

# EYE CONTACT SEVA CANADA NEWSLETTER

SPRING 2014



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# SO GIRLS CAN SEE

Half of the world's population is made up of women and girls. Women and girls don't go blind more often than men and boys. Yet, two thirds of the world's blind are female.

Why? Because women and girls are far less likely than men and boys to receive eye care services due to social, cultural and economic factors.

Seva Canada has taken a leadership role in a global initiative to reduce the inequity. The first step was to prove that the inequity exists and holds true for both industrialized and developing nations and across all types of preventable and treatable eye conditions.

The second step was to identify barriers women and girls face in accessing care and develop strategies to overcome those barriers. Simple strategies are often the most effective: provide counseling to the families, offer free transportation and bring eye care to people's doorsteps with community ophthalmology programs.

Sharing our findings and strategies with the global eye care community was the third step. We are happy to report that more and more organizations and eye care programs are implementing strategies to reach women and girls.

Does Seva favour the treatment of women and girls over the treatment of men and boys? Absolutely not. By implementing these strategies we have doubled the overall utilization of eye care services by both sexes and now a much greater proportion of those treated are women and girls.



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# TEACHING IN TIBET

### by Dr. Marty Spencer

Last summer I flew to Tibet at the request of Kunga Tashi, the director of Seva Tibet's sight program. Kunga is one of Seva's gems, a magician who is largely responsible for the success of the program, and for Seva being responsible for 90% of the sightrestoring cataract surgery carried out in rural Tibet.

This would be my fourth Seva trip to Tibet to perform and teach cataract surgery. I had every expectation of success, as Kunga has an uncanny ability to determine where training is needed and to identify eye surgeons who are capable and eager to learn.

I was met at the Lhasa airport by Tashi Dargye, another Seva employee with whom I'd worked previously. Tashi acts as interpreter, accountant, procurer of supplies, negotiator and all round fixit man. We drove straight to Tzetang, a city of 52,000 people, a half day's journey south east of Lhasa.

At the Chinese-built hospital I met the staff I was to work with. Dr. Songyee is a 40ish Tibetan ophthalmologist who was already doing cataract surgery, but only 5 surgeries a week and using

an old technique. Dr. Losang, a young (and, I discovered later, pregnant) ophthalmologist was very eager to learn, but had never done

any cataract surgery.

We started surgery immediately, and I was pleasantly surprised to find Dr. Songyee had more skills than I'd expected. He had learned from two

other surgeons in the past two years, both of whom I had trained on previous trips. We did only 6 surgeries on that first day, enough for me to give him some more technical tips and to show

how he could use fewer instruments. which helps to keep down the cost of surgery while maintaining the high quality that brings other patients by word of mouth.

The next day the eye camp began in earnest, and over the next 4 days we operated on over 140 patients. We worked at adjacent operating tables so he could ask for advice when he ran into difficulties. At the end of each day I worked with Dr. Losang, using pig's eyes

from a local butcher to teach her surgical technique. By the end of the camp she was ready to begin operating under supervision.

While I never tire of seeing the look of wonder on the faces of patients having their patches removed after surgery, I find an even deeper sense of satisfaction in

seeing the improvement in the skills and confidence of the colleagues I teach, and knowing they will be restoring sight to countless people long after I return home.



DR. MARTY SPENCER TRAINING SURGEONS

### A YOUNG MOTHER'S SIGHT IS RESTORED

### By Dolma Chugi, Seva Tibet

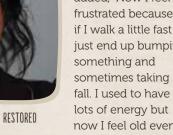
I found Ngawang Dekyi in a big crowd

right outside of the operating room. She was quietly waiting in the line and was one of the youngest patients for the day. She is 28-years old, is happily married and has two lovely kids. She became blind in her left eye two years ago. Her husband and older

daughter accompanied her to the camp and they were hoping that her eyesight could be restored. Her husband opened the conversation with me by saying "My

wife used to be so capable of herding the yaks and doing chores at home, and

> she would always work all day and would just hate to sit around." Ngawang added, "Now I feel frustrated because if I walk a little fast I just end up bumping something and sometimes taking a fall. I used to have lots of energy but now I feel old even



though I am only 28."

On the second day after the surgery, I found Ngawang again in the crowd but this time Ngawang no longer had

a cataract in her left eye - but she had a big smile on her face. Ngawang grabbed my arm and pulled me closer to her and said "Look, the white thing is gone, and I am seeing well with my left eye." I congratulated her. It was obvious that her young spirit was back and her energy to run the household had returned.

