



Bruss named VOSH Humanitarian of the Year

Max Bruss has been a member of VOSH-Florida (now VOSH/Southeast) for the last twelve years, serving the last ten as Vice President-Operations, and has participated in at least 20 VOSH missions. However, by far, his greatest contribution to world visual health has been the creation, almost single handedly, of the entire panorama of volunteer visual health efforts found in Peru.

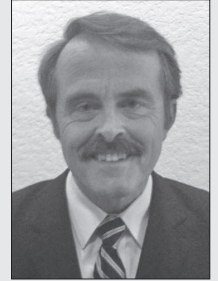
VOSH partnerships date back to June 2003 when Severo Sanchez, a leading Peruvian optometrist, volunteered to join a VOSH mission team working in Jungay. Since then VOSH has formed multiple continuing partnerships with Peruvian optometrists as well as humanitarian and educational organizations. Max Bruss oversees this construction of an "in country" network of people, NGO's (Non Governmental Organizations), professional schools, and government officials thus amplifying the humanitarian work of VOSH in Peru.

Max, and Dr. Bob Barr, VOSH/Southeast Vice President for Professional Affairs, share the opinion that the fastest, most effective way to permanently improve the delivery and quality of humanitarian optometric services is by supporting the national optometry schools. Under their guidance the VOSH/Southeast has donated training and hand equipment worth tens of thousands of dollars to many Peruvian optometry schools and their students.

VOSH optometry school and student support created an unanticipated

(Continued on page 7)

Letter from Greg Pearl, OD President of VOSH/International



I am truly honored to become President of VOSH at a time when we have so many new opportunities to expand our mission and serve more people. Besides donating our skills on mission teams at home and abroad, we can now donate our used equipment to foreign optometry schools and clinics and donate the funding necessary through OptometryGivingSight to achieve the WHO/Vision2020 mandate. This mandate will develop optometry abroad in order to provide a 50,000 patient to doctor ratio. Soon, under a VOSH program in development, we also will be able to donate our knowledge by teaching and providing clinical mentorship at some of the 80 new optometry schools that will be needed worldwide in the next 10 years.

Vision campaigns will still be at the core of our VOSH mission. We will need many more VOSH members and team leaders to organize many more VOSH campaigns. VOSH/International will have booths at every major optometric meeting. Each VOSH chapter can contribute by having a similar booth at their respective state optometric association annual meeting. Each of these booths at the state conventions can jointly promote VOSH and OptometryGivingSight. More VOSH members can be recruited by presenting all the new, exciting VOSH opportunities. The state conventions can also be the stage for the annual VOSH chapter meetings. It troubles me to learn that some student VOSH chapters cannot recruit VOSH trip leaders. Every optometry student who wants to participate on a VOSH mission must be given that opportunity. Each VOSH chapter can support our student VOSH chapters by purposely scheduling their trips to coincide with a particular optometry school's vacation schedule. Every school's vacation schedule will be linked on our website, www.VOSH.org.

We have an exciting new opportunity to collaborate with the US Navy on their humanitarian missions to the English-speaking West African countries of Ghana and Liberia for six weeks in March and April 2010. The Navy will provide all in-country transportation, meals, lodging and security. Contact www.vosh.org for more information. We hope that this pilot project will lead to future collaborations with the US military throughout the world.

VOSH chapters can now also apply for OptometryGivingSight funding for sustainable domestic projects to serve the homeless and other underserved populations among us. VOSH will also continue to work with Remote Area Medical (www.ram.org) as they expand their free clinics beyond Appalachia to urban centers and Indian reservations nationwide.

Finally, we should all contribute to OptometryGivingSight on a monthly or per-patient basis and/or on World Sight Day and we must encourage all our patients to do the same with in-office displays. A joint VOSH/OptometryGivingSight office display will be available shortly.

Each of these VOSH projects is being developed by a VOSH committee. I would encourage anyone interested in a particular project to contact the committee chair through www.vosh.org. We encourage everyone to contribute their talents.

There is much to be done and we are the ones to do it.

VOSH-Ohio Mission into Haiti

By Barbara Plaughter

Drums beating with people chanting, roosters crowing, goats bleating, and guard dogs barking. Those were the sounds I heard as I laid awake in the early morning hours in our safe walled-in mission compound, wondering about our plan for evacuation.

