

# EYE SHA FOUNDATION

England & Wales · Charity number 1206386

## Details

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**Status** Registered

**Legal form** CIO

**Registered** 2024-01-04

**Register** [View on the Charity Commission register](#)

## Contact

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**Address** The Granary  
Laughton Road  
Ringmer  
Lewes  
BN8 5NQ

**Phone** 07787598237

**Email** [aeeshamalik@gmail.com](mailto:aeeshamalik@gmail.com)

## Activities

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**Objects:** THE OBJECTS OF THE CIO WHICH ARE FOR THE PUBLIC BENEFIT, ARE SPECIFICALLY RESTRICTED TO THE FOLLOWING:FOR THE PUBLIC BENEFIT THE RELIEF OF SICKNESS AND THE PRESERVATION OF HEALTH AMONG PEOPLE RESIDING IN LOW- AND MIDDLE-INCOME COUNTRIES, BY MEANS OF BUT NOT EXCLUSIVELY:• MAKING GRANTS TO ORGANISATIONS FURTHERING THE SAME PURPOSES;• PROVIDING OR ASSISTING IN THE PROVISION OF SCREENING AND TREATMENT TO THOSE SUFFERING FROM EYE DISEASES;• PROVIDING OR ASSISTING IN THE PROVISION OF COMMUNITY-BASED CAMPAIGNS TO COMBAT NTDS (NEGLECTED TROPICAL DISEASES), INCLUDING MASS DRUG ADMINISTRATION, HYGIENE EDUCATION, AND CLEAN WATER INITIATIVES.

**Activities:** The relief of sickness and the preservation of health for people in low and middle income countries who are suffering from eye problems or neglected tropical diseases

## Classification

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- **How:** Makes Grants To Individuals, Makes Grants To Organisations, Provides Services
- **What:** The Advancement Of Health Or Saving Of Lives

## Geography

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- Egypt
- India
- Tanzania

## Finances

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Period end	Income	Expenditure	Assets	Employees
2025-03-31	£36,999	£3,454	-	-

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## Trustees

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Name	Role	Appointed
Dr Aeesha Malik		2024-01-04
Dr Eslam Abdelhamid Elbaaly		2024-01-04
Dr Naomi Wright		2024-01-04

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**EYE SHA FOUNDATION**

England & Wales - Charity number 1206386

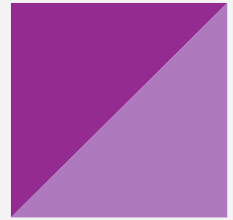
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# Accounts

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# EyeSha Annual Report 2024/2025





# About Us

We're a dedicated team of health professionals committed to preventing child blindness. Our experts have decades of experience in child and baby eye health across diverse global communities, bringing expertise, empathy, and innovative solutions to areas where eye care is most urgently needed. Together, we aim to create transformative, lasting change—giving children a brighter future filled with endless opportunities.

## Reference and administrative information

- **Registration history:** 04 January 2024
- **Organisation type:** CIO
- **Charity number:** 1206386
- **Trustee(s):**
  - Dr Aesha Malik
  - Dr Eslam Abdelhamid Elbaaly
  - Dr Naomi Wright
- **Chief Executive:** Aesha NJ Malik
- **Address:** THE GRANARY, LAUGHTON ROAD RINGMER LEWES, BN8 5NQ
- **Website:** [www.eyesha.org](http://www.eyesha.org)



# Objectives of the Foundation



EYESHA Foundation is dedicated to preventing avoidable blindness and improving access to quality eye care for children and communities in low- and middle-income countries.

## Charitable Objects

For the public benefit, the objects of the foundation are specifically restricted to the following:

1. **The relief of sickness and the preservation of health** among people residing in low- and middle-income countries.
2. To achieve this purpose by means of, but not exclusively:
  - Making **grants to organisations** that further the same charitable purposes.
  - **Providing or assisting in the provision of screening and treatment** for individuals suffering from eye diseases.
  - **Supporting community-based campaigns** to combat Neglected Tropical Diseases (NTDs), including mass drug administration, hygiene education, and clean water initiatives.