Ngawang could now provide better care to her two children, contribute more to her household and return to herding yaks. Her blindness caused her to worry about her children and prevented her from being an active young woman. Now, she can lead a fuller life and provide a brighter future for her children: the things that she longed for before.



# TURNING TRAGEDY INTO COMPASSION — THE SPECTACLE GALA

On October 31, 2013, Lesley Kim was walking through Gastown enjoying the Halloween festivities when a stranger lit off a bottle rocket which landed in her left eye and exploded. In a split second Lesley had lost her eye.

While healing both physically and emotionally from this tragedy, Lesley was overcome by the outpouring of love and support which inspired her to

think beyond her own misfortune and recognize how blessed we are as Canadians to have privileged access to universal medical care. Humbled, touched and inspired by the response from family, friends and strangers across the

**LESLEY KIM** 

globe, she felt compelled to connect with others in the same compassionate way; this led her to Seva Canada. "When I read it only costs fifty dollars to restore someone's sight, it was a no-brainer for me," Kim said. "In these countries, having the ability to see means having a life, means being able to go to work and go to school; it means being able to contribute to their families."

Lesley resolved to act. To help those who couldn't see in the developing world and fundraise for Seva Canada.

Lesley and the Kim Family Foundation created and hosted, "Spectacle," a gala fundraiser at the Vancouver Club on January 31, 2014 to raise money for Seva Canada's eye care programs.

The sold-out gala epitomized Lesley Kim herself

amazing, inspiring, fun, genuine
 and beautiful. It included a delicious

dinner, a silent auction, entertainment and speeches. Lesley used humour and humility to thank those who have supported her throughout her ordeal, to talk about her decision to help others see through Seva Canada and to explain how she came to forgive the stranger responsible for her lost eye. "Making his life miserable and proceeding through the court process was, number one: not bringing my eye back, and number two: not going to make me feel like a decent and proud human," Kim said. "That forgiveness was my first step to healing."

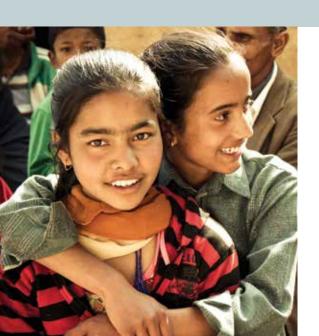
Seva Canada's executive director Penny Lyons and Seva supporters Peter and Claire Mortifee also spoke about Seva's



LESLEY KIM (2<sup>ND</sup> FROM LEFT) & HER FAMILY

work and shared some stories of the people who have been given the power of sight thanks to donors like Lesley Kim and her family.

Thank you Lesley for inspiring us all by your ability to turn a personal tragic life-changing event into an impetus to help those less fortunate see again. You embody the true meaning of Seva – selfless service.



## A GIFT IN YOUR WILL CHANGES LIVES

After providing for your loved ones, your Will is the ultimate opportunity to make a positive, lasting impact in the world.

A gift in your Will to Seva Canada Society will change the lives of people who suffer from blindness in the most remote corners of the globe.

Your legacy is their vision.

For more information about how to remember Seva Canada Society in your Will, call **1-877-460-6622** or email **fundraising@seva.ca** 

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### WOMEN HELPING WOMEN

Seva, with the help of our donors, has reduced, and in some areas, eliminated gender inequity in eye care primarily through active engagement with local women, women's groups and networks. This women helping women approach is efficient, sustainable, and remarkably effective.

### Female Community Health Volunteers in Nepal

In Nepal for example, the Seva sponsored eye care programs in the Lumbini Zone and Chitwan Districts, have achieved gender equity in eye care services in large part due to the community-based work of Female Community Health Volunteers (FCHV). FCHV are local leaders trained to detect eye conditions in their villages and to assist people, particularly

women, to utilize available eye care services. This program has also increased the number of men and boys coming in for eye care.

Seva Nepal is now serving an equal number of blind women and men. In contrast, throughout the remainder of Nepal, blindness among women remains significantly greater than men. To rectify this problem Seva helped to establish a National Gender and Blindness Program which gathers, analyzes, and promotes the effective community based strategies developed by Seva Nepal.

### Microfinance and Blindness; Kilimanjaro Centre for Community Ophthalmology (KCCO)

A second example of a Seva-supported strategy to eliminate gender inequity in eye care is a community program involving women's microfinance groups in the Mara District in north-western Tanzania. The program doubled the utilization of eye care services, with women making up two-thirds of the people receiving care.

