



CARIBBEAN COUNCIL FOR THE BLIND & VISUALLY IMPAIRED
“Celebrating more than 56 years of service to the Caribbean - 1967-2024”

Our Strategic and Program Priorities – 2023 to 2030

- (I) Theme: Vision for everyone...inclusive services for people living with severe vision loss and other disability.
- (II) During more than 27 international (online) meetings; these priorities were advanced by people with: vision loss; The Caribbean Blindness Services Forum; members of the Interim Academic Committee; CCB’s eye care partners and member organizations of the Council; and approved by the Executive Committee and general membership in 2023.
- (III) The priorities assume continuation of all existing programs, unless discontinued by the CEO.
- (IV) They will inform: Events, projects or programs of CCB, its members and partners.
- (V) These priorities are the main agenda for the CEO’s meetings and conversations with members and partners.
- (VI) From time to time, the Executive Committee, may revise this scheme of works.

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1.. Recognitions, promotions and revenue expansion – Building on the Annual James Alves Awards.

More than 112 years ago (starting in 1911) James Augustus Alves (a blind Afro-Guyanese) travelled throughout the Caribbean, by boats and horse-drawn carriage, encouraging colonial authorities (in each territory) to organize services for blind people in the English-speaking territories. We will continue to honor his heroic effort by expanding the annual James Alves Award for outstanding service to people with vision loss or blindness; including online gala presentation, 2024 and beyond. Arising from our COVID experiences, this event will go forward as follows:

- 1.1 January - Executive appoints standing committee to coordinate awards and online galas.
- 1.2 January – Secretariat and Executive appoint Producer for James Alves awards and other online events.
- 1.3 End of January - Secretariat invites nominations for James Alves awardees.
- 1.4 February to March - Member organizations and Secretariat of CCB nominate awardees.
- 1.5 March – Nominating members name 1media specialist to regional committee Coordinating awards and galas.
 - 1.5.1 Nominated media specialists should come from national awards committees.
- 1.6 April – Regional implementation Committee updates Executive and membership.
- 1.7 April to June - The Secretariat designs and mints awards, delivering them to members.
- 1.8 May to June - Participating members prepping for awards ceremony confirm commitment from nationally recognized artists for 2 or 3 presentations, could be a performance video.
- 1.9 July to August- National awards presented, using agreed set and recording standard.
- 1.10 August (2024) Establish CCB's: James Alves YouTube channel & Web and Social Media funding network.
- 1.11 September, Secretariat receives edited versions of all videos of national awards ceremony.
- 1.12 October, Videos of national awards uploaded to CCB's James Alves channel.
- 1.13 December, CCB presents a 90-minute social media special.
- 1.14 Sound for Sight introduced as an online fundraiser, using structures similar to the James Alves Awards & Gala.
- 1.15 A program of online fundraising actions and events developed and delivered.
- 1.16 The awards and funding cycle resumes in January of each year.

2. Eye Health & Caribbean Vision for Everyone – Building on Vision 2020, Right to Sight.

2.1 Vision for Everyone, a global initiative, replacing Vision 2020 (Right to sight) which expired in 2020.

This introduces, CCB-Eye Care Caribbean's strategic priorities toward fulfilment of the global commitment to vision for all and consistent with:

(I). UN Resolution A/75/L.108 "Vision for Everyone: accelerating action to achieve the Sustainable Development Goals"

(II). WHA resolution A74/9 Integrated people-centered eye care including preventable vision impairment and blindness. To those ends, the Executive Committee approved the following as CCB's main strategic priorities in advancing vision for Everyone, in the Caribbean.

2.2 Caribbean Vision for Everyone – Quarterly Forum: As a follow-on to Vision 2020 (Right to Sight)

CCB proposes the launch of Caribbean Vision for Everyone (a 3-monthly online, consultative meeting of Caribbean and international eye health partners) including: Ministries of Health, PAHO-WHO, Caribbean Public Health Agency; Caribbean Eye Health Alliance; Organizations of Ophthalmologist and Optometrists; Institutions training Ophthalmologist, Optometrists and other international partners in eye health.