This was our first mission to Haiti. We saw 2,556 patients and provided glasses to many of these patients. Now that the mission is complete, how do we get home? The most devastating earthquake in 100 years hit Port-au-Prince, one that we felt here in Hinche 75 miles from the epicentre. After clinic on Tuesday, the team visited outside the walled compound to see the garden. While visiting, the earthquake hit Port-au-Prince. All of a sudden the entire team experienced extreme vertigo. Not knowing what was going on, it was a strange sensation. We did not feel the earth shake; however, there were several bouts with vertigo. The carpenter member had remained at the compound and he reported the house moving and a calendar swaying on the wall. We soon found out of the mass devastation as Father Glenn invited the team over to his house to watch CNN. The news was terrible; I immediately tried to contact four people in PAP and was not able to find out their well-being.

This is a first-time visit to Haiti for 12 of the 16 member team and a lasting remembrance is one of love and fellowship with our Haitian helpers in the clinic, members of the team at SOLT, and with the team members as we experienced our next adventure to depart the country.

The compound teaches 1,300 children and feeds their children 2 meals each day. Lunches consist of cabbage soup or a porage. Huge gardens are planted to provide food for the children. Hogs, chickens, and goats provide meat and eggs. It is a well run compound. Father Glenn has built 90 houses for the Haitians and set up an organized program for these houses.

Calls to the missionary flight service told us that they were only taking supplies and rescue equipment into PAP and would not offer their services to us for probably six days. Even though the border to the Dominican Republic was only a few miles away, it was cut off; going north was also not available for us. We felt we needed to get out soon. Reports told us of the unrest and violence in the capital city of PAP. The US Embassy recommended that US citizens leave, and we were told that starting on Friday, the US citizens would be evacuated. This was our only option.

Quickly the team packed and we rented an air conditioned (meaning the windows open) van and started our venture. We decided that each team member must get out with only one suitcase. Glasses, medications, and some equipment along with all our duffels were left behind. Excess clothes, shoes, and personal items were left behind. We did take toilet paper, water, surgical masks, breakfast bars, and the team made peanut-butter sandwiches for the members, as we had no idea how long we would be at the airport until we were evacuated.

Travel over this road from Hinche to PAP had recently been completed to cut an 8-12 hour trip down to three hours. Haitian



Entering US Air Force C-17 for evacuation from Port-au-Prince.

roads are mostly not paved and have multiple rocks in the road bed. We honked and swerved the entire trip to miss goats, horses, people, and other vehicles. The bumpy travel was extremely exhausting for the young as well as the older team members. Then our adventure began! Arriving at PAP, we were immediately into a traffic jam. All were trying to pass in the streets scraping vehicles just to get through. Fallen buildings, Haitians walking in mass, Haitians in tap taps and chicken buses over-loaded inside and on top, heading out of the city with furniture, suitcases, chickens, and animals, whatever. Haitians wearing masks, riding motor bikes with multiple people on each bike were trying to get out – and we were trying to get into the city.

Finally we arrived at the airport. We found the terminal damaged and the tower not working. This was Friday at 12:30 p.m., 2½ hours after leaving the safe compound. We were instructed to stay in line and stand, as the terminal was unsafe to enter. We stood there for five hours, eating our sandwiches for supper and distributing our remaining food to the people through the fence, as we were on our way home shortly.

Planes from all over the world were bringing in rescue teams, the dogs for body retrieval, all sorts of medical and rescue teams were arriving. Three patients with IVs were lying on gurneys on the tarmac waiting for smaller evacuation planes to arrive. At 10:30 p.m. we were led out onto the tarmac to enter a US Air Force C 17 cargo plane. Probably around 100 people were strapped into seats along the wall and down the center of the belly of this plane.

We needed to stop in Charleston to fuel up and then on to McGregor Air Force Base. Finally at 6 a.m. Saturday morning we arrived and bussed to the base. We had namebands placed on our wrists and were given a health kit to shower, briefed by the air force personnel and taken to a gymnasium full of cots. We were provided food and telephones, if need to make arrangements to fly home. So much has happened after that 30 second shaking of the earth that will be remembered by many people for their entire life. A full report can be found at [www.vosh.org/files/Ohio\(1\).pdf](http://www.vosh.org/files/Ohio(1).pdf). There is also coverage at <http://www.msnbc.msn.com/id/3667173>.

Recommendation to IAPB agencies regarding humanitarian responses in Haiti

As members of IAPB, we all feel that eye care is crucial, but provision of eye care as part of the response to the earthquake in Haiti, is not indicated at this time.