Microfinance programs have particular strengths as vehicles to empower

women to seek better health care: they provide women with additional income, higher status within their villages, and communities of like-minded, similarly driven women.

Seva is supporting an expansion of KCCO's 'microfinance' program to reach women in trachoma endemic areas, the most impoverished and isolated communities in Tanzania (Maasai ethnic group). Trachoma is a recurrent eye infection, found primarily among women and children, caused by flies, poor water supply and inadequate sanitation. It leads to scarring and blindness in adults. Local women involved in microfinance groups have been educated to identify, refer and encourage people to go for corrective surgery.



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## CELEBRATING THE ACCOMPLISHMENTS OF 2012/2013

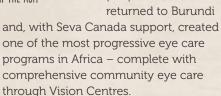
Thank you to all who attended Seva Canada's Annual General Meeting on November 22nd at VanDusen

Botanical Gardens! We were thrilled to see so many Seva Canada donors out that night.

The evening was filled with informative presentations and inspiring talks. Norm Gardina from

Morrow & Co presented his usual enthusiastic review of Seva Canada's financial statements. Following Norm, we were truly thrilled to have our program director from Burundi, Dr. Levi Kandeke tell us about himself and his eye care work in Burundi. You may be familiar with Levi as he was on the cover of our Spring 2013 newsletter. Levi talked about how he came to be the first ophthalmologist in Burundi capable of performing sight-restoring

> surgeries for his own people. He studied in Switzerland and was practicing in Paris when his mother "convinced" him that the people of Burundi needed him more than the people of Paris. Levi



We elected Seva Canada's board. and welcomed new members Sheila Moynihan and Dr. Paul Courtright. We gave many, many thanks to our retiring

board members for their wonderful work and dedication to Seva Canada: Dr. Ken Bassett, Dr. Karen Moosbrugger, Abdul Pirbhai, and Tom Voss.

The evening ended with a fantastic performance by blind musician Lazare Hounnake and his band. Lazare is also a server at Dark Table restaurant which gives diners a chance to experience what it would be like to be blind for an evening. When we held our World Sight Day event at Dark Table in November, we heard Lazare speak about his experience as a blind child in Africa. Their performance ended the night on a high note.

A very special thank you to the wonderful volunteers who donated their time to make our 2012/2013 AGM a success: JoAn, Barbara, Kyle, Dawn, Steve, and Aaron. We look forward to seeing our donors throughout the year and at next year's AGM!



DR. LEVI KANDEKE SPEAKING AT THE AGM

# AN INTERVIEW WITH FORTUNATE SHIJA, MICROFINANCE AND EYE CARE COORDINATOR WITH THE KILIMANJARO CENTRE FOR COMMUNITY OPHTHALMOLOGY

### Q. Tell us about yourself.

Fortunate: My name is Fortunate Shija. I grew up in a small town called Same in Kilimanjaro region, northeastern part of Tanzania. I don't have a family yet and I am not married. In my free time I play basketball.

### Q. Did you go to school and for what?

**Fortunate:** In 2005 I joined Sokoine University for a Bachelor of Science degree in Biotechnology and Laboratory Sciences and graduated in August 2008. In 2011, I joined Sokoine University for a Master's of Science degree in Public Health and Food Safety.

### Q. Tell us about your work experience.

Fortunate: After high school I was a teacher at the Kilomeni Secondary school for one year. In 2008 I started at KCCO as the temporary Childhood Blindness and Low Vision Coordinator. In 2011 I decided to further my studies. I re-joined KCCO in 2013 as a Microfinance and Eye Care Coordinator, the position I currently hold.

### Q. What is your role with KCCO?

Fortunate: I identify potential microfinance groups to work with in areas where there are outreach programs supported by KCCO. I design proposals; I start and/or initiate new microfinance and eye care programs in different areas where KCCO is working and publish our findings.

Q. Can you give us a brief overview of the different microfinance programs including the Maasai program?

#### Fortunate:

#### MICROFINANCE AND HEALTH

Microfinance institutions (MFIs) emerged as an important strategy to alleviate poverty, mostly in developing countries. Microfinance focuses on providing poor people with access to credit, so they can engage in income generating activities. Many MFIs target women as potential clients and positive impacts such as women empowerment have been documented.

#### MICROFINANCE AND EYE CARE

Fewer women than men present for treatment of eye disease in developing countries. One among many other reasons that contribute to decreased service utilization by women is limited decision making capacity within

their household. Several studies have determined that women with some education and financial resources of their own are more likely to seek eye care services and bring other women to get the services. Microfinance and eye care programs in KCCO started with the goal of working with women in existing microfinance

groups and training them to identify and refer people (especially women) to eye camps in their areas.