## Public Benefit Statement

The trustees confirm that they have had due regard to the Charity Commission's guidance on public benefit when planning and delivering the charity's activities.

# Vision, Mission, and Approach

## Vision

Ending preventable childhood blindness, where every community has equitable access to quality, sustainable eye care.

## Mission

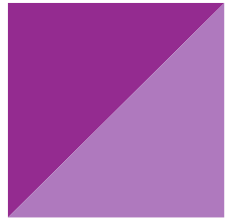
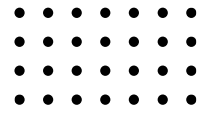
To strengthen neonatal and child eye health systems in low- and middle-income countries through innovation, capacity building, and research — ensuring that every child receives early detection, treatment, and care.

## Our Approach

EYESHA's work is built on a locally-led, globally-supported model that promotes sustainability, equity, and ownership.

The Foundation's approach centres on four key pillars:

- **Local Partnerships** – Collaborating with Ministries of Health, hospitals, and community organisations to align efforts with national priorities.
- **Capacity Building** – Training and empowering healthcare and community workers to deliver quality eye care independently and sustainably.
- **Innovation and Technology** – Using affordable tools such as telemedicine, mobile imaging, and AI-assisted diagnosis to expand reach and improve care quality.
- **Evidence and Advocacy** – Generating research and data to inform policy and integrate eye health into broader child health systems.



# Strategic Partnerships

Collaboration is at the heart of EYESHA's work. The Foundation achieves its impact through strong partnerships that combine global expertise, regional leadership, and local implementation.



## Children's Eye Foundation of AAPOS



The Children's Eye Foundation of the American Association for Pediatric Ophthalmology and Strabismus (CEF of AAPOS) is one of EYESHA's key strategic and funding partners.

In collaboration with EYESHA, CEF co-established the Stop Infant Blindness in Africa (**SIBA**) initiative — a regional effort aimed at preventing vision loss in premature infants across the continent.

## COECSA



(College of Ophthalmology of Eastern, Central, and Southern Africa)

EYESHA works in close partnership with COECSA, the regional professional body responsible for advancing ophthalmic training and eye health across Eastern, Central, and Southern Africa.

Through this collaboration, COECSA supports the coordination and implementation of programme activities, maintains sound financial accountability, and leads advocacy to strengthen eye health training and services in the region.

## National Partnerships

Kenya, Uganda, Nigeria, and Ethiopia

EYESHA's success depends on strong collaboration with Ministries of Health, public hospitals, and professional societies in each country.

# Activities & Programmes



## 1. Newborn Eye Health Programme

### Telemedicine Screening for Retinopathy of Prematurity (ROP)

#### Programme Overview

The Telemedicine Screening Programme for ROP addresses one of the fastest-growing causes of childhood blindness in sub-Saharan Africa. With improved neonatal survival, premature infants are increasingly at risk of ROP, yet screening and treatment services remain limited.

EYESHA launched this initiative to build **sustainable, country-led systems** for the early detection and management of ROP in **Kenya and Uganda**, ensuring that no infant loses sight from a preventable cause.

#### The programme's main objectives are to:

1. Establish sustainable **ROP screening and treatment** infrastructure within major neonatal intensive care units (NICUs).
2. **Strengthen local capacity** through targeted training for healthcare professionals and technicians.
3. Implement a **telemedicine-based screening model** to improve coverage and access.
4. **Conduct research** on ROP prevalence, risk factors, and treatment outcomes to improve clinical outcomes and guide national policy.



# 1. Newborn Eye Health Programme

## Scope and Target

The Newborn Eye Health Programme operates in **Kenya and Uganda**, with a **hub-and-spoke telemedicine model** linking central hospitals to peripheral sites.

- **Kenya:** 5 hospitals across Nairobi and Kiambu counties.
- **Uganda:** 4 hospitals across Mbale, Kampala, Masaka, and Nsambya.

The programme targets **preterm and low-birth-weight infants** in neonatal units, aiming to integrate routine eye screening into standard newborn care across both countries.