2.2.1 Purpose of Caribbean Vision for Everyone:

Bring Governments and civil society interests together, to facilitate development, implementation and monitoring of national and regional plans to achieve the goals of:

I) UN. Resolution A/75/L.108 "Vision for Everyone: accelerating action to achieve the Sustainable Development Goals" and

II) WHA resolution A74/9 Integrated people-centered eye care including preventable vision impairment and blindness.

2.2.2 Secretariat Services to Caribbean Vision for Everyone:

CCB-Eye Care Caribbean, provided secretariat services to the delivery of Vision 2020 (The Right to Sight) 2000 to 2020. The Council will extend the same level of support to the work of Caribbean Vision for everyone.

2.2.3 Chair of Caribbean Vision for Everyone - It is anticipated that:

2.2.3.1 Meetings will be held online, at 3-month intervals, using CCB's ZOOM platform.

2.2.3.2 Meetings will be chaired by Ministers of Health (or their representatives) on a rotating basis.

2.2.4 Technical expertise:

2.2.4.1 In order to properly plan for and achieve the national and regional goals of: UN Resolution A/75/L.108 "Vision for Everyone and WHA resolution A74/9 Integrated people-centered eye care; The deliberations of Caribbean Vision for Everyone, must include and benefit from the well-developed talent pools residing in: PAHO-WHO, In Ministries of Health and among public health and ophthalmic professionals across CARICOM.

2.2.4.2 PAHO-WHO's Prevention of Blindness Advisor (or equivalent expert in PAHO-WHO) will be invited to guide and help draft development of successive 5-year Caribbean programs to achieve vision for all.

2.2.4.3 We hope that Permanent Secretaries and Chief Medical Officers, will delegate experts from their Health Planning and Epidemiology units; To share their national plans, while contributing to a 5-year plan toward Caribbean Vision for Everyone.

2.2.4.5 Leaders in the fields of ophthalmic science and public health, will be invited to speak at meetings.

2.2.4.6 Successive meetings of the forum will receive reports from technical workgroups or individual experts designated by meetings of Caribbean Vision for All.

2.3 Regional eye health advocacy - Encouraging early: Detection, intervention and treatment.

2.3.1 Use of eye health data - Support research to advance knowledge recovery and knowledge discovery... Using epidemiological data in: Patient education, public awareness and evidence-based intervention.

2.3.2 Maintain regional focus on eye health and vision care - Use relevant UN days to drive media and community actions to improve awareness of specific ocular conditions. E.G Glaucoma and Diabetic Retinopathy.

2.4 Advancement of service delivery in eye care - Promote and support development of programs to: detect, diagnose, and treat ocular conditions which cause: Refractive errors, vision loss and blindness. by assuring quality, infrastructure, pharmaceutical inputs and technology. Encourage and support:

2.4.1 Allocation of adequate building space to eye care.

2.4.2 Provision and maintenance of appropriate and relevant equipment and instruments.

2.4.3 Delivery of accessible, affordable and available pharmaceuticals.

2.4.4 Use appropriate technologies to strengthen delivery of eye health services at: Primary, secondary and tertiary levels.

2.4.5 Give specific and sustained attention to the use of tele-medicine as an option in the treatment of eye diseases in urban and rural settings across the Caribbean.

2.5 Human Resource Development:

There is a grave shortages of: Ophthalmologists, Optometrists, eye-trained Nurses, Ophthalmic Technicians and Ophthalmic Assistants, across CARICOM

2.5.1 Launch of 3rd Optometry training program in the Caribbean - Jamaica:

To approach the standard of primary eye care available in: Canada, The UK or the US; the region needs 1 (one) Optometrist per 5,000 (five thousand) people; or approximately 1,400 (one thousand four hundred) to serve the region's 7-million inhabitants. A crude estimate by this author, suggests there are less than 275 active Optometrists serving the Caribbean.

2.5.1.1 Delivering the 3rd Optometry Training Program in the Caribbean – Jamaica:

The Executive Committee notes and affirms the work of CCB-Eye Care Caribbean, in partnering with The All-American Institute for Medical Sciences, to develop and deliver this program. The BSc in Optometry commenced in September of 2022.