### MICROFINANCE AND EYE CARE IN MAASAI COMMUNITY

The groups are involved in activities like maize and bean farming, chicken farming, jewelry-making and small businesses. They sell their crops, chickens, eggs and milk-products on market days (twice a month). The groups meet once a week and contribute about \$1 – 2 into their savings box. Members are allowed to borrow money and return it with interest. Most of the women cannot

read or write, and most speak neither English nor Swahili.

Ngorongoro district is a trachoma endemic area of Tanzania. KCCO, through its trachoma supported programs, enables patients to get trichiasis surgery. Through the MF groups in the area, more than 300 patients (over 70% women) were referred to the eye camps. A very encouraging thing about these Maasai groups is that the women are very enthusiastic and eager to work and they are ready whenever needed.



FORTUNATE (2ND ROW, 3RD FROM RIGHT) WITH THE MAASAI MICROFINANCE WOMEN

### Q. Can you tell us one of your favourite microfinance stories or person?

Fortunate: My favourite microfinance person is Paulina Tipap, the head of all the microfinance groups in Loliondo. Paulina is a typical Maasai woman who has lived all her life in Loliondo and is married with six children. Paulina is a very good example of rural women who have been motivated through microfinance and eye care initiatives. Paulina not only brings patients to the camps but she also walks extra miles, washes elderly patients and literally carries them to outreach sites.

Paulina acts as community health worker in the village and helps with translation and acts as a runner for all the surgical camps in her area. Paulina not only acts as an health care advocate but also as an active, confident woman when it comes to the general empowerment of women in her area. She inspires most women in her area and she is a big influential figure in the world of Maasai women.

### Q. What is your hope for the microfinance program?

Fortunate: My hope is that in the near future, the participants will be good ambassadors in the community promoting cost-sharing in eye care services.

Q. Is there anything you would like Seva Canada donors to know? Any message you would like to send to them?

Fortunate: The main message for Seva Canada donors is that investing in microfinance groups to provide community advocacy and information works and more people are receiving services because of it.

# OUR ADVENTURE TO A SEVA CAMBODIA EYE CAMP

### By Claire and Lauren Mortifee

Our Seva Cambodia adventure has been rewarding, inspiring, and frankly...wild. Leaving Vancouver on a rainy and cold January morning, we had no idea what we were in for.

Upon arriving in Cambodia it was immediately apparent how much more difficult being blind in a developing

nation is compared to being blind in North America. Our first day of attending eye screening camps led us down the bumpiest dirt road either of us had ever been on. It really gave us an appreciation for the lengths the country

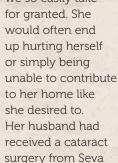
people have to go to access the luxuries of even the small nearby town.

On the first day of eye screenings it was tough to know what to do with ourselves as mere witnesses to the screening process. While staying out of the way of doctors and photographers, we were fascinated just observing all the new and different characters that were the Seva patients. As the eye screenings progressed, we found ourselves more and more comfortable interacting with the Cambodian people, with the aid of our amazing translators. Feeling some of the first connections with people was incredibly touching - the gratitude they expressed was at times overwhelming. Since many of the people we were communicating with

were only able to see shadows and faint outlines, they found out about us by holding our wrists and hands.

We were fortunate enough on the last day of eye screenings to visit a local woman's home. She explained to us what her life was like without the use of her eyes. She found it difficult to carry out daily chores such as boiling pots of water or sweeping her floors, activities

> we so easily take for granted. She would often end up hurting herself or simply being unable to contribute to her home like she desired to. Her husband had received a cataract



just a year before so she knew it was safe and reliable - she was very excited.

The most powerful experience of the trip was being at the eye surgery hospital and seeing the brave, familiar faces finally go under the knife. You could feel the anxiety in the waiting room, and yet no one complained or showed any impatience. They didn't even ask questions as they came into the operating room.

At this point in the trip we felt fully comfortable striking up a conversation with anyone. It was great to connect with the patients and have them know we were supporting and encouraging them on their entire journey with Seva. The Cambodian people were nothing but grateful and graceful. We will never

forget their faces when the bandages came off - the moment they were given their independence and their lives back with the gift of sight.

Upon settling back into Canadian life, we feel such deep gratitude for the many kinds of bounty present in our communities. The courage and hope the Cambodian people shared with us was infectiously inspiring. This has truly been an astonishing experience - we are forever grateful for the genuinely life-altering work that Seva does. Long may it continue.

