



LIONS CLUBS INTERNATIONAL FOUNDATION INTERNATIONAL ASSISTANCE GRANT REPORT

1. LCIF Grant Number: #12647-24-A
2. Project Title: Quang Tri Vision Care Mission & Establishment of an Eye Care Clinic at the Quang Tri Center for Children with Visual Disabilities, Dong Ha Town, Vietnam
3. Name of applicant or sponsoring club/district/multiple district: District 24-A
4. Name of Host club/district/multiple district: Fairfax Host Lions Club
5. Grant Award Amount: \$10,000.00
6. Date Project Completed: 2-25-2012
7. Describe all project activity and accomplishments

“Breathing in I am aware of my eyes, Breathing out I smile to my eyes. Our eyes are wonderful but we usually take them for granted. Every time we open our eyes, we see thousands of marvelous forms and colors. Those who are blind may feel that if they could recover their sight they would be dwelling in paradise, but we who have good eyes rarely take the time to appreciate that we are already in paradise. If we just take a moment to touch our eyes deeply we will feel real peace and joy”

Thich Nhat Hanh (A Vietnamese monk who is one of the most beloved Buddhist teachers in the West).

Quang Tri Province has a population of 625,800 people and is located in central Vietnam, divided into 9 districts. Quang Tri is one of the poorer provinces in Vietnam. During the American/Vietnam war, it was where the 17th parallel was. The 17th parallel divided the country into North and South. It was where some of the fiercest fighting took place, where the DMZ was located, and where the land is, even today, polluted with the effects of Agent Orange and UXO’s. 15% of the population lives under the poverty line (monthly



household income of less than \$15 USD). The estimated number of blind and low vision residents (adult and child) is 6,000-10,000 and the major eye related diseases and medical problems are glaucoma, cataracts, and trachoma.

Global Community Service Foundation (GCSF) has been working in Quang Tri Province for over 10 years assisting individuals with disabilities, especially visually impaired and hearing impaired. Currently, GCSF is leading efforts to expand their activities to reach those in need in the area with a focus on the development of a center in Dong Ha Town for children with visual disabilities.

The Fairfax Host Lions Club teamed with GCSF for this LCIF IAG to help support these development objectives and initiated community outreach providing eye examinations, starter glasses and recycled eyeglasses from the Lions Falls Church Recycle Center to those in need in Ho Chi Minh City and in the Quang Tri catchment area between Feb 15 to Feb 24, 2012, at 4 specific locations to include: Charitable Home for the Elderly Homeless Women, in Ho Chi Minh City (HCMC), Vinh-Linh's Blind Center, Quang Tri, Khe-Sanh Elementary School, Quang Tri, and the Huong Hoa Association for the Blind, Quang Tri.

In addition to conducting these outreach missions, the team also visited our in-country partners, The American Eye Center (<http://www.americaneyecentervn.com>), in Ho Chi Minh City (Saigon) who provided diopter demographic data used in selecting the range of starter and recycled eye glasses for the areas we would be working with in Quang Tri Province, and the National Institute of Ophthalmology in Hanoi (<http://www.vnio.vn>) who LCIF has supported for a number of years.

We also visited the GCSF School for children with visual disabilities where we planted approximately 1,500 trees and bushes in support of President Tam's Global Tree Planting Initiative. The results for each of these locations follow below.

The Lions' team consisted of Council Chair Dennis Brining and his wife Lion Linda (in spirit), District 24-A DG Dennis Kelly and wife, Lion Cheryl, Lion Marcia Selva, President of GCSF, Dr. Anh-Thu Phan (Optometrist), former Lion Suzanne Tolson, Director of EMS Programs at Rappahannock Community College, and Lion Ray Guin from District 24-B a certified Optician.



