Groups 1&2 looked at the member state activities; Groups 3&4 looked at the WHO secretariat activities and Groups 5&6 worked on the International Partners activities.

Each group examined the activities and assigned them a position on an “impact versus difficulty” chart. Having done this each group selected the three activities which they would identify as the priorities to work on.

Subsequently each group was asked to identify three organisations from outside our normal “eye health world” that they believe VISION 2020 needs to engage more closely with.

**MEMBER STATES – priority activities (Groups 1&2)**

Both groups identified action 55:

55. Review existing policies addressing visual health, identify the gaps and develop new policies in favour of a comprehensive eye care system.

The other activities prioritised by the two groups were:

91. Provide regular reports using the WHO standardized reporting system on progress made in implementing national blindness-prevention strategies and plans.

41. Establish and support national coordinating mechanisms, such as national coordinators posts for eye health and prevention of blindness at health ministries and other key institutions as appropriate.

42. Consider budgetary appropriations for eye health and prevention of blindness.

43. Promote and integrate eye health at all levels of health-care delivery.

**WHO SECRETARIAT – priority activities (Groups 3&4)**

Both groups identified actions 60 and 94:

60. Facilitate establishment and activities of eye health and national blindness prevention committees, advise Member States on their composition, role and function and provide direct technical support for developing implementing and evaluating national plans.

94. Document, from countries with successful blindness prevention programmes, good practices and blindness prevention systems or models that could be modified or applied in other countries pursuant to resolution WHA 56.26.

The other activities prioritised by the two groups were:

46. Conduct political analyses to determine the best way of securing support of high level decision makers and their commitment to promoting eye health, and explore the potential impact and ways of integrating blindness prevention in socio-economic policies and programmes.

64. Strengthen the capacity of regional and country offices to provide technical support for eye health / prevention of blindness.
INTERNATIONAL PARTNERS – priority actions (Groups 5&6)

Both groups identified action 50:

50. Support WHO in involving all stakeholders in advocacy in order to raise awareness of the magnitude of blindness and visual impairment, the availability of cost-effective interventions and international experience in applying them.

The other activities prioritised by the two groups were:

85. Collaborate closely with and provide support to Member States and the Secretariat in implementing the various components of this plan.

86. Liaise with other international organizations and agencies with broader development agendas in order to identify opportunities for collaboration.

87. Continue to support the existing partnerships for onchocerciasis and trachoma control until these diseases are eliminated as public health problems.

88. Collaborate with WHO in establishing a network for review of regional and global monitoring and evaluation of progress in the prevention of blindness and visual impairment.

Partnering with organisations outside of the “normal eye health world”

There was considerable agreement across the six groups on this and the results may be summarised as:

- Other UN agencies (in addition to WHO) including UNDP; UNESCO; UNICEF
- International development agencies including World Vision, Oxfam etc.
- Carter Centre; Clinton Global Initiative; Millennium Promise
- Umbrella bodies for NGOs including BOND, Interaction, ACFID
- Environmental agencies
- Government development agencies including USAID, DFID, EU etc.
- World Bank, Regional Development Banks
- Foundations including Hilton, Gates, Ford.
APPENDIX 2

Results from the Group Exercise to look at the way forward with IAPB programme committees and discussion groups.

IAPB has six programme committees and four discussion groups. Potentially these can make an enormous contribution towards IAPB’s 3rd strategic objective of “Creating and disseminating knowledge about VISION 2020”

Council members first looked at the achievements and future work priorities of these groups through a poster display. After a presentation that looked at the pros and cons of the current arrangements the Council members were divided into six groups and asked to make recommendations as to the best way forward. Groups were invited to think as if there was a completely “blank page” and that we could completely restructure current arrangements if necessary.

**Group 1**
Suggested that:
1) IAPB should have:
   - Policy groups – made up of committed members who provide technical input, advice and input at a strategic level.
   - Member fora – exchange information and ideas on topical issues and areas that are of considerable importance to the wider membership – e.g. world sight day themes. Would need to be facilitated as a network.
2) The chairs of the policy group and representatives from the membership fora came together as a “Chair’s committee” that would feed into IAPB policy needs.
3) The group felt that there was no need for two meetings a year.

**Group 2**
Suggested that:
1) The Council of members meeting should focus around themes and seminars with a view to information sharing and professional development.
2) There should be formal governance committees
3) Task orientated programme groups should be established e.g. for research, m&e.
4) An advocacy group should be created – reflects the value of global organisation

**Group 3**
Suggested that:
1) There should be two standing committees:
   - Membership committee – outreach for new members; annual survey; member contract and code of conduct.
   - Advocacy – possible sub-committee for world sight day.
2) They also felt that the CEO should convene ad hoc task groups as required that end once the task is completed – unless there was an enduring task connected to the strategic plan.
3) The group also recommended that there be no other global committees, but that collaboration at the regional level was important.

**Group 4**
Suggested that:
1) Tasks should be identified based upon the new strategic plan by the CEO and Board. A core work group and timeframe should be defined and then the group produces its own Terms of Reference.
2) Need to improve communication using the website, to members; committee chairs and regional chairs with feedback to Council and Executive.
3) Cross cutting themes such as gender, sustainability should be included in terms of reference.

**Group 5**
Suggested that:
1) There should be a clear orientation process for new members and new representatives.
2) Committees should have a core membership but with open attendance.
3) Committees should be built around IAPB strategic objectives.
Group 6

1) Felt that the outputs of the programme committees to date were not well known (with the exception of the standard list and LV training) and suggested that:
2) There is a place for adequately resourced expert panels focussing upon different areas and discussion groups.
3) Areas of work should be identified by IAPB members and IAPB.
4) Need for better dissemination of work group outputs.
5) Outputs need to be used by those implementing programmes – e.g. workshops at regional/sub-regional level with support groups.