### THANK YOU

To all the Seva donors and the Seva Cambodia team for an amazing and successful eye camp in the Banteay Meanchey province. You have given the power of sight to so many Cambodians in need in remote villages throughout the province.

The village eye screenings took place during the week of January 13th and throughout the week of January 20th patients were transported to the Mongkol Borei Referral Hospital for surgery. In total, 417 eye consultations and 268 eye surgeries were performed including 189 cataract, 75 pterygium and 4 additional surgeries.

The eye camp is over but the lives of the patients and their families have been changed forever by your kindness and generosity.



CLAIRE & LAUREN IN SCRUBS

# HOW DINING IN THE DARK SHEDS LIGHT ON BEING BLIND

#### by JoAn Maurer

On a dark and stormy night last October, my husband (Seva Canada Board Member) Michel and I gathered with a group of friends outside of Dark Table Restaurant in Kitsilano, Vancouver. We were there for Seva Canada's first "Dine in the Dark" fundraising event in celebration of World Sight Day, an international day of awareness for the issue of international blindness and low vision. We were going to have dinner in complete darkness.

Before entering the restaurant, we were directed to the posted menu for the evening. In addition to the usual dinner options—chicken, seafood, beef—one option was, "surprise." Seeing myself as an adventurous person, I of course chose "surprise."

We were welcomed by our server for the evening, Lazare Hounnake, who, like all the serving staff, is blind. He asked me to place my hand left hand on his left shoulder, and for the persons behind me to do the same, one by one. Then, he led us through a dark curtain into complete blackness. That was my first experience that evening in replacing sight with another sense, touch. I also experienced the emotion of trust in Lazare, and in myself.

We shuffled along in the pitch black - there was no glimmer of light anywhere. He guided my hand to a chair and helped me sit. Then, he guided my hand to touch the table and the place setting in front of me. I could hear the others being seated around me. Lazare left

and we began to discover who we were sitting beside as we tentatively reached our hands left and right to say "hello." I felt again around my place setting and was pleased to find a glass of water.

Executive director Penny Lyons & Board Chair Nancy Mortifee set the scene by giving short talks about the issue of avoidable blindness, encouraging us to use this unique experience to reflect on what blindness would mean to someone in the developing world; someone without the support systems available here in Canada.

In a short while—10 minutes? 20 minutes?—how could I sense time

without my watch?—
the first course came. I had purposely worn
washable clothes—
no need to be stylish
if no one could see
me! I used my hands
to explore the food
and realized it was
salad. I was quite
certain the cool
round juicy ball in
my mouth was a
cherry tomato, not
a kumquat!



JIM BYRNES

Although I wasn't aware of time passing, my surprise dinner arrived. I explored it with touch, and also with smell, taste and texture. I identified potatoes and

beans, but the surprise protein was mysterious. People began to tell each other what they believed they were eating—and others responded, "Oh right, that's what I'm eating!" My sense of taste was not influenced by "seeing" the food, but by my imagination.

As we enjoyed our main courses, we were treated to musical entertainment by legendary blues musician and Juno award winner, Jim Byrnes. I felt complete immersion in the guitar and his voice, without any visual distractions at all. It

was amazing how well Jim could play in complete darkness!

Next we heard a fascinating talk from our server Lazare who told us about how he lost his sight as a child growing up Togo Africa because his family didn't have access to the eye care that would have saved his sight. He also discussed the very difficult challenges of living with blindness in a developing country in comparison to Canada.

One of my friends at the dinner commented: "It's not the darkness, but the total absence of light I noticed." Also, it was noisy at the table. Were we compensating for not seeing by talking louder?

The evening concluded with a unique "blind" auction of beautiful items from

the countries where Seva works. Michel played the role of auctioneer and called out clues for us, and we used our imaginations to think of what the mystery items might be. "Colourful, cozy, comforting – wrap yourself up!" was enough to encourage

diners to start a bidding war for a lovely pashmina shawl from Nepal. Lucky bidders also went home with a singing bowl from Nepal, a Tibetan teapot and a prayer wheel. \$580 was raised from the auction alone – enough for almost a dozen people to have their sight restored.

In total the event raised over \$7000 to support Seva projects and bring sight to those in need.