Here's why:

- The humanitarian space is very limited and the influx of unnecessary people and programs will hinder lifesaving efforts and efforts to restore infrastructures needed to provide water, food and basic public health interventions. Your good intentions may cost lives.
- Post earthquake environments are unsafe. Responders and relief workers are prone to punctures, lacerations, broken bones, etc. from having to move around in rubble. There are additional dangers from unsafe structures collapsing and downed electrical wires. Adding to the danger in this environment is the potential for civil unrest. There is no need to put your staff in this unnecessary danger.
- Appropriate humanitarian responses are based upon evidenced need. A team of ophthalmologists from the University of Miami is based in the US Army hospital which has been set up at the airport. CBM have people in Haiti and are working with the Haitian ophthalmologists in the country. At present there is no evidence or strong indication that there are pressing needs for additional ophthalmic or optometric services.

This does not mean that there is never a place for eye agencies or that there is never a time for eye care services in humanitarian emergencies. Agencies that are operational and on the ground before the disaster, are often well placed to help in the general response. Vehicles and local staff with local knowledge are both vital in the initial general response.

It will be a minimum of weeks, and more likely months, before it would be appropriate for eye agencies to consider undertaking new programs in the earthquake affected area. As that time come near, the decision to implement eye services or blindness rehabilitation projects should be done in consultation with, CBM and with the appropriate entities of the Haitian government.

I have asked Valerie Sherrer, CBM Emergency Coordinator, to collaborate in this response. Valerie is now in Haiti and reports at this point in time, those individuals with vision impairment are in need of water, food and protection rather than specific rehabilitation. Valerie emphasized the lack of humanitarian space - "It is very important to underline the congestion of the logistics here, and that adding more people will endanger the Haitian population."

Finally, I would like to take this opportunity to remind all that we are in the process of drafting standards and guidelines for eye care in humanitarian emergencies. These guidelines will be compliant with the SPHERE minimum standards in disaster response and will be submitted for VISION 2020 endorsement once finalized. After the initial draft is ready, we will be seeking substantial review and comment from both the eye community and from the humanitarian relief community. If you have experience with responding to conflict or disaster affected populations, we would like your input on this process.

Questions are welcome.

*Jerry Vincent OD, MPH
Blindness Prevention Advisor
International Rescue Committee
Jerry.Vincent@theIRC.org*

*Valerie Sherrer
Emergency Coordinator
Christoffel Blindenmission
valerie.sherrer@cbm.org*

VOSH, Optometry Giving Sight partner with others to help Haitians

On January 12, 2010 a devastating earthquake hit Haiti. Reports suggest that tens of thousands of people have lost their lives or are injured and hundreds of thousands have lost their homes and their possessions - for many people that includes their glasses.

Optometry Giving Sight is working with partner organizations including Volunteer Optometric Services to Humanity (VOSH), the International Centre for Eyecare Education (ICEE) and the Caribbean Optometrists Association (CARIOA) to identify and fund projects that will provide emergency relief and assist in the reconstruction process through the establishment of sustainable vision care.

Even before the earthquake, access to vision care for most of Haiti's population was limited. In the aftermath, Optometry Giving Sight is committed to funding sustainable, quality vision care services including the training of local eye care professionals and the establishment of Vision Centers.

Donations can be made at <http://www.givingsight.org/index.asp>

More about Haiti

- The poorest country in the western hemisphere
- 70% of people live on less than \$2.20 per day.
- More than 4 million people are unemployed (half its population).
- The earthquake was the worst in two centuries.
- The Pan American Health Organization put the death toll at 50,000-100,000, while Haitian Prime Minister Jean-Max Belterive said 100,000 "would seem a minimum."
- The loss of life from earthquakes is typically 10 times higher in developing countries than the West and the damage can be up to 100 times worse (US Geological Survey).

A Truly International VOSH Annual Meeting

By Larry Hookway, O.D., F.V.I.