Prior to departing, the Lion's team underwent extensive train the "trainer training" in Fairfax, VA on eye examination procedures and equipment (Focometer and Auto- Refractor) use, by our partners, Dr. J. Dollack of Visual Compassion, of Tomball, Texas (<http://www.infocusonline.org.html>) and Dr. Anh-Thu Phan of Fairfax, VA. Equipment purchased for use on this mission is listed in the financial section of the report and in Appendix A. In addition to what we purchased, we

also took 1100 pairs of recycled eyeglasses from our Lions Falls Church Recycle Center to use in country. We sincerely appreciate the support provided by the Recycle Center on this project.

We were supported by numerous GCSF (<http://globalcommunityservice.org/>) staff and non-staff members in country to include: Max Talcott, Vietnam Country Director, Nguyen Xuan Tam, Central Vietnam Representative, Vo Thi Minh Nguyet, Administration Manager, Hoang Tuan Anh, Project Officer, Truong Thi Hai Ha, interpreter, Vo Anh Tri, interpreter, Nguyen Thai Thai Anh, Student Nurse and Nguyen Thi Hang, Student Nurse.

All of our ground support, transportation, and lodging arrangements were handled by GCSF and the operations were flawless. Without their help and support, this Mission would not have been possible. Their long term knowledge of the local environment and contacts at all levels were critical to the success of the Mission.

We were also supported by the Ministry of Foreign Affairs, Education and Ministry of Health personnel, Doctors from the Quang Tri Medical School, Medical Centers in Huong Hoa, and Vinh Linh, and Dr. Ha, our local ophthalmologist partner (who has been trained by GCSF, the Illinois Association of Ophthalmology and Alcon Industries) who has a clinic in Dong Ha Town.

A team of eight senior Alumni nurses and two senior administrators from the University of Virginia also joined us to conduct health assessments, provide deworming pills, soap and dispense other medicines to those at the Vinh-Linh Blind Center and the Khe-Sanh Elementary School in Quang Tri. Nurses included: Susan J. Goode, Alise Martinez, Rebecca Treakle, Catherine Zuver, Jeni Hauver, Alberta Kimm Nhien Tran, Linda L. Keyser, Thomas Sullivan, Kevin Todd Conley, and Carrie N. Armstrong.



The timeline of daily activities follows

Day 1: Wednesday, Feb 15, 2012 Fly from Washington, DC to Soul Korea

Day 2: Thursday, Feb 16, 2012 Arrive in Soul and Fly to Ho Chi Minh City, Vietnam

Day 3: Friday, Ho Chi Minh City, Feb 17, 2012

The team visited the American Eye Center (<http://www.americaneyecentervn.com>) which is run by one of our partners in country, Dr. Nam Tran Pham, MD in Ho Chi Minh City. The center is a “state of the art”, facility and offers a host of world class services with the latest equipment for the early detection and treatment of important eye

conditions such as glaucoma, diabetic eye disease and macular degeneration to mention a few. Their partners include: The George Washington University School of Medicine and Health Sciences, Zeiss, National Eye Institute, National Institutes of Health, Alcon, Hawaiian Eye Foundation, Mount Sinai School of Medicine and UC Davis.

Dr. Pham will be working with us on expanding the eye care services in Dong Ha as this current project continues to expand.

She is also interested in establishing an eye bank in HCMC and has been asked by the HCMC Medical University and the HCMC Eye Hospital about starting one in this area. She has Sightlife as a partner and is interested in working with LCIF as well. She has developed the attached Business Plan and Project Proposal for our consideration.



The team visited the Charity Clinic for Aged Women run by Father John and did a mini eye mission. Patients were mostly women with ages ranging from 18 to 98 years old.



The primary conditions found at this site were hyperopia, astigmatism, presbyopia, and cataracts. There were a few patients who were pseudophakic (they already had cataract surgery and received intra-ocular implants.) Reading glasses were a great help at this site.



In addition, many patients at this site need cataract extractions and capsulotomy in the near future. The team serviced approximately 50 individuals and distributed about 30 pairs of glasses.

Primary medical conditions found at this site were hypertension, gastrointestinal disorders, and variety of skin lesions.