2.5.1.2 Jamaica has less than 20 Optometrists serving a population of 2.9 million- Compared to 1 Optometrist to 5,000 people in Canada and the United Kingdom. Jamaica needs to train at least, 540 new Optometrist, to achieve optimal delivery capabilities. The Jamaica program is the 3rd optometry degree being offered in the Caribbean, with the facilitation of CCB and its: National, regional and international partners. The others being: UWI St. Agustin campus and the University of Guyana, Georgetown. The Committee affirms CCB's intent to develop similar partnerships in: The Eastern Caribbean, Belize and the Bahamas.

2.5.1.3 Reform of the legal architecture, regulating the eye health sector, starting with existing statutes guiding the practice of Optometry, using the UK's General Optical Council module) to guide:

- A) Transparency in the registration process.
- B) Use of Internet (by All MOH(s) to publish: Policies, programs, processing of applications and approvals.
- C) Prevent barriers to: registration and entry of new Optometrists to the trade.
- D) Authorize optometrists to use diagnostic and other primary level medicines in their practice.
- E) Empower optometrists to use repeat prescriptions in treating glaucoma.
- F) Allow Optometrists to treat Diabetic Retinopathy (using laser therapy) if they complete UK certification program.
- G) Permit Optometrists to assist with post-surgical management of cataracts, post TASS.

2.5.2 Development of Ophthalmology Residency Programs in: The OECS; Guyana and Jamaica:

2.5.2.1 The Caribbean needs 1 (one) Ophthalmologists per 20,000 (twenty thousand) people; or approximately 350 to adequately serve the region's 7-million inhabitants. A crude estimate by this author, suggests there are less than 150 active Ophthalmologists in the Caribbean service. There is a rich supply of Jamaican MDs trained in several jurisdictions around the World, many of whom are likely enthusiastic candidates for ophthalmology residency programs, delivered from the Caribbean.

2.5.2.2 In light of the chronic shortage of Ophthalmologists (across the Caribbean) CCB-Eye Care Caribbean proposes to partner with: International interests; national Ophthalmology departments and regional training institutions, to develop and deliver 4-year Ophthalmology residency programs at strategic locations across the region.

2.5.2.3 Priority attention will be given to:

- A) The Eastern Caribbean – Suitable location(s) to be explored.
- B) Guyana - Exploratory activities to commence with the Georgetown Public Hospital.
- C) Jamaica - exploratory activities commencing with the Ophthalmology Dep. Mandeville Regional.

2.5.2.4 The 4-year residency will use courses and programs developed by the International Council of Ophthalmology.

2.6. training: Laser Safety Officers; Refractionists, Eye Nurses; Bio-med, Ophthalmic and Imaging Technicians; and Ocularists.

2.6.1 In light of the Caribbean's weak to non-existent airlinks, the Executive Committee strongly encourages and approves development of hybrid (online and face-to-face) programs to train workers, career practitioners and professional cadres.

2.6.2 It is anticipated that such programs will be delivered on line and collaboration with Ophthalmology departments and eye clinics, where candidates can undertake their labs and other hands-on orientation and practice.

2.7 Consolidation of vision center activities at the National Vision Center – Antigua and retrofit of community vision centers:

2.7.1 members recognize that, the COVID pandemic, has significantly affected CCB-Eye Care

Caribbean's clinic activities in Antigua-Barbuda and elsewhere. It is affirmed that the community vision centers in Antigua-Barbuda and across the Caribbean, will be retrofitted to make them covid-safe and more client-friendly, when the next pandemic comes.

2.7.2 Going forward, members directed that all CCB's vision center activities in Antigua-Barbuda, be concentrated at the National Vision Center on the Holberton Campus. Members require, that technical support for community vision centers will be delivered from the National Vision center.

2.7.3 The Center (which is fully airconditioned) is equipped with: Waiting room capacity for up to 45; 6 examination lanes and a range of ocular diagnostic systems.

2.7.4 The clinics are supported by a 2-lane full-service eyeglass lab.

2.8 Continued development of eye clinics in Government and not-for-profit health facilities across the Caribbean:

The membership of CCB supports continued expansion of such initiatives using a sustainable module and focusing on; Regional, parish, Provincial, and district hospitals; as well as poly clinics, district clinics and community health centers.