With attendees from the U.S., Canada, United Kingdom, Australia, the Netherlands, Nigeria, Hong Kong, Thailand, Brazil, and Nicaragua this year's VOSH International annual meeting was truly "International." We were very fortunate to have excellent speakers that included President of the World Council of Optometry, Dr. George Woo; Dr. Imran Kahn, optometry and public health professor in the Netherlands; Dr. Jerry Vincent from the International Rescue Committee in Thailand; Edwina Taylor, R.N. who started a health care NGO in Alabama; Dr. Nelson Rivera of the International Centre for EyeCare Education (ICEE); and Dr. Vic Connors from Optometry Giving Sight. It was very exciting to hear reports from the regional chapters as well as the student chapters. VOSH/International representatives gave updates on the progress in Nicaragua, the Technology Transfer Program, the US Vision 2020 program, and the International Student Mentoring program. Some other highlights are listed below:

- Max Bruss from VOSH Florida was honored as the VOSH/International Humanitarian of the Year.
- Two suitcases, each with \$1,000 worth of equipment for vision care outreach were presented to Dr. Faustina Kemdinum Ido for the two Nigerian optometry schools, UNIBEN and ABIA.
- Drs. Michael DeRosier, Ellis Potter, Dave McPhillips were installed as new board members.
- Continuing Board Members are Drs. Vic Connors, Bina Patel, and James Vaught.
- Recognition was given to outgoing board members, Drs. Jeff Forrey, Ruth McAndrews, Marcela Frazier, and Nelson Riviera.
- VOSH/International recognized the dedication and support of Dr. Harry Zeltzer (executive director and webmaster), Charles Covington (Secretary/Treasurer), Natalie Venezia and Deborah Wright (board administrators), and John Gehrig (legal counsel).
- Fellowship of VOSH/International awards were achieved by Drs. Christine Smith, Larry Hookway, and Greg Pearl.
- A new chapter in Columbia, VOSH/LaSalle, was welcomed.
- Social time sponsored by VOSH/Southeast, where old friends had the opportunity to reunite and where new contacts were developed.

Our next annual meeting will be held in Las Vegas following the Vision Expo West conference on Sunday October 10, 2010.

VOSH/U.S. Navy Clinic Opportunity in Africa

By Dr. Jim Hess, Past President, VOSH/International

The United State Navy has asked VOSH to join with them in a very unique collaboration in West Africa. The Navy wants to learn from us how we run our missions so they can better help serve the world through their humanitarian efforts. The Navy will provide transportation in county and VOSH volunteers will pay their own expenses. The countries chosen are Ghana and Liberia. The Navy runs 5 day clinics (M - F) and the dates for Ghana are March 15 - 19 and March 22 - 26 and in Liberia April 5 - 9, 12 - 16, and 19 - 23 (2010). We are looking for small teams of 5 - 8 people per team, 2 of which are ODs. The Navy will provide 2 optometrists per team as well as 2 optometric technicians. Below are some of the details:

Ghana

- Mission held at 2 clinic sites in Tema (45 minutes from Accra).
- The Navy provides 2500 spherical equivalent glasses, plus 2000 sunglasses and 1500 adspecs.
- ODs bring along scopes, Retinomax, and tonometer if possible.
- Optometry students and staff from Ghana to assist.
- Navy negotiates favorable rate at hotel.
- American Embassy and USAID collaboration.
- Emergency contacts available.
- ODs must be credentialed.

If interested in the Ghana mission, contact Kirk Thomas (former VOSH/Int. board member) holeintheday@hotmail.com.

Liberia:

- Similar medical teams as the Ghana clinic.
- You may stay at a Liberian army camp at no expense-includes meals, austere quarters, cots.
- Hotel stays are own expense and Navy negotiates favorable rate.
- Exact locations of work undetermined, but close to Monrovia.
- Navy provides similar glasses as for Ghana.
- ODs bring same equipment as Ghana.
- Unite for Sight volunteers assist (this is not the Unite for Sight organization founded by Jennifer Staples).

If interested in the Liberia mission contact Jim Hess (former VOSH/Int.president) imnod@aol.com.

VOSH is looking for volunteers to work any or all of the 5 day clinics. Depending on scheduling, it may be possible to work just a partial 5 day clinic. These both will be very interesting and unique experiences where you get a chance to make a significant impact for future Navy humanitarian efforts. They want to learn how to do eye care work better, and what a better way than to ask for our help. Time is short, act now!

Student VOSH ONE at Tuft Medical School's Sharewood Free Care Clinic, Massachusetts

By Bina Patel, O.D.



The Student Volunteer Optometric Services to Humanity of New England College of Optometry, Boston (Student VOSH ONE) has been working providing sustained eye care at the Sharewood Clinic in the Greater Boston Area.