Day 4, Sunday Feb 18, 2012: Fly from HCMC to Hue and drive from Hue to Dong Ha, Quang Tri

The Team visited Dr. Ha's Dong Ha Eye care Center to understand the capabilities of and evaluate the facilities for possible future efforts. In our original proposal to LCIF we were thinking about using the facility at the Center for children with visual disabilities as the hub of our vision care services. However, once the team visited the site, it was deemed to be too large and too far out of town to be effective.

Consequently, we have decided to use the Dong Ha Eye care Center's new building as the hub and help expand the capabilities of Dr. Ha's Center through additional LCIF grant requests and other donors, like Orbis International, etc. The goal of these future projects will be to address eye care from the top down (Dong Ha Town) and bottom up (rural villages). We will be following a development model created by Visual Compassion that is designed to bring the central and rural communities together in a process they call a "Vision Wheel".

Using the Center as the hub, trained medical personnel utilizing outreach programs can expand to the 8 outlying districts in Quang Tri as well as the 3500 rural villages on a rotational basis. The continual outreach program would include eye exams, basic health and hygiene programs and referrals as necessary. By using this approach, the entire province of Quang Tri, and 625,800 people will have access to a form of eye care and education that does not exist today.

The Dong Ha Eye Care Center was established in 1989 as a separate entity. It then was merged into the Social Disease Center in 1988. Currently, it has a staff of 7 eye care focused personnel, including 3 ophthalmologists, 1 physician, 1 anesthesiologist, and 2 nurses.

The Center's sole objective is blindness prevention. To reach that objective, it provides (1) community education programs on eye care, (2) treatments to patients, (3) training and supervision of technical staff at lower levels (district hospitals) and, (4) information management on eye situations in Quang Tri province.



In Quang Tri province, the main eye problems are cataract and refractory. In 2011, the Center provided successful examination to 2,886 patients on 9 districts in Quang Tri. 1,240 patients were provided with cataract surgery, among which 440 cases were conducted in Phaco surgery techniques at the Center. Most of the surgeries have been for impoverished people and are free of charge.

Currently, the Eye Center has a limitation on the number of patients it can treat due to having only the following equipment: 1 Phaco surgery machine (2005), 1 tonometer (2005), 2 Halogen Ophthalmoscope (2002), 1 slit lamp (2001), 1 auto refractor

(2001). In addition, the current building has only 2 patient rooms, which make it hard for them to accommodate more than 10 patients at a time.

Fortunately, the Center was recently granted an old building by the government to use



as an Eye Clinic. The new building, if properly equipped, has three times the capacity of the current one and can accommodate up to 50 in-patient exams at a time and will extend the time of post-surgery recovery stay.

In 2012, the Center's objectives are to provide treatment to 3,700 cases of trachoma, 1,500 cases of trachoma side-effect, and conduct operations to treat 300 cases of pterygium, 100 cases of Glaucoma, 600 cases of cataract, and organize 8 training classes at the district level (outreach).

The vision of the Eye Center and GCSF in the next 3 years is (1) to upgrade the current unit into the Provincial Eye Center with higher capacity of staff and sufficient up-to-date equipment and with 50 beds, (2) to reach 1,000 cataract surgeries per year, and (3) to set up strong outreach programs to train district – level capacity as noted above in the vision wheel concept.

Statistics for Eye care Activities for Quang Tri Province in 2011 are listed below