Over the course of the evening, I paused from time to time to tune into the conversations around me. I could identify voices, but the content was "blurred" because I couldn't see who was talking to whom or lip read what an individual was saying. I enjoyed the mystery of it all and felt grateful that my loss of sight was only temporary. From being in total darkness, I also realized how my other senses gave me information—and insight—about how it might be to be blind. It also made me even more committed to fundraise and support Seva's blindness prevention and sight restoration projects in the developing world.



LAZARE HOUNNAKE

# A DAY IN THE LIFE OF A SEVA OUTREACH WORKER

Meet Mr. Leng Pisith.

Leng is a community eye health outreach worker for Seva in Cambodia. Each week Leng packs up his set of basic optometry tools and travels to remote communities. His work ensures eye care services are accessible to women, children, the elderly and the very poor.

The area where Leng travels is rural and undeveloped with particularly high poverty rates. Signs along the roads warn of the presence of land mines that still riddle the fields. Farmers missing a leg or arm are an all-toocommon sight.

To reach isolated villages Leng travels on his motorbike, riding for hours until the pavement ends — this is when his journey really begins.

Dirt roads quickly turn to muddy, washed out paths. Passing villages of thatch roof huts, Leng often finds himself in areas where there are no hospitals and no clinics.

Families in these villages live in poverty, surviving on less than \$1 per day. They struggle to grow enough food to sustain themselves.

As Leng rolls into the first village, he explains "I cover as much as 120 miles each day. When I arrive in a village I first meet with the community leadership and elders and plan for a group eye screening." With their blessing, he gains the trust of those who live in the surrounding area. Leng goes on to note "I'll work in the remote community for 5 days and screen approximately 40 people per day."

After locating a central place, he unpacks his eye exam tools and prepares for the first day of screenings. The eye chart Leng has brought has been specially designed so that he

can provide eye exams to people who cannot read. More than one in four who come to have their eyes checked are illiterate.

As word spreads throughout the village, community members line up to have their vision checked. Many are elderly and are led to the screening by a grandchild. These elders often are unable to see the eye charts at all,

a pair of prescription glasses. That child will be able to see the blackboard and stay in school, where he or she can gain skills for a better future.

For the elders and those who have conditions that require corrective surgery, Leng arranges free transportation to the Seva-funded eye clinic. Here, thanks to Seva donors, these patients receive world-class eye care. For the many with cataracts, a 15-minute surgery gives them back the power of sight.

The cost of medical services, and even just the expense of travel, would have been prohibitive to these rural villagers. Leng notes that "The best part of my job is seeing the success rate of the eye care services and teaching people about them." He goes on to explain: "when



MR. LENG PISITH

suffering from mature cataracts that have blinded them almost completely. Typically the child who led them is not in school. With their parents busy in the fields tending to the crops, the child is left home to care for their grandparent who would otherwise be helpless at home alone.

Other patients who arrive suffer from eye injuries, infections, and other potentially blinding and often painful conditions. Leng carefully evaluates each person who comes to have their eyes checked.

For a child, he may only need to provide

I can show them someone who has already had a successful treatment, they are not so afraid of the eye care."

"One patient I identified could not see anything at all, not even the faces of his grandchildren. Thanks to Seva he received surgery. I was there when he first saw his grandchildren, and he also recognized me. He called out to thank me for bringing him to the clinic."

Outreach workers like Leng and Seva donors like you have restored the sight of nearly 3.5 million people around the globe.

# THE BC GOVERNMENT & SERVICE EMPLOYEES' UNION SHOWS THEIR INTERNATIONAL SOLIDARITY THROUGH AN INNOVATIVE OUTREACH APPROACH

Word of mouth marketing can be a most effective way to get a message across, and that goes for international eye care too. The blind simply will not receive sight-restoring care unless they are informed that quality services exist, and are shown how to access them. In the developing world, getting this message to poor and remote areas is no easy feat.

The key is to get the right message into the hands of the right people, and the British Columbia Government and Service Employees' Union (BCGEU) Diane L. Wood Humanity Fund has made sure that essential eye health information is available to the blind, especially women and girls, in some of the most remote parts of eastern Africa. Here's how:

In 2011, the BCGEU partnered with Seva Canada, and began providing funding to help bridge the gender gap in Tanzania and get eye care to those who need it most. Their funds have supported Seva's microfinance program, which educates women in microfinance groups about eye health and creates a word-of-mouth advertising network for eye care services. It's an innovative and low-cost program that partners with existing networks of women who are involved in the many microfinance organizations in low-income countries.