## Overall Achievements

- **776+ preterm infants screened** (Kenya = 455; Uganda = 321).
- **53+ infants treated** for sight-threatening ROP (38 in Kenya; 15 in Uganda).
- **60+** healthcare professionals trained in neonatal eye imaging and telemedicine.
- Two national **telemedicine hubs** established:
  - Kenyatta National Hospital (Kenya)
  - Masaka Regional Hospital (Uganda)
- National ROP screening guidelines were drafted, and a National Working Group was formed in Uganda.



# 99%

SCREENING COVERAGE OF  
ELIGIBLE INFANTS

# 1. Newborn Eye Health Programme

## Country Highlights

### Kenya

The foundation phase successfully established a national telemedicine network for neonatal eye screening.

Key milestones include:

- **Infrastructure setup** in Kenyatta National, Mbagathi, Mama Lucy Kibaki, Pumwani Maternity, and Kiambu County Hospitals.
- **Kenyatta National Hospital** designated as the **central hub** for image review, training, and coordination.
- Formal **partnerships** signed between **COECSA**, **EYESHA**, and **SIBA**, outlining shared resources and responsibilities.



The team visiting Kiambu County Newborn Unit

### Training (March–April 2025):

- Led by Dr. Shwetha Mangalesh (EYESHA) in collaboration with COECSA technicians.
- Combined theoretical instruction, model-eye simulation, and live infant imaging using the **Forus 3nethra Neo® camera**.
- **24 stakeholders** from Nairobi's main hospitals attended the launch meeting.

# 1. Newborn Eye Health Programme

## Country Highlights

### Kenya

- **Programme rollout (April 2025 onward):**
  - Tele-screening began at peripheral hospitals under the central hub model.
  - Monthly screenings **rose from 52 in April to 202 in July**, showing rapid adoption and staff proficiency.
- **Ongoing mentorship:** Regular feedback meetings transitioned from weekly to monthly as local confidence grew.



ROP tele-screening team in action at Kenyatta National Hospital

### Challenges:

Early challenges with image quality due to unfamiliar technology were addressed through continuous mentorship and quality feedback. Teams now perform screenings independently and report routinely.

# 1. Newborn Eye Health Programme

## Country Highlights

### Uganda

In Uganda, the programme was launched under the “Hope and Vision” initiative at Mbale Regional Referral Hospital in **March 2025**, led by Dr. Kathy Burgoine, Dr. Iddi Ndyabawe, and Dr. Shwetha Mangalesh (EYESHA).

The launch included theoretical and **hands-on training** for **13 healthcare** professionals, covering ROP screening, tele-screening workflows, and data management. Testimonies from mothers of preterm infants highlighted the life-changing impact of early detection and care.

**From March 27 to April 1, 2025, EYESHA conducted a series of national workshops and stakeholder meetings to strengthen neonatal eye care and align national efforts:**

- A Ministry of Health meeting resulted in the formation of a National ROP Steering Committee to oversee policy and guideline development.
- Practical training sessions were held at Kawempe National Hospital, Mulago Medical College, and St. Francis Nsambya Hospital, training 26 additional professionals, including ophthalmology residents, neonatal nurses, and technicians.
- Masaka Regional Referral Hospital was later designated as a telemedicine coordination hub, expanding coverage.
- A virtual national meeting on April 1, 2025, gathered **28 experts** from across Uganda to consolidate lessons and plan the national rollout.



# 1. Newborn Eye Health Programme

## Country Highlights

### Uganda

#### Programme Rollout and Policy Development

- Telemedicine screening began at **Mbale Regional Referral Hospital**, using wide-field imaging and indirect ophthalmoscopy to cover all eligible infants.
- **Masaka Regional Hospital** prepared to act as a **secondary telemedicine hub**, extending screening and referral capacity.
- **National ROP Guidelines** were drafted and are under review by the **Ministry of Health**, while a **National ROP Working Group** now coordinates implementation, quality assurance, and data reporting across sites.



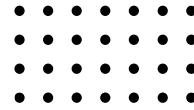
Trainees at the workshop getting hands-on experience and practice with the model eye with personalized feedback

#### Challenges:

**Camera delivery delays** briefly slowed progress but were quickly resolved through coordination with **EYESHA** and **SIBA**.

The **lack of official guidelines** initially limited standardisation; however, the draft national guidelines are now nearing approval.