STATISTICS FOR EYECARE ACTIVITIES FOR QUANG TRI PROVINCE IN 2011

Activities/District	Hai Lang	Trieu Phong	Quang Tri town	Dong Ha	Gio Linh	Vinh Linh	Cam Lo	Dakrong	Huong Hoa	Eye Center	Total
General examination	2886	2642	3663	6123	3720	6276	1453	1457	2482	3127	33,829
Trachoma	87	36	71	210	85	73	34	80	38	46	760
Trachoma complications	53	18	39	74	17	24	15	15	14	24	293
Refractory	165	57	98	455	67	106	46	27	41	315	1,377
Out-patients	42	83	559	74	92	108	52	45	0	785	1,840
Trachoma treatment	174	36	71	210	85	61	34	80	38	46	835
In-patients	54	106	25	64	32	68	52	48	42	369	860
Cataracts	124	124	32	46	158	267	53	173	58	587	1,622
Blind due to Cataracts	70	97	26	32	78	186	32	63	37	463	1,084
Cataract surgery	0	100	0	0	0	119	0	49	21	551	840
Intraocular lens placement	0	98	0	0	0	116	0	47	21	444	726
Surgery for 1 eye	0	75	0	0	0	84	0	32	14	266	471
Surgery for 2 eyes	0	25	0	0	0	35	0	17	7	285	369
Glaucoma	0	23	6	0	6	37	0	12	14	76	174
Surgery	0	19	0	0	0	23	0	6	6	57	111
Cherry eyes	94	142	57	0	84	164	24	62	53	367	1,047
Surgery	23	32	0	0	24	44	6	3	24	125	281
Entropion surgery	32	14	12	0	13	28	2	7	6	28	142
Surgery	12	9	0	0	1	14	0	3	3	16	58
Major surgery	0	0	0	0	0	0	0	0	0	3	3
Minor surgery	52	276	35	0	0	286	0	32	0	873	1,554
Glasses delivered	0	0	0	0	0	0	0	0	0	6	6
Vitamin A used	0	0	500	950	500	500	0	527	0	500	3,477
Eye dry syndrom (kids)	0	0	0	0	0	0	0	0	0	0	0
Conjunctivitis	342	423	254	633	217	732	341	423	325	875	4,565
Number of communes covered	12	14	5	9	9	22	7	14	6	0	98
Phaco operation	440										
Back Capsule Laser surgery	125										

Tháng 12 năm 2011
Hoàng Thị Thu Hà

In the past, two NGOs partnered with the Eye Center. Fred Hollows Foundation (FHF) helped support the patient treatment fee and Orbis International has approached the Eye Center for a refractory room proposal to build eyeglasses. FHF is withdrawing from the partnership after this year and Orbis is only interested in the refractory section. A list of finishing lab equipment to generate eye glasses is listed below. The Center is also in need of surgery equipment, capacity building, outreach program funding, and infrastructure upgrading. The local government will be willing to put more staff into the facility as demands for services rise and the facility is upgraded. A list of needed equipment to upgrade the Center's capabilities is presented below. The Fairfax Host Lions Club intends to team with GCSF again and submit the proper LCIF Grant to help the Center realize its full potential in 2012/13 to reach those in need.

List of requested equipment to upgrade the Center's capabilities

No	Equipment	Brand	Country	Price in USD	Purpose of use
1	Monitor	Nidex	Japan	10,000	Tracking on-going and post-surgery indicators
2	Operation Microscope	Scan Optic	Japan	6,000	Cataract, Glaucoma, Cherry eyes surgery in outreach program
3	TV + DVD reader + sound system	LG	Vietnam	700	Blindness Prevention Communication Program
4	Eye surgery kit	Medelec	India	800	Cataract, Glaucoma surgery
	Total			17,500	

Finishing Lab Equipment Estimate for Making Eye Glasses

Quantity	Item	Approximate USA Cost/Item	Total
2	Patternless Edgers w/Tracers	\$ 30,000.00	\$60,000.00
2	Lensometers w/Lens Dotting Capability	\$1,200.00	\$2,400.00
2	Pupilometers	\$750.00	\$1,500.00
	Hand Tools		\$1,500.00
	Lens Grooving Machine		\$1,500.00
2	Diamond-Wheel Handstones	\$600.00	\$1,200.00
	TOTAL:		\$68,100.00
	2 nd Part Stock Finished Lens & Lens Cabinet for them:		
	5,000 Pair	\$3.00	\$15,000.00
5	Lens Cabinets	\$500.00	\$2,500.00
	TOTAL:		\$17,500.00



In the evening, we had dinner with members of the UV Team, GCSF Staff, Dr. Ha from the local Eye Clinic, Professors from the Quang Tri Medical School, and representatives from the Quang Tri Department of Health and Department of Foreign Affairs. After dinner, the team mobilized and prepared for the next day at the Vinh Linh Blind Center.