The Sharewood Project is managed primarily by first and second year students of Tufts University School of Medicine (TUSM) under the guidance of Dr. Joseph Gravel, and was founded by Dr. Brian Lisse and the TUSM class of 1999. It is a free healthcare clinic offering unscheduled care to the medically underserved populations on Tuesday nights. Sharewood is staffed by volunteer physicians, medical students, other health

professions students, and translators. The clinic provides clinical, case management, and laboratory screening services. All services are free and open to everyone.

This year, Sharewood has had approximately 2,500 patient visits from 1500 different patients, most of whom do not possess health insurance. According to recent data, the patient population has been approximately 60% Mandarin Chinese speaking, followed by Cantonese speaking patients as the next largest group. In addition, approximately 40% of the patients have been in the United States for less than one year. Sharewood is beginning to see an increase in patients from the Malden area as well, which include low-income and homeless individuals, many of which attend the Center United Methodist Church's "Bread of Life" soup kitchen that is also open on Tuesday nights.

For more than three years, the student VOSH group has been providing vision screenings at the clinic once a month, under the supervision of Dr. Michael Ruby. Exam equipment has already been donated to our Sharewood site, and we have expanded from a screening program to doing comprehensive examinations.

At this stage, the goal is to expand the free eye clinic department for Sharewood. We want to continue to provide diagnostic services, patient education, eyeglass and therapeutic prescriptions, and continuity of ophthalmic care. After the clinic is fully operational and established, a potential future endeavor is to set up an optic laboratory.

A number of funding sources have been explored in order to purchase needed equipment and to continue maintenance on the equipment for the eye clinic.

The students of VOSH ONE feel that not only has Sharewood become a learning venue for optometry students, but also serves to further develop a deeper relationship with the Sharewood student medical doctors. In addition to providing comprehensive eye care to the local underserved population, Sharewood represents a great opportunity to learn and teach these young medical doctors what optometry can do for them and their future patients.

Student Manual—Refractive Error Training Package

The ICEE Refractive Error Training Package is a comprehensive and multi-layered refractive error training resource. The package takes student and teachers through refractive errors and refraction training in an interactive and uncomplicated way. It gives community and mid-level health care workers the knowledge and skills necessary to perform accurate refraction examinations and prescribe appropriate spectacles.

The package contains 30 subject units, including step-by-step instructions, flow charts, diagrams and photography, Power Point presentations, discovery activities, simulations, worksheets, case studies, role-play activities, summary sheets, practical activities for skills development and a student logbook for refraction examination practice. <http://register.icee.org/>

VOSH/California Mission to El Salvador

Three optometrists, Dr. Greg Pearl, Dr. Diane Williams and Dr. Jane Le (from Australia); five SVOSH/SCCO optometry students, Dorothy Lea, Elise Swanson, Mariah Smith, Stephanie Johnson and Paul Kwon; and two optometrist's spouses, Marion Pearl and Don Williams worked with a team of two FUEDEM optometrists and seven technicians and opticians in the southern state of La Union, El Salvador.

Based out of a hotel in San Miguel, the team travelled each day to a different village and set up our FUEDEM/VOSH clinic in a school or other public building. We screened 2,058 patients in five villages and then examined and refracted 1879 of them using trial frames and portable phoropters on tripods. Reading glasses were immediately dispensed to 390 of the patients and orders were taken for 756 new custom single vision and bifocal lenses which are made at the FUEDEM optical lab for dispensing later. FUEDEM has a clinic in San Miguel which is staffed by an ophthalmologist and an optometrist so 417 patients were referred to that clinic for further consultation. Those patients needing surgery will then be transported to the FUEDEM surgical clinic in San Salvador.

While in La Union, the El Salvadorean Navy took our team on an afternoon cruise in the Bahia La Union aboard a patrol boat. We also enjoyed visiting the National Art Museum in San Salvador, shopping for souvenirs and an afternoon at a beach club before returning home to California.

VOSH teams interested in working with FUEDEM (see fudem.org) should contact them about their ongoing rural vision campaigns. FUEDEM is well organized and will take care of arrangements for your team.



A new chapter in Columbia, VOSH/LaSalle, was welcomed during the VOSH-International Annual Meeting in November.

Cahaba Valley Health Care Provides Care to the Community

Edwina Taylor's life was changed forever when she adopted her daughter, Emilie, 11 months old, from Guatemala.