# 2. Ethiopia: Child Eye Health Initiative



## Overview

The **Child Eye Health Initiative** in Ethiopia builds on EYESHA's regional experience in newborn and child vision care. Implemented in partnership with **Worldwide Orphans (WWO)** and the **Albert Einstein College of Medicine**, the project integrates **early vision screening** into preschool and primary healthcare settings to promote early detection and referral of eye conditions.

### Objectives

- Improve early detection of childhood eye diseases through school- and community-based screening.
- Train **teachers, nurses, and local health workers** to identify vision problems and refer children for care.
- Strengthen **referral systems** linking schools and health facilities.
- Raise community awareness on the importance of early eye screening.



### Key Highlights

- Conducted a **Training of Trainers (ToT)** workshop in Addis Ababa for **70 participants**, including preschool educators and health workers.
- Developed Ethiopia-specific training modules and screening materials, adapted from EYESHA's regional curriculum.
- Provided **screening kits** and educational tools to five preschools and two hospitals, and **screened nearly 800 children**.
- Formed partnerships with the Ministries of Health and Education to integrate child eye screening into school health programmes.

# 3. COECSA Regional Workshop on ROP

## Overview

EYESHA co-organised a **Regional ROP Workshop** during the **12th COECSA Annual Scientific Congress** held on 19 August 2025 in Addis Ababa, Ethiopia.

- Jointly hosted with **SIBA**, the **Children's Eye Foundation**, and **IPOSC**, the event gathered **46 delegates** from **eight** Sub-Saharan countries and global ROP experts to strengthen collaboration in neonatal eye health.

## Objectives

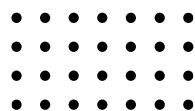
- Review progress and challenges in ROP care across the region.
- Strengthen inter-country collaboration and create a unified action plan.
- Explore innovations such as telemedicine, AI, and virtual reality (VR) to expand ROP screening and training.



## Key Highlights

- Country presentations shared experiences in screening, treatment, and policy development.
- The success of telemedicine-based ROP screening in Kenya and Uganda demonstrated a scalable regional model.
- Discussions highlighted the need for national ROP guidelines, data registries, and trained multidisciplinary teams.
- Expert sessions showcased advances in telemedicine networks and VR tools for ophthalmic education in low-resource settings.

# Impact & Next Steps



## Impact (2024–2025)

During this reporting year, EYESHA advanced neonatal and child eye health **across East Africa** through coordinated implementation, training, and regional collaboration.

The Foundation:

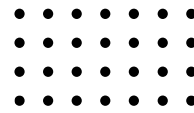
- Expanded **telemedicine-based screening and treatment** for newborns and children across **Kenya, Uganda, and Ethiopia**.
- Strengthened **national and regional systems**, contributing to Uganda's **National ROP Guidelines** and a **Regional ROP Action Plan** through COECSA.
- Built a **network of trained** healthcare professionals, teachers, and technicians now equipped to deliver early screening and referral.
- Demonstrated a **scalable model for locally-led, globally-supported** eye care in low-resource settings.



Delegates at the COECSA Regional ROP Workshop (Addis Ababa, August 2025)

- Fostered cross-sector partnerships with Ministries of Health and Education to integrate eye health into national programmes.
- Jointly hosted with SIBA, the Children's Eye Foundation, and IPOSC, the event gathered 46 delegates from eight Sub-Saharan countries and global ROP experts to strengthen collaboration in neonatal eye health.

# Impact & Next Steps



## Next Steps (2026 and Beyond)

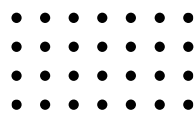
Looking ahead, EYESHA will build on these achievements by:

- **Scaling up** telemedicine screening to **new hospitals** in Kenya, Uganda, and additional countries in Southern Africa.
- Supporting the **implementation of national ROP guidelines** in Uganda and developing similar frameworks in Kenya and Ethiopia.
- Launching **pilot projects in Tanzania and Zimbabwe/Zambia** based on the COECSA regional roadmap.
- Expanding **training partnerships** with COECSA to reach more clinicians, nurses, and technicians across the region.
- **Integrating AI-assisted imaging and virtual reality (VR)** training tools to improve diagnostic accuracy and medical education.