Members approved this initiative and anticipate the collaboration agreements between CCB and participating Ministries of Health or not-for-profit organizations.

2.9 Development and delivery of eye health program titled “Vision for all Children in the Caribbean):

The members of CCB, affirmed support for this initiative and looks forward to its implementation. The initiative envisages development and implementation of ongoing vision screening in participating schools, given the fact of refractive errors having a high prevalence among children entering puberty and throughout their teen years, with a potentially high negative impact on their education potential.

2.10 Public Sector Eye Care Programs:

2.10.1 The inaugural program was launched in Antigua-Barbuda in 2018. Post-COVID Arrangements are being made to: Continue deliverables in Antigua-Barbuda and implement the program in other countries across the Caribbean.

2.10.2 Members strongly support continued delivery of the Public Sector Eye Care Program, which was initiated in Antigua-Barbuda, before the onset of the COVID pandemic.

2.10.3 In its first iteration, the program: Examined more than 11 thousand public employees and officials; Referred more than 355 individuals for urgent Ophthalmological Management; Prescribed more than 3,780 eye glasses; and distributed more than 900 pairs of eye glasses to public employees earning less than EC\$2,200 per month. As part of its commitment to eye health throughout Antigua-Barbuda, the Government funded eyeglasses for employees earning less than EC\$2,200.

2.10.4 Members extended special commendations to PM Gaston Browne, his cabinet and the Committee of Permanent Secretaries (in Antigua-Barbuda) for their strong commitment to eye health.

2.11 Development and Delivery of: The Caribbean Award for Excellence in Vision Care.

2.11.1 The CCB membership believe that eye care providers, should receive appropriate recognition for their work in preserving vision and restoring sight to thousands of people across the Caribbean.

2.11.2 Members endorsed the Secretariat’s proposal to develop and deliver the award annually, using formats and methods appropriate to such occasions.

3. Inclusive education and training for people with severe vision loss and other disabilities.

3.1 Global estimates are that between 3 and 4 in every thousand children of school age, are visually impaired or blind. CCB estimates that up to 5 thousand of the 1.2M children in the English-speaking Caribbean, live with severe vision loss or blindness. We estimate that, up to 4% or 280 thousand youths and older people (in the Caribbean) are visually impaired or blind.

3.1.1 According to the National Center for Education, in 2019-2020, the number of students between 3 and 23, who received special education services under the Individuals with Disabilities Education Act (IDEA) was 7.3 million or 14% of all public-school students in the United States.

3.1.2 Assuming that 20% of the region’s population is approximately 1.2 million children, a crude estimate is that 14% (of the 1.2 million) or 168,000 children in the English-speaking Caribbean have special education needs.

3.1.3 Further, it is reasonable to assume service gaps of at least 90%. This suggests that up to 153,000 children with special education needs, are not being served.

3.2 Members (therefore) affirm their support for:

3.2.1 Intensified engagements with: Education units, schools and national education authorities, to ensure optimal standards in inclusive and other education opportunities, for students with special needs.

3.2.2 Continued advocacy with and lobbying of CXC at regional and national levels, to assure appropriate options in the delivery of inclusive examinations for students with vision loss and other special needs.

3.2.3 Continued Development of The Caribbean College of Special Education Teachers; As an online vehicle for in-service training of teachers and others with special needs children in their care or classrooms, using short under-graduate programs.