She became aware of Hispanics. Edwina continued her work as a hematology-oncology nurse, and palliative care specialist until she had an idea: "There are lots of Hispanics living in Birmingham. Who is providing health care for them?"

She founded Cahaba Valley Health Care in April 2000, with the first Board meeting.

The organization conducted a needs assessment among Latinos and discovered that the major needs of this community were vision care, dental care, and acute care. In August 2001, they began implementing vision screenings and providing glasses in local churches with Latino congregations.

They make their services more available to the Hispanic Community by addressing three barriers that Hispanics have regarding their ability to access needed health services. The three barriers are:

1. **Access** – Many in the Hispanic Community find it difficult to access normal medical care because medical hours are not conducive to those with hourly jobs working 6-7 days a week. By conducting screenings in churches with Hispanic congregations on Sunday afternoons, they provide services at times and places that are easily accessible to the Hispanic Community.
2. **Cultural Sensitivity** – Many in the Hispanic Community find it imposing to deal with medical personnel that do not speak Spanish, and are not sensitive to their specific cultural issues. Approximately 70% of screening volunteers/staff speak Spanish and many are Hispanic. Those who do not speak Spanish have an interpreter at his/her station. All of their literature and charts are in Spanish and English.
3. **Trust** – Many in the Hispanic Community – specifically those who are undocumented – find it difficult to trust the medical establishment. The Hispanic Community trusts them primarily because their churches trust them and they trust their churches.



Mission:

The mission of Cahaba Valley Health Care is to provide access to health services for the underserved, primarily Hispanic Community, in Jefferson and Shelby Counties.

Vision:

In 2001 they began our services with vision care. To accomplish their mission, they formed collaborations with UAB School of Optometry, UAB Department of Ophthalmology, SightSavers America, Lenscrafters, Vestavia Eye Care, John Sasser Opticians, Inverness Eye Care, and Volunteer Optometric Service to Humanity (VOSH) including the Alabama chapter and the SOSH at UAB.

Vision screenings are performed by licensed optometrists, assisted by approximately 18 volunteers at each screening. We provide new reading glasses that have been donated or purchased. Because of the partnership with a local optician, optometrists are able to fit patients at our screenings for glasses. These glasses may be bifocals or single vision glasses. Persons present for vision screening who need further care are referred for full exams and specialty services to the

above mentioned collaborators, a member of our network of private practitioners, or to the CVHC Vision Referral Clinic. Children are referred to SightSavers America, and are seen by Dr. Marcela Frazier, a bilingual optometrist at the UAB School of Optometry and a member of the Board (as well as the VOSH Board). They began an educational program on occupational eye safety in 2006. This program includes tips on how to prevent eye injuries and each participant receives free safety glasses on site.

Cahaba Valley Health Care has only 4 paid employees. The screenings and follow up clinics are otherwise staffed by volunteers. Screenings are publicized on their web site, through radio announcements, at churches, and through ESL classes. Hispanic ministers also distribute flyers. CVHC conducts screenings at Catholic, Presbyterian, Methodist, Christian, Baptist, Episcopal, and non-denominational churches. They serve Jefferson and Shelby County Residents. The organization primarily serves Hispanics, but will see anyone regardless of race, age, sex, or religion. In 2009, they served approximately 700 patients through their screenings, vision clinics, and health fairs.

For more information, go to www.cahabavalleyhealthcare.org, or call Edwina at (205) 991-8771.



John and Carla Gehrig of VOSH/Southeast presented 3 trial lens sets to the Lion Ladies of H-3 in Lima, Peru. They will use them for their training at ISPOO, an optometry school in Lima. Two more sets will be supplied upon their completion of the program. Their sets will go to the school for use in training the students.

In Memory of Dr. Philip Hottel



Dr. Philip E. Hottel, 83, of Williamsburg, Iowa passed away Tuesday, November 10, 2009. Dr. Hottel served as President of VOSH/International, VOSH/Iowa, and the Iowa Optometric Association. He was active in Lions Club and church activities. Following his retirement in 1989, Dr. Hottel and his wife, Thelma, devoted much of their time providing vision care to

those in need. Many of his friends and family have generously remembered Phil with a memorial donation to VOSH. A list of those honoring him in this way can be found on www.vosh.org.