The BCGEU, together with the Department of Foreign Affairs, Trade and Development Canada and dedicated individual donors, have educated hundreds of women to

become eye care advocates within their communities, ensuring that life-changing eye care is accessible to all. After receiving free eye health training, these women provide information and counseling about Seva's services to those who would otherwise never know that care is available to them.

Microfinance members are leading the way for women and girls to move up the socioeconomic ladder in the developing world. Training them to recognize eye problems increases their confidence and their positions within their communities. They are happy to work as volunteers to provide this much-needed service. Their communities benefit because so many blind people are found at virtually no cost. The blind can then receive care, see again, and reach their true potential. More often than not, these patients are women and children who are not easily found through traditional outreach.

Because of the support of BCGEU and its thousands of diverse union members, thousands more of the most marginalized people in Tanzania have been referred for eye care through the microfinance program. The program has been so successful that it has expanded into Ethiopia.

Seva asked Ken Curry of BCGEU a few questions about the Diane L. Wood Humanity Fund and the great work that they do:

Q. Firstly, can you tell us a little bit about BCGEU?

**Ken:** The BCGEU is one of the most diverse unions in British Columbia. We represent approximately 67,000 men and women in more than 550 bargaining units. Our union can trace its beginnings back to the early 1900s when provincial government employees formed an association to address their working conditions. Since then, the union has organized thousands of workers outside the government service.

Our members include the women and men who protect children, provide financial assistance to the poor, protect the environment and manage our natural resources, care for the mentally ill in institutions, staff provincial correctional facilities, fight forest fires, and provide the government's technical and clerical services. BCGEU members instruct and provide support and technical services in colleges and institutes. They provide community health care services to seniors and others in their own homes and longterm care facilities, and enable the developmentally disabled to live in group homes. Our members provide financial services in banks and credit unions, and work in hotels, department stores, First Nations governments, theatres and casinos. They plow our highways during the winter.

### Q. What is the BCGEU Diane L. Wood Humanity Fund and why was it formed?

Ken: In 1999 delegates to BCGEU's convention passed a resolution to establish the BCGEU International Solidarity and Humanities Fund. Later, the fund was renamed the BCGEU Diane L. Wood International Solidarity and Humanity Fund in recognition of the international work done by former secretary-treasurer Diane Wood. The fund provides financial support for projects that partner us with unions, community groups and nongovernmental organizations in different parts of the world.

#### Q: What are the Fund's objectives?

**Ken:** The Fund's objective is to provide concrete support to the work of the BCGEU's International Solidarity Committee. This committee raises awareness of international solidarity

issues among union members, and its goals include promoting social and economic justice, solidarity and the values of trade unionism; supporting fair trade initiatives; supporting public services as a foundation of a democratic society; and promoting the Millennium Development Goals.

### Q: How does the BCGEU Diane L. Wood Humanity Fund raise money for its projects?

Ken: BCGEU contributes 20 cents per member per month to the fund to help support a number of projects and partner our organization with different unions, community groups and nongovernmental organizations.

### Q: Why do you support Seva's microfinance work in eastern Africa?

Ken: One of the guiding principles in determining which projects to endorse is work towards supporting the United Nations Millennium Development Goals. These include universal education, gender equality, child and maternal health and global partnership, all of which are embodied in Seva's microfinance work.

The loyal support of the BCGEU has made the continuation and expansion of this innovative microfinance partnership possible. Their support over the years has ensured that essential eye care services are available to some of the most vulnerable people in the world. Thank you to the BCGEU and its union members!



### HOW YOU HAVE HELPED

In our fall newsletter, we asked for your help to bring the power of sight to some of the most remote regions of the world through outreach. You gave generously to ensure that life-changing eye care was accessible to some of the most vulnerable people on earth.

Your donations trained 16 Female Community Health Volunteers in basic eye care in Nepal, screened hundreds of poor rural farmers for eye disease in Cambodia, and gave 288 men, women and children the power of sight at an eye camp in Nakchu, Tibet. Patients ranged in age from 13 to 92, and 2/3 of them were women.

Thank you for giving the power of sight!

# 2/3 OF THE WORLD'S BLIND ARE WOMEN

In low-income countries, women and girls are far less likely to have access to eye care services because of the barriers they face: lack of education; limited decision-making power within their households; poor access to financial resources; and cultural restrictions on travelling alone. In addition, male children are often given preferential treatment by their families and are more likely to receive eye care should they need it.