Day 5, Feb 19, 2012 Quang Tri Province-Vinh Linh Blind Center

The Vinh Linh Blind Center serves a population of 90,000 residents. There is an estimated number of blind in the district of approximately 350 with some 300 registered at the Center. The Center produces income by making toothpicks, brooms, incense, and baskets along with providing therapeutic massage services.



Approximately 125 patients were seen at this site with ages ranging from 6 to 80 years old. The majority of the patients were presbyopic.

The main cause of blindness at this site

was trauma and injuries due to land mines and weapons during the VN war. Secondary cause of blindness at this site was childhood diseases and infections, such as measles. There also were untreated congenital cataracts and advanced glaucoma. Many patients at this site were scheduled to have cataract evaluation and surgeries at the eye clinic in Dong Ha. General refractive errors included myopia, hyperopia, astigmatism, and presbyopia.



At the end of the day, CC Dennis awarded a \$1,000 grant from the Fairfax Host Lions Club for

helping build the business of making baskets to generate revenue for the Center to the Director.



In addition, the Director was also presented a Lions Pin and we put the LCI Logo up in the entry way of the facility for all to see.



We were joined at this location by the UVA Nurse team, who conducted general health evaluations and dispensed various medicines during the course of the day. A list of these drugs is noted below.



List of Medicines dispensed by the UVA Nurses during the Lions Mission

Name of medicines	Unit	Quantity	Price per unit	Total price	Remark
Cephadroxyl 500mg	Capsule	1000	2000	2000000	Antibiotics
Amoxillin 250mg	Package	200	1500	300000	Antibiotics
Omeprazol 20mg	Capsule	200	2400	480000	Stomach
Pamin 325mg	Package	200	1200	240000	Body temperature reduction for children
Paracetamol 500mg	Capsule	300	1000	300000	body temperature reduction for adults
Desilogel	Capsule	300	1200	360000	Flu
Melocicam 7,5mg	Capsule	200	1500	300000	Inflammation prevention and painkilling

Prednisolon 5mg	Capsule	400	500	200000	Inflammation prevention and painkilling
Cetirizin 10mg	Capsule	200	1500	300000	Allergy
Chlopheniramin 4mg	Capsule	500	1000	500000	Allergy
Amlodipin 5mg	Capsule	200	1900	380000	Blood pressure control
Fubenzon 500mg	Capsule	100	1000	100000	Worm
Aminvita	Capsule	1000	1000	1000000	Supplement
Vitamin 3B	Capsule	1000	1000	1000000	vitamin
Vitamin C 500mg	Capsule	1000	1000	1000000	vitamin
Flucin	Tube	30	9000	270000	Skin inflammation
Ketocol	Tube	20	1500	30000	Dermatophyte
Natriclorua 0,9%	Phial	50	1500	75000	eye drop, nose, cleaning
Biogrow	Phial	50	35000	1750000	Supplemental syrup for children
Soap	bar	400	10000	4000000	For sanitation
				14,585,000	
				(\$700.00)	

Day 6, Wednesday Feb 20, 2012 Quang Tri Province- Khe Sanh Primary School

The Khe Sanh Primary School, serves 200 students. 15% of the student's families live below the poverty line and 90% of the students are ethnic minorities (Pako and Van Kieu Hill Tribes). A total of 151 patients received care at this site. The children's general visual health is good.



Most of them are mildly hyperopic so they can compensate their visual needs by themselves. However, for those with prominent astigmatism and anisometropia, they need properly made prescription

glasses. Binocular disorders such as accommodation insufficiency, convergence insufficiency, and strabismus with suppression also exist in this group. These conditions need to be addressed to help the children in their perceptual and learning



development. Vision therapy training programs can be very helpful for this population. Each child going through an evaluation received a pair of sun glasses as noted below.