Humanitarian of the Year

(Continued from page 1)

“synergistic” gain for the Peruvian government’s humanitarian efforts. The government and other NGOs sponsor two programs dedicated to bringing good vision to all Peruvians. These programs are the VER A LEER (See to Read) adult literacy program and the VER A APRENDER (See to Learn) student vision screening program. Both programs depend on volunteer manpower in order to accomplish more than half a million vision screenings throughout Peru. Volunteer optometry students contribute thousands of hours participating in these screenings. However, a shortage of simple examination tools among the students prevented them from doing these screenings most effectively. VOSH donations to schools of basic exam equipment such as scopes and trial lens sets now enables brigades of students, to do screening exams with maximum efficiency.

Max is dedicated to VOSH 24/7 and always willing to help another chapter or mission leader, especially in materials acquisitions. Visit www.voshsoutheast.org for available equipment and supplies.

VOSH-SOUTHEAST Established

July 24, 2009 was the birthday of VOSH-SOUTHEAST, the VOSH regional chapter composed of VOSH-INTERNATIONAL members residing in the states of Alabama, Florida, Mississippi and South Carolina. On this date, the Secretary of State of Florida amended the incorporation papers of VOSH-Florida to officially reflect the change of corporate name of VOSH-Florida to VOSH-SOUTHEAST. The name change was made to reflect earlier decisions of the Boards of Directors of VOSH-International, VOSH-Florida and VOSH-Alabama and the membership of VOSH-South Carolina to form the enlarged SOUTHEAST chapter to more effectively recruit new VOSH members and carry out the mission of VOSH.

Davis Vision Donates Frames

Davis Vision, Inc., a Highmark company, donated over 5,000 frames to VOSH/International in June to benefit their clinic in Managua, Nicaragua. The donation helps the clinic to provide vision care at the lowest possible expense and to provide free eyewear to the poorest patients. In October Davis Vision in addition generously donated another 53,000 frames for utilization by chapters providing eye wear to those in need outside of the United States. They have already been utilized in Honduras, Panama, and Nicaragua.

Contact Max Bruss at maxobrusso23@msn.com for further information.

SUNY Alumni Recognized

Dr. Douglas Weiss '89 and Dr. Victoria Molnar Weiss '89 (VOSH/Virginia) received the Alumni of the Year Award from SUNY for their commitment to public service through their volunteer work in the United States and internationally with VOSH.

VOSH/International
www.vosh.org

VOSH/INTERNATIONAL is a voluntary non-profit organization whose primary goal is to facilitate the provision of vision care worldwide to people who neither can afford nor obtain such care.

VOSH/INTERNATIONAL accomplishes this goal by serving as a coordinating body for affiliated chapters. It provides administrative support of chapter activities. It also provides promotional opportunities to encourage the formation of new chapters and recruitment of new members.

VOSH/INTERNATIONAL is a non-sectarian and non-political organization. Currently there are 33 independent chapters and 24 university-affiliated chapters.

www.VOSH.org

VOSH/INTERNATIONAL
Volunteer Optometric Services to Humanity



OPTOMETRYGIVINGSIGHT

Dr. Ruth McAndrews
310 West Locust St.
Davenport, IA 52803

VOSH OFFICERS

PRESIDENT

Greg Pearl, OD, FVI
7629 Melrose Avenue
Los Angeles, CA 90046
323-651-5646

IMMEDIATE PAST-PRESIDENT

Larry Hookway, OD, FVI
larry@hookwayeyecare.com

DIRECTORS

Mike DeRosier, OD, FVI
dpvc@juno.com

David McPhillips, OD
drmcpcod@aol.com

Bina Patel, OD
patelb@neco.edu

Ellis Potter, OD, FVI
epotter@iolaks.com

James Vaught, OD
jamesvaught@sc.rr.com

OPTOMETRY GIVING SIGHT

Vic Connors, OD
vjconnors@isthmuseye.com

SECRETARY/TREASURER

Charles H. Covington, Sr., FVI
111 Linda Lane
Lake Mary, FL 32746
407-328-5825
ccovington@cfl.rr.com

LEGAL COUNSEL

John Gehrig, Esq.
orlandoeye@earthlink.net

BOARD ADMINISTRATORS

Natalie Venezia, Esq.
ncvenezia@mac.com

Deborah Wright-Demaderas
Deborah@wrightmedia.com

EXECUTIVE DIRECTOR WEBMASTER

Harry Zeltzer, OD, DOS, FFAO, FVI
PO Box 209
Ipswich, MA 01938
978-356-0447
harryzeltzer@comcast.net