- Continuing **operational and clinical research** to enhance service quality, follow-up, and long-term outcomes.
- Strengthening **advocacy and resource mobilisation** to embed newborn and child eye health into national health strategies and budgets.

# Pipeline Projects & Proposals



## Proposals (2025–2026)

EYESHA continues to expand its reach through new proposals and partnerships aimed at strengthening neonatal and child eye health across additional countries. These initiatives are designed to build on the Foundation’s ongoing work in East Africa and support long-term regional integration.

### Proposals in Development or Under Review:

- **Egypt** – Introduce community-based vision screening and early detection services in collaboration with national partners, focusing on underserved communities.
- **Palestine** – Developing a newborn eye health programme to establish ROP screening and treatment services within neonatal units.
- **Pakistan** – Pilot telemedicine screening for ROP and strengthen referral systems to improve access to specialised care.
- **Tanzania** – Designing a community health worker (CHW) model to support early identification and referral of childhood eye diseases.

### Major Grant Proposals

- **Velux Foundation** – ROPAI (Retinopathy of Prematurity Artificial Intelligence Initiative): proposal to integrate AI-assisted image analysis into neonatal telemedicine to enhance diagnosis and workflow efficiency.
- **Wellcome Trust** – ROP-AI Africa Model: Research collaboration to develop the first AI model for ROP detection in Africa, adapted to local populations and integrated within EYESHA’s telemedicine framework.

# Governance and Management



EYESHA Foundation is a **Charitable Incorporated Organisation (CIO)** registered in England and Wales under **charity number 1206386**. The Foundation is governed by a **Board of Trustees** that provides strategic oversight, ensures compliance with charity regulations, and guides the overall direction of the organisation.

The Board delegates day-to-day management to the **Executive Team**, which oversees programme implementation, partner coordination, and financial management. Regular meetings between trustees and management ensure alignment with the Foundation's objectives and accountability to donors, partners, and beneficiaries.

EYESHA's governance framework emphasises **transparency, collaboration, and shared responsibility**. Decisions are guided by the Foundation's constitution and are informed by data, evidence, and continuous feedback from partners in the field.

To ensure programme quality and integrity, EYESHA follows key governance principles:

- **Accountability:** Clear roles and regular reporting mechanisms across all projects.
- **Transparency:** Open communication with partners and stakeholders on progress and challenges.
- **Ethical standards:** Compliance with UK Charity Commission guidelines and safeguarding policies.
- **Partnership governance:** Collaboration with Ministries of Health, COECSA, and other partners to align programme priorities with national and regional strategies.

# Financial Overview



Project funds supporting activities in Kenya and Uganda were **provided by the Children’s Eye Foundation of Aapos (CEF)** and **transferred** through Stop Infant Blindness in Africa (**SIBA**) **directly to local partners** to support implementation on the ground.

..

EYESHA manages these funds in coordination with national partners, ensuring all expenditure aligns with donor requirements and project objectives.

During this reporting period, CEF’s support — channelled through SIBA — enabled the **continuation and expansion of the Newborn Eye Health Programme**.

The funds covered training, equipment procurement, telemedicine operations, and policy development activities.

## Country Expenditure Summary (2024-2025)

### Kenya – USD 98,695

Funds supported the establishment of a telemedicine screening network, including equipment procurement, staff training across five hospitals, and operational costs related to screening and data management.

### Uganda – USD 25,950

Funding covered national training workshops, development of ROP guidelines and data systems, and support for screening and coordination at the hospital level.