Systemically, many of the children were reported to have chronic bronchitis, and sinuses.



Myopia, hyperopia, astigmatism, and

presbyopia were common in the adult population at this site. Many of the patients also have pinguecula and are in need of UV protection.

We were joined at this location by the UVA Nurse team, who conducted general health evaluations and dispensed various medicines during the course of the day as noted above in the Vinh Linh Blind Section.

At the end of the Mission, CC Dennis presented a Lions Pin to both the Principal and the minder from the Department of Foreign affairs, and we put the LCI logo up on the building for all to see.

Day 7, Thursday Feb 21, 2012 Quang Tri Province- Huong Hoa Blind Association Clinic

The Huong Hoa Blind Association serves a population of 72,000 residents, with an estimated number of blind in the district of 491. Number of registered members is 290 members and the major income generation activities at the center include making toothpicks, brooms, incense and providing therapeutic massage services.



Approximately 76 patients attended the eye screenings. Age group ranges from 5 to 81 years old. Again, the primary cause of blindness was injuries and trauma during the war. There was also congenital blindness reported without specifics. Eye pains and headaches were common chief complaints. Blepharitis and dry eyes were also prominent in this population.



Patients with cataracts, glaucoma and ocular hypertensions were referred for further care at Huong Hoa hospital. Refractive errors included hyperopia, myopia, astigmatism, and presbyopia which were correctable with prescription glasses.

At the end of the eye screenings, DG Dennis Kelly and CC Dennis Brining, presented the Director with a Lions pin and the LCI Logo which went on a cabinet in his office for all to see.

DG Dennis of the Springfield Franconia Host Lions also committed to fund some badly needed repairs on one of the walls in the Center so that it was safe for the participants.



In the afternoon the team visited the GCSF Center for Children with Visual Disabilities to help finish planting some 1500 trees and bushes to support President Tam's Global Tree Planting Initiative and review the facilities capabilities. CC Dennis Brining



donated \$500 of his personal funds and DG Dennis Kelly received a \$500 donation from the Springfield Franconia Host Lions to support this effort. As noted above in the Dong Ha Eye Clinic section, after seeing the surrounding buildings and their location, it was determined that this facility was much too large for what was originally envisioned and not in a centralized location to suit the needs of the local folks needing eye care.

Day 8, Saturday Feb 22, 2012 Quang Tri Province- Drive from Dong Ha to Hue and Fly from Hue to Hanoi

Had a morning wrap up session on results of the overall mission and caught a flight to Hanoi for meeting with the Vietnam Institute of Ophthalmology on Feb 23rd.

Day 9, Thursday, Feb 23, 2012 Hanoi- Viet Nam Institute of Ophthalmology (VNIO)

The VNIO is a tertiary eye care institute consisting of community ophthalmology, pediatric ophthalmology, trauma, retina, glaucoma, corneal, refraction, low vision, eye bank, laser, training departments and foreign relations office. VNIO oversees provincial eye centers throughout the country, and is the main facilitator for the development of a national plan. The program covers a population of 3.4 million in Hanoi and 84 million nationally and aims to become a national training center.



The team paid a courtesy visit to the Viet Nam Institute of Ophthalmology and met with Dr. Cung Hong Son, Deputy Director, VNIO and Director –Center of Training and Community Direction and his staff. We reviewed the accomplishments of the Mission starting in HCMC, and at each of our sites.



We discussed the concept of strategic planning and how the Lions might be able to support the Vietnam National Initiative toward blindness prevention and treatment as our understanding of the country needs increase. He was most appreciative of our visit, and most importantly our help in preventing blindness in Vietnam during this Mission to the underserved communities in Central Vietnam and our previous efforts as LCI.