NEWSLETTER EDITORS

Todd Fleischer
todd@kansasopectometric.org

Ruth S. McAndrews, OD, FVI
ruthsmca@msn.com

VOSH CHAPTERS & OFFICERS 2010

Canada:

British Columbia(TWECS): Marina Roma-March, OD,
twecs@shaw.ca

Ontario: Kara Peterson, karapetero@hotmail.com

Santa Cruz (Quebec): Joel Ries, Joel.ries@sympatico.ca

Honduras: Ruth Berklings, ruthberklings@yahoo.com

India: Hare Patnaik, harepatnaik@yahoo.com

Netherlands: Imran Kahn, OVshnetherlands@yahoo.com

Nicaragua: Dr. Alejandro Narvaez,
alejandranarvaez@ymail.com

United States:

Arizona: David R. Stacy, OD, pat@drstacey.net

California: Shirley Hong, OD, shongod@gmail.com

Colorado: Jay Greenstein, OD, drjay519@hotmail.com

Connecticut: Matt Blondin, OD, Mblond2@aol.com

Delaware Valley: Christine Smith, RN, O.,
cmsmithod@gmail.com

Florida: Paul Anderson, OD, paulanderson@vosh-florida.org

Illinois: Tracy Matchinski, OD, tmatchin@eyecare.ico.edu

Indiana: Jeff Marshall, OD, VOSH-Indiana@indy.r.com

Iowa: Susan Davis, OD, sdavisod@netins.net

Kansas: Doug Ball, OD, drb@bh1.kscocmail.com and
Diana Carriger, dianacarriger@hotmail.com

Kentucky: Greg Hagedorn, OD, idox@lightpower.net

Michigan: Scott Chenard, ABOC, FNAO,
sachenard@yahoo.com

Minnesota: Bob Boeding, rboeding@q.com

Missouri: Bud Falkenhain, OD, drfalk@fidnet.com

Nebraska: Ellen Weiss, OD,
ellenweiss@millardfamilyeyecare.com

New York: Jorge Won, OD, ojowon@aol.com

Northeast: Carl Sakovits, OD, islanddoc5@aol.com

Northwest: Paul Caletti, pjcaletti@verizon.net

Ohio: Mark David Pifer, OD, pifer@monebellevue.com

ONE (of New England): Lee Lerner, OD,
eyedoclemer@aol.com

Oregon: Ann Slocum-Edmonds, OD, annedmonds@msn.com

Pennsylvania: Lori Sportelli, OD, sportelli@verizon.net

South Carolina: James Vaught, OD, jamesvaught@sc.r.com

South Dakota: Thomas Garrity, OD,
tjgarrity@venturecom.net

Texas Lone Star: Nelson Rivera, OD,
odnelson9@verizon.net

Virginia: Nancy Clark, OD, dnbclark@verizon.net

Wisconsin: Mark Ebben, OD, drebben@sbcglobal.net

Wyoming: Mark Wells, OD, marginwell@aol.com

Chapters Affiliated With Colleges of Optometry:

Argentina: VOSH-University of La Plata, Laura Brusi,
O.D., laubru1881@yahoo.com.ar

Canada: VOSH-University of Waterloo,
vosh@quark.uwaterloo.ca

Ghana: VOSH-KNUST: Mohammed Abdul-Kabir,
kabir265@yahoo.com; VOSH-UCC, Alex Ilechie, OD,
drilechie@yahoo.com

Columbia: VOSH-LaSalle: Roberto Valncia, OD,
institutovision@empresario.com.co

Nigeria: VOSH-UNIBEN, Faustina IDU, OD,
faustikem@yahoo.com; VOSH-ABIA, Ikonne Uche,
OD, drikonne@yahoo.com

Peru: VOSH-SOS, Optometrist Severo Sanchez,
sanchez2102@hotmail.com

United States: Illinois College of Optometry, Indiana U.School of Optometry, Inter-American University of Puerto Rico School of Optometry, Midwestern University, Michigan College of Optometry at Ferris State University, New England College of Optometry, Northeastern State University College of Optometry, NOVA Southeastern University College of Optometry, Ohio State University College of Optometry, Pacific University College of Optometry, Salus University College of Optometry, Southern California College of Optometry, Southern College of Optometry, State University of New York State College of Optometry, University of Alabama at Birmingham School of Optometry, University of California - Berkeley School of Optometry, University of Missouri-St. Louis School of Optometry, University of Houston College of Optometry.