You can help women and girls overcome these barriers

Your donation today will ensure that a woman living in a poor rural area gets the eye care services she needs. From providing outreach and education, to community screenings, to transportation arrangements, to unique partnerships with women's groups, your gift will ensure women and girls avoid low vision and blindness

Yes! I want to open doors for women in
world by giving them the power of sight

the developing

### I prefer to give by:

Please accept my gift of: \_

☐ Visa

☐ MasterCard

☐ American Express

☐ My cheque to Seva Canada is enclosed

Credit Card #\_\_

Exp. date\_

4 digit security code (Amex only)\_\_\_

Cardholder Name

Signature \_\_

Name \_ Address \_\_\_\_\_

City \_\_\_ Province \_\_\_\_

Postal Code \_\_\_

Telephone \_\_\_

A tax-deductible donation will be issued to the name on the cheque or credit card.

Please send your donation to Seva Canada using the enclosed envelope.

Seva Canada Society Suite 100 - 2000 West 12 Avenue Vancouver, BC V6J 2G2

# INSPIRING SEVA DONORS



### Olivia Forrest

- Olivia is a grade 6 student from Toronto, who learned about Seva through an article in the Globe and Mail. When Olivia was first learning to read, she used to get headaches because she needed glasses; now that she has them, she knows what a difference vision can make.
- Olivia started a campaign at her school during a holiday concert, called "small change for a big change in vision". Along with her sister, brother, and friends, Olivia collected \$489.16 in only a few hours. Now 10 people can have their vision restored through sight-restoring surgery, thanks to her hard work.
- Olivia says "I really enjoyed fundraising for Seva, which I think is so important. I'm really proud of the amount of money we raised."



### Zaf Khalfan & Delta Optical

Zaf Khalfan is the owner of Delta Optical, a 40-year-old optical chain with 4 locations in Ontario.

- Three years in a row, Zaf and his team raised funds for sight for World Sight Day by donating a percentage of all glasses sales for the month of October to Seva. The promotional days raised a total of \$8,700, all of which was invested in growing our programs in Tanzania.
- Seva does not normally send glasses overseas, but when our Zambian program partners were in urgent need of baby frames, Zaf stepped up to the plate to help. He reached out to his network and he and his colleagues from the optical world sent Seva hundreds of these expensive and difficult-to-find glasses for babies. Those glasses are now in Zambia, being distributed to small children who suffer from low vision.
- www.deltaoptical.ca



### UBC Crane Library Volunteers

- The UBC Crane Library is a resource for students with disabilities, providing course support through recorded "talking books", braille, large type, and electronic text. A dedicated group of volunteers records the spoken word books and in fall 2013, 55 volunteers braved rain and sleep deprivation to participate in a marathon of narration and fundraising: Narrate-a-thon 2013!
- For two days, they narrated for 7750 minutes (a little over 129 hours).

- read 1442 pages and completed 13 texts. They also collected pennies to restore sight and prevent blindness, resulting in a total donation of \$101.60 to Seva Canada.
- This donation provided two cataract operations for women in Guatemala.



### Westsyde Secondary Junior Girls Volleyball Team

- When the Westsyde Secondary
  Junior Girls Volleyball Team was
  looking for a perfect thank you gift
  for their coaches, the girls decided
  to do something special. Rather
  than the usual coffee card or signed
  volleyball, they decided to pool
  together their money and give
  the gift of sight, resulting in a \$135
  donation to Seva Canada.
- When the coaches received their donation certificate, they were delighted. It turned out they had enough team-signed volleyballs to fill a van. They thought the gift was thoughtful and mature, and they thanked each girl in person.
- A proud mum of one of the volleyball players said, "The warm feelings from giving this gift last way longer than a coffee card!"

# BECOME A MONTHLY DONOR

You can help blind people see again every day of the year. Join our Circle of Sharing family of monthly donors by visiting **seva.ca** or by calling **1-877-460-6622** toll-free.

"It makes me feel so good to know that my monthly donation is in the hands of people who care with such devotion, compassion and competence! As well, to know that people who I will never know can see the faces of their loved ones and the world around them because Seva does such a good job in bringing together the teams who can restore sight to those so in need."

Arlene McGibbon
 Monthly donor



# ABOUT SEVA CANADA

### SEVA'S VISION

Seva Canada's vision is a world in which no one is needlessly blind or visually impaired and where those with unavoidable vision loss can achieve their full potential.

### SEVA'S MISSION

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

# SEVA'S GUIDING PRINCIPLES

We are guided by:

- 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

### HONOURABLE PATRONS

The Honourable Lloyd Axworthy Patrick Reid, O.C.

The Honourable Judith Guichon, OBC Lieutenant Governor of British Columbia

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