- 3.2.4 Support for the Interim Academic Committee, to advance development of the University of Special Education online.
- 3.2.5 Engage with national, regional and international stakeholders including: Teachers and student associations, Caribbean Union of Teachers, Education International and the Association for Supervision and Curriculum Development; to deepen and expand the special education systems and services across the Caribbean.
- 3.2.6 The delivery of online versions of CCB's 2-weeks and 6-months courses in Adjustment to Vision loss and Blindness, assuming the technical expertise exists on the ground to supervise practicum activities.
- 3.3 Members strongly emphasized the urgent need to develop and present undergraduate and post graduate certificates and degrees in adjustment to vision loss and blindness, for eventual offering by the University of Special Education.
- 3.4 Membership underscored the urgent need to the Consortium of Inclusive Technology Instructors (CATI- as a program of CCB, working to present national and international online short courses, to people with Vision loss and other disabilities. It is proposed that this will be achieved by:
- 3.4.1 Development, accreditation and delivery of courses and programs in the use of: Digital Braille displays; Mobile phones, tablets, laptops and other types of internet enabled devices.
- 3.5 Members urged use of relevant UN approved days to, expand public awareness and understanding of the:
- 3.5.1 Need to identify, stimulate, train and educate children with special needs.
- 3.5.2 State of statutes regulating education of special needs children.
- 3.5.3 Rights of the special needs child.
- 3.5.4 Accessibility status of the education plant.
- 3.5.5 Status quo regarding adequate numbers of trained special needs teachers.
- 3.5.6 State of access to required material and equipment by children with special needs; and
- 3.5.7 The extent to which public examinations are accessible and consistent with best practices.
- 4.. Development of Caribbean Blindness Services as an Advisory Body to CCB and its Members; While Promoting Contacts between People with Severe Vision Loss or Blindness:
Members affirms and approves the following initiatives, proposed by successive deliberations of the Caribbean Blindness Services Groups, over the past 12 months:
- 4.1 Develop national and regional proposal for family-based adjustment to vision loss and blindness services, modeled on methodologies advanced by the Caribbean Conference on Horizontal cooperation in social protection – Adopted from the Chilean Puente Program, acclaimed gold standard model for development.
- 4.2 Host webinars on: online music and choir production.
- 4.3 Host Webinars on adult health including Diabetes and diabetic induced conditions.
- 4.4 Convene online forum of blind women to advise on women's issues – Possible brand? Visually Impaired Sisters International.
- 4.5 Convene online forum of blind youths to advise on youth issues – Possible brand? WEBY (World of Enterprising Blind youths.
- 4.6 Convene online forum of blind men to advise on men's issues – possible brand, Blind Brothers at large.
- 5.. Themes for ongoing advocacy
On the advice of Caribbean Blindness Services Forum, members adopted the following strategy and tactics to inform ongoing advocacy including, establishment of a regional panel of Accessibility Advocates (nominated by member organizations or the Secretariat – to advance:
- 5.1 Accessible banking and other online services:
Member organizations of CCB (and other interested parties) to use: Traditional media, the Internet, social media, meetings with banking and finance officials and wider social engagements, to advocate for optimal access to banking and all other publicly available financial services.

5.2 Accessible teller machines and equipment used to PIN and or service debit and credit cards:

Specifically, Ministries of Finance, central banks, commercial banks, credit unions and other “near banks” to ensure that teller machines and equipment used to pin and otherwise support use of debit and credit cards, are fitted with secure accessibility enhancement safeguards, to protect persons with vision loss and other disabilities.

5.3 Protection of populations from Electric Vehicles, manufactured before 2020:

National authorities to ensure that electric vehicles made before 2020 are fitted with the necessary safety protocols (including sound alerts) to protect persons with vision loss and other special needs, before they are imported.

5.4 Government, the Business Processing Out-sourcing and the wider private sectors, must make their workstations accessible to people with vision loss and other special needs:

Public sector, the business Processing Outsourcing and wider private sectors, must do more to ensure that workstations, and other work systems, used in the sectors, are sufficiently inclusive, to allow persons with vision loss and other special needs, equal opportunities to employment in their operations.

5.5 Governments, Private and not-for profit organizations and entities, to make public facing websites and social media platforms accessible to people with vision loss and other special needs:

All web and social media sites, intended for public access, must be accessible to people with vision loss and other special needs.

5.6 At least 15% of social benefits must be set-aside for people with vision loss and other disabilities:

Because 10-15% of the population is made-up of people with disabilities; National Governments must set-aside an equivalent percentage of publicly funded social and economic opportunities, for those sectors of the population.

5.7 Adoption of conventions and treaties as well as passage and or implementation of statutes requiring special arrangements for people with disabilities:

National governments to give urgent attention to deliverables under the UN’s Convention on the Rights of People with Disabilities and the Marrakesh Treaty. Further more, the state must give priority to implementing statutes commanding or prescribing access to people with special needs.