It is interesting to note that the room we met in had a picture of Helen Keller on the wall next to a plaque from LCI celebrating LCI's long partnership with the VNIO. He has promised to send CC Dennis the master strategic plan for our use in the future. If and when we receive it, it will be sent along to LCI for consideration.

We also discussed issues related to the current eye bank and visited the facility and the eye hospital. The current eye bank opened in 2005 with Orbis International as the main donor of corneas. In 2009, Orbis suspended its contribution due to economic reasons. The Eye Bank now has to rely on in country donations for corneas.



Based on data collected in 2010-2011, they only received around 60 corneas and there is a waiting list of some 16,000 patients at this point. Evidently the difficulty of receiving corneas is the traditional practices that are deeply ingrained in the culture of Vietnam. Family members want to see their love ones as a complete person even when they pass away. The corneas, the eyes are a very sacred part of a person, and many cannot bear to part with this or

other parts of their bodies.

To address this current problem, the Eye Bank has mounted a major education program with the Red Cross. The Eye Bank and Red Cross will collaborate with hospitals, schools and healthcare sectors to bring awareness to this issue among citizens so as to increase people's openness to cornea and tissue donation. Only time will tell if this will work.

At the end of our meeting, CC Dennis presented Dr. Cung our Lions Pin commemorating our visit.



Day 10, Friday, Feb 24, 2012: Main part of Team returns to the US and CC Dennis and Lion Marcia fly on to Yangon, Myanmar to do country needs assessment for possible future LCIF projects.

8. What was the situation in the community/country before the project started?

Quang Tri Province has a population of 625,800 people and is located in central Vietnam, divided into 9 districts. Quang Tri is one of the poorer underserved provinces in Vietnam. During the American/Vietnam war it was on the 17th parallel. The 17th parallel divided the country into North and South.

It was where some of the fiercest fighting took place, where the DMZ was located, and where the land is, even today, polluted with the effects of Agent Orange and UXO's. 15% of the population lives under the poverty line (monthly household income of less than \$15 USD). The estimated number of blind and low vision residents (adult and child) is 6,000-10,000 and the major eye related diseases and medical problems are glaucoma, cataracts, and trachoma. The area is much underserved for both health and eye services as noted above.

9. How has this project affected the people in the host community or country? How has the project helped the community to become more aware of the Lions work and efforts within the community?

The effort had a profound impact on the community served given the lack of health and vision services available in Quang Tri Province. It is important to note that no one we talked to at any of the sites serviced by the team could ever remember any other service organization doing what the Lions had just completed. Many of the patients seen by our team were referred to other Doctors in the area for further help. This would not have happened without the Lions effort. At each location, CC Dennis gave a Lions Pin to the senior official at the site and the local government agencies in commemoration of our working together. All of those receiving our Pin were very proud to have gotten it and in 4 of the sites we serviced; the LCI Logo was prominently applied and displayed for the future. It was a great honor to serve people whose dignity and spirit rose above their circumstances. The professionalism and dedication of our team showed and the local people we touched will likely remember the Lions for a long time to come. We believe that our efforts will help build on this from previous Lions efforts in country and help bring Vietnam closer to joining the Association in the future.

10. Please send action photographs of the project and those individuals benefiting from the project.

The team took over 1,000 photographs which are included in a storage device at the back of this report, and Storm Warriors, (www.stormwarriors.org) a 501 (C) (3) NFP organization, filmed and photographed all of the activities of the teams during the course of the entire Mission. Copies of this material have been requested for LCI PR to review for possible use in the future.



11. Where applicable, describe what plans are in place to provide continued or follow up services to the beneficiaries or host community at the conclusion of this LCIF funded project?

The majority of the objectives set forth in our original proposal were accomplished, and we laid the framework to establish a sustainable community based eye care program in Quang Tri Province by establishing a closer relationship with Dr. Ha and her colleagues in the area. In addition, at each of the eye screening locations served, the Lions team helped train the local Medical School volunteers on our approach and on the use of equipment that was purchased for the Mission.