### Pending Disbursement – USD 38,000

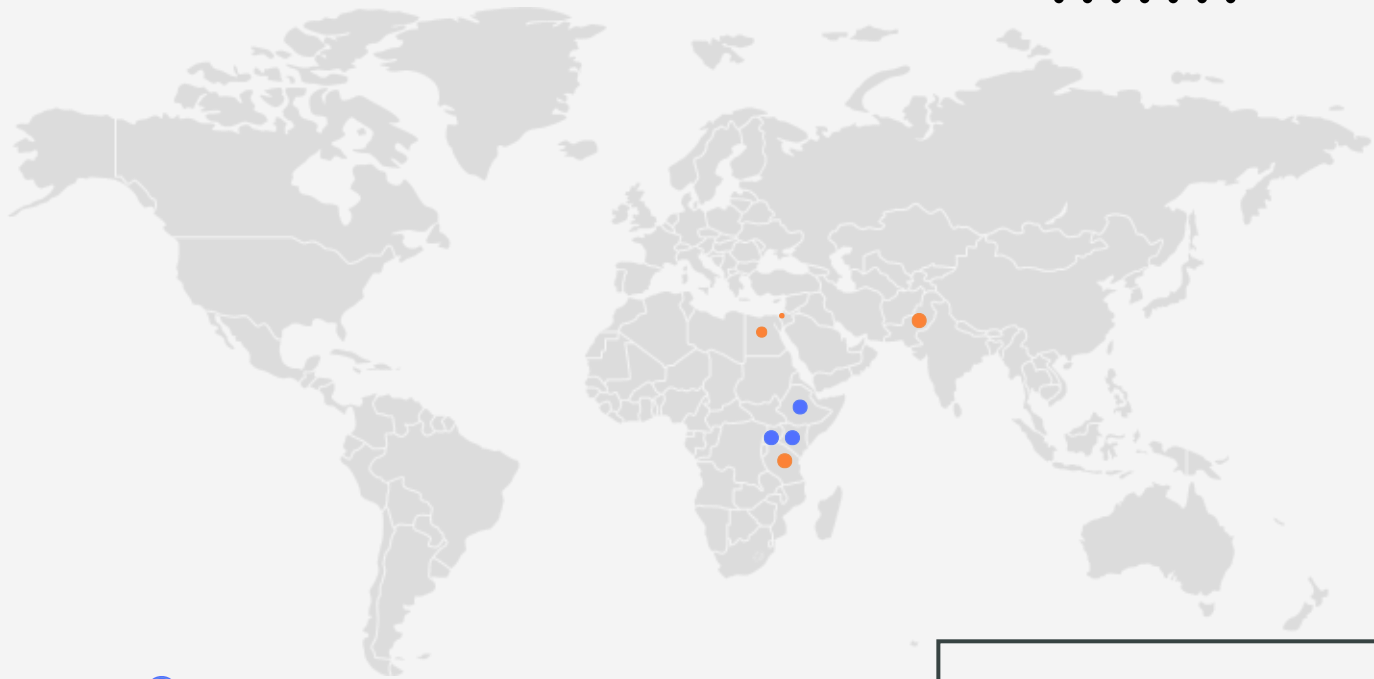
Additional funds are pending for release at the end of 2025 to support equipment procurement in Uganda.

## Financial Accountability

EYESHA maintains clear reporting lines between its country teams, partners, and SIBA. All financial activities are monitored quarterly to ensure alignment with project objectives, proper documentation, and compliance with the Charity Commission’s financial standards.

Regular reviews are conducted to track spending efficiency and value for money across all programmes.

# Our Global Footprint



● Active Programmes ● Pipeline Proposal

## Together for Brighter Futures

Across these countries, EYESHA works hand in hand with local partners to protect the sight of newborns and children.


“


Each dot on this map represents a shared effort, a growing partnership, and a child whose future is a little brighter.

Thank you for being part of this journey.

”

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 [www.eyesha.org](http://www.eyesha.org)

 +44(0)7787598237



CHARITY COMMISSION  
FOR ENGLAND AND WALES

Charity NEYE SHA FOUNDATION

1206386

## Receipts and payments accounts

CC16a

For the period from	04/01/2024	To	31/03/2025
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### Section A Receipts and payments