5.8 Make braille more accessible by encouraging use of digital braille displays:

Individuals and entities serving children who are blind and other consumers of braille products, are required to promote use of digital braille displays, in order to remove the need for use of bulky paper braille.

5.9 Need to achieve higher levels of inclusion in competitive sports:

Accessibility Advocates to lobby regional and national sports authorities, for inclusion of special sports as part of their development program. Special attention should be given to: Paralympics and Blind cricket.

6. Institutional reform and development of CCB and its member organizations:

Members adopted the following action, to support modernization of CCB and its members:

6.1 Introduction to organizational and management ethics;

6.2 Introduce national boards, employees and volunteers to CCB’s Strategic Priorities

6.3 Training in development of accounting policy and use of the Quick Books accounting program.

6.4 Online discussions on state of workshops and other productive enterprises operated by members (Presenters to come from organizations with productive operations)

6.5 Invite NAC members (USA and Canada) to make presentations to members on current trends in productive enterprises being operated by organizations of and for people who are blind.

6.6 Identify and expose Committee of Alternate Executive Members to online orientation to CCB –Sessions to be led by current and former members of the Executive Committee.

6.7 Mobilization of membership support for CCB’s Rice for the Blind – Food security program in Haiti

6.8 Adoption of severe and profound Vision Loss, as interchangeable with low vision and blindness

6.9 Modification of CCB’s purpose to read “preventing vision loss, instead of “prevention of blindness???”

Members noted that the global trend is embracing vision loss on a continuum, from: Mild, moderate, severe to profound. Severe and profound being interchangeable with low vision and blindness.

6.10 Collect data on vision loss in the Caribbean – To support planning at national and regional levels.

6.11 Revision of CCB's statistics on number of persons living with vision loss in the Caribbean. CCB revised the data more than 10 years ago, when the AGM was held in St Kitts.

7.. Updating CCB's Constitution, focus: Internet use and the wider virtual environment for official activities, including meetings; Gender equity; Sustainability, inclusive and equitable access.

Members affirmed this action and require that the process be completed by 2024.

8.. Revised Human Resources Plan:

Members received and approved the following positions which will support the work of Council's Chief Executive Officer, going forward. All of the positions may be graded from level one to 3, with one being the entry point. The CEO may use contract terms in the recruitment of all positions. However, the CEO must notify the Executive Committee, if and when a departure is to be made from the use of contracts as the instrument of employment for any positions exceeding 6 months.

8.1 Consultants and Advisors; Deputy or Assistant CEO(s) responsible for: Programs, Finance, Web or information systems.

8.2 Senior: Advocacy, Executive or Program Officers; IT and Web Development Specialists.

8.3 Advocacy, Executive or Program Officers; IT and Web Development Specialists.

8.4 Executive and Admin. Assistants; Program and IT Specialists; Maintenance specialists and Drivers.

8.5 All or any of the above, may be supported by other contract and or adjunct positions as may be determined by the CEO.

9.. Establishment of CCB Guyana Program, CCB Jamaica Program and other affiliates.

The Executive Committee approved and urges registration of CCB-Guyana Program and CCB-Jamaica Program, in both countries, as a matter of priority. Both entities are authorized to assume responsibility for CCB's financial, program and other assets in the respective jurisdictions as follows:

9.1 CCB Jamaica Program - assume responsibility for assets and operations of: The Foundation for Eye Care in Jamaica (CCB-Eye Care Jamaica) and The Caribbean Council for the Blind and visually Impaired Int. Inc

9.2 CCB Guyana Program - Assume responsibility for The foundation for Eye Care in Guyana (CCB-Eye Care Guyana) and all its accounts with financial institutions in Guyana.

10.. Launch of CCB.Media as the Council's communication platform.

The Executive Committee approved the establishment of ccb.media@eyecarecaribbean.com or ccb.media@ccb1967.com as the e-mails from which all official statements of the organization shall be published. Members further determined that CCB.Media pages will be established on a wide range of social media pages including: Facebook, Instagram, YouTube and TikTok.

Members anticipate that CCB. Media will evolve to become the communication arm of the organization.

The above (in part or in full) represents CCB-Eye Care Caribbean's strategic and program priorities for 2023 and beyond.

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