At the end of the Mission, all the equipment and leftover glasses were given to our partner, GCSF, to maintain and to work on a transition plan with Dr. Ha to move the materials to her facility, which will ultimately serve as the central eye health hub in the district. The GCSF staff was also trained on the use of the Focometer and they will serve as trainers for their use in rural areas in the future by Dr. Ha and her support staff.

In addition, a record and recording system was also established for each patient seen during the course of the entire mission. These records are on file at the GCSF office in Dong Ha and will also be transferred to Dr. Ha's office in the near future once she moves into her new facility. Based on the information collected on this mission, the FHLC will be putting forward at least one or perhaps two new Grant requests to help Dr. Ha and GCSF achieve their vision for Quang Tri Province.

12. Financials for the Project.

The final Financials/expenses for the project are summarized below. All funds received from LCIF for this grant were expended and were consistent with that approved and presented in our original grant request.

Project Financials

SOURCES	AMOUNT	ITEMS/EQUIPMENT	AMOUNT
LCI	\$10,000.00	IAG	
Dennis & Linda Brining	\$500.00	750 trees & 1 bench	\$500.00
Springfield Franconia Host Lions Club	\$500.00	750 trees & 1 bench	\$500.00
AgentLove	\$300.00	Eye Glasses	
Dennis Brining	\$42.50	LCI Logos	\$42.50
Global Spectrum Travel (GS)	\$586.49	Courtesy Discount	
Mission Participants Travel	\$22,605.90	GS Air, Hotels, In-country transportation & visas	\$22,605.90
		GCSF: Final bill for, local staff; permits; additional in-country expenses	\$1183.00
		GCSF: Initial bill for GCSF in-country staff & medical support & payments	\$2008.70
		GCSF: Visual Compassion for training, transportation & equipment	\$6808.30
		Visual Compassion paid by GCSF for: bag check & airport parking	\$84.00
		Missions items purchased by Dr. Phan from Eye Supply & OcuSoft	\$435.40
		Additional items donated by Dr. Phan	\$54.35
		Additional items for Mission purchased in US	\$312.74
TOTAL:	\$34,534.89		\$34,534.89

13. How has LCIF's involvement with the project been publicized?

Articles on the project will be published in the FHLC newsletter and in the District 24-A Lions Reporter along with running an article on what we accomplished on the PR Web site. It has also been briefed to the MD-24 Council of Governors in VA. Footage and photos taken have been, or will be supplied to LCIF for PR purposes in the near future once they are obtained from Storm Warriors as requested. The project will also be highlighted in a formal presentation on LCIF Grants at the upcoming MD 24 State Convention in May for all to see. Given all of the dignitaries we met with in Vietnam along the way from HCMC, through Central Vietnam and finally in Hanoi, there was a great deal of word of mouth news about the fact that the Lions had landed.

14. Include photographs/documentation acknowledging LCIF's involvement with the project.

During the course of our Mission, we left markers of LCI and LCIF's involvement along the length of Vietnam which included, Lions pins presented to all dignitaries encountered, LCI Logo's affixed to 4 of the major buildings we visited during the trip and a special dedication on a bench at the Children's School for the Disabled to CC Dennis

Brining's wife Lion Linda, who was not on the trip but supported it from start to finish. Her mother was diagnosed with stage 4 cancer one week before departing and she stayed behind to be with her mother. She was with the team in Spirit all along the way.






Signature Endorsement:

In signing this document, you certify that the information contained in this report submitted to LCIF details an accurate and factual accounting of the Lions project carried out with LCIF grant funds. You further understand that LCIF will contact you with any questions regarding this final report.

Grant Administrator:

Name: Dennis W. Kelly, III

Signature:



Title: District Governor 24-A

Date: 3-15-2012

Phone Number: Cell-202-251-6865

Email: cad123@verizon.net

Project Coordinator:

Name: Dennis Brining

Signature:



Title: MD 24 Council Chair

Date: 3-15-2012

Phone Number: Cell-703-503-8019

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