	Unrestricted funds to the nearest £	Restricted funds to the nearest £	Endowment funds to the nearest £	Total funds to the nearest £	Last year to the nearest £
<b>A1 Receipts</b>					
US NGO (Worldwide Orphans)	28 906	-	-	28 906	-
Corporate donation	500	-	-	500	-
Individual donation	7 593	-	-	7 593	-
	-	-	-	-	-
	-	-	-	-	-
<b>Sub total (Gross income for AR)</b>	<b>36 999</b>	<b>-</b>	<b>-</b>	<b>36 999</b>	<b>-</b>
<b>A2 Asset and investment sales, (see table).</b>					
	-	-	-	-	-
	-	-	-	-	-
<b>Sub total</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Total receipts</b>	<b>36 999</b>	<b>-</b>	<b>-</b>	<b>36 999</b>	<b>-</b>
<b>A3 Payments</b>					
Travel expense	2 659	-	-	2 659	-
Equipment purchase	288	-	-	288	-
Project Management cost	500	-	-	500	-
Others	7	-	-	7	-
	-	-	-	-	-
	-	-	-	-	-
	-	-	-	-	-
	-	-	-	-	-
<b>Sub total</b>	<b>3 454</b>	<b>-</b>	<b>-</b>	<b>3 454</b>	<b>-</b>
<b>A4 Asset and investment purchases, (see table)</b>					
	-	-	-	-	-
	-	-	-	-	-
<b>Sub total</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Total payments</b>	<b>3 454</b>	<b>-</b>	<b>-</b>	<b>3 454</b>	<b>-</b>
<b>Net of receipts/(payments)</b>	<b>33 545</b>	<b>-</b>	<b>-</b>	<b>33 545</b>	<b>-</b>
A5 Transfers between funds	-	-	-	-	-
A6 Cash funds last year end	-	-	-	-	-
<b>Cash funds this year end</b>	<b>33 545</b>	<b>-</b>	<b>-</b>	<b>33 545</b>	<b>-</b>

## Section B Statement of assets and liabilities at the end of the period

Categories	Details	Unrestricted funds to nearest £	Restricted funds to nearest £	Endowment funds to nearest £
<b>B1 Cash funds</b>	Cash at Bank current account	31 545	-	-
	Cash at Bank Saving Account	2 000	-	-
		-	-	-
	<b>Total cash funds</b>	<b>33 545</b>	<b>-</b>	<b>-</b>
	(agree balances with receipts and payments account(s))	OK	OK	OK


Categories	Details	Unrestricted funds to nearest £	Restricted funds to nearest £	Endowment funds to nearest £
<b>B2 Other monetary assets</b>		-	-	-
		-	-	-
		-	-	-
		-	-	-
		-	-	-
		-	-	-

Categories	Details	Fund to which asset belongs	Cost (optional)	Current value (optional)
<b>B3 Investment assets</b>			-	-
			-	-
			-	-
			-	-
			-	-

Categories	Details	Fund to which asset belongs	Cost (optional)	Current value (optional)
<b>B4 Assets retained for the charity's own use</b>			-	-
			-	-
			-	-
			-	-
			-	-
			-	-
			-	-
			-	-

Categories	Details	Fund to which liability relates	Amount due (optional)	When due (optional)
<b>B5 Liabilities</b>			-	
			-	
			-	
			-	
			-	

Signed by one or two trustees on behalf of all the trustees

Signature	Print Name	Date of approval
	Aesha Malik	23-Jan-26

## **Independent Examiner's Report to the Trustees of EYE SHA FOUNDATION**

I report to the trustees on my examination of the accounts of the EYE SHA FOUNDATION for the year ended 31 March 2025.

### **Responsibilities and Basis of Report**

As the charity trustees of the Trust, you are responsible for the preparation of the accounts in accordance with the requirements of the Charities Act 2011 ('the Act').

I report in respect of my examination of the Trust's accounts carried out under section 145 of the 2011 Act and in carrying out my examination I have followed all the applicable Directions given by the Charity Commission under section 145(5)(b) of the Act.

### **Independent Examiner's Statement**

I have completed my examination. I confirm that no material matters have come to my attention in connection with the examination giving me cause to believe that in any material respect:

1. accounting records were not kept in respect of the Trust as required by section 130 of the Act; or
2. the accounts do not accord with those records.

I have no concerns and have come across no other matters in connection with the examination to which attention should be drawn in this report in order to enable a proper understanding of the accounts to be reached.

**Signed:**



**Name:** Atta Ul Haque (Fellow member of ACCA)

**Address:** 35 Lambs Farm Road, RH12 4DB

**Date:** 23 January 2026