

# Where in the world is Olongapo?

BY PASQ MARCANTONIO, OD



Dr. Pasq Marcantonio, performing trial lens vision testing the old fashioned way.

That was the question I asked myself when I received an e-mail from my provincial optometric association asking for ODs interested in participating in an optometric mission to the Philippines.

I've been in practice 33 years and optometry has been very good to my family and me.

Lately, I felt a strong urge to give back something for all the good that I was so fortunate to receive. I took the plunge and submitted my name. It was the best and most rewarding thing I have done in a very long time.

Let me tell you about the experience. First, you have to know that it really is a labour of love. You have to understand that you not just lose time from your work but you personally pay for all your own expenses including the flight, the food, and the accommodations. In my case, that was about \$2700. Much of that can

be considered a charitable/ promotional expense, just ask your accountant.

TWECS takes care of all the logistics including booking flights, accommodations, and local contacts and transportation and dealing with the local officials.

They have organized over 16 safe and well administered projects from East Africa to Vietnam and from Peru to Cambodia, geared to help the poorest of the poor.

The projects are self-contained and complete from the moment the patient walks in to the time they leave with a pair of glasses, it costs them nothing. And we require nothing except an area in which to work.

The planning for each project starts a year in advance but as a volunteer you begin to get updates and information about three months before the trip.

The trips are usually planned for the late Fall of the year. I first applied in late August and I finally left Moncton for Manila on November 5. Since Moncton is the furthest possible distance from the Philippines, it took me two days of flying to get there.

Olongapo City has a population of about 100,000 and is located three hours north of Manila near a decommissioned US naval base called Subic Bay. The city is re-emerging from the economic blow received when Subic bay naval based closed in the

TWECS is a 100% volunteer registered Canadian charity that began in 1995. TWECS collects and distributes old, used eyeglasses and provides eye exams in developing countries where primary eye care is unavailable.

Generous support from the optical industry and volunteers has allowed the Society to provide restored vision to over 55,000 underprivileged people in the Third World.

1990s. On the surface, you would be unaware that the city had been hurt by the closure of the naval base. The streets were clean, vibrant and alive and people were everywhere, belying the fact that the average family income is \$6 a day.

There seemed to be a concerted campaign in town bent on raising the spirit and pride of the citizens. An abundance of slogans, posters and songs extolling the citizens to 'Aim High Olongapo' and 'Fight for Excellence' were everywhere.

The project in Olongapo lasted nine clinic days divided into two sections. One full day was dedicated to treating the residents of an indigenous tribal group of Aetas who were resettled near Olongapo from the area around Mount Pinatubo following the eruption of that volcano which destroyed their villages.



Photos by: Damon Rand, TWECS Director

Patients who require glasses lining up at the dispensary station. This is the usual sight at the dispensary at around 4 pm. We usually run out of chairs so the rest are standing up. The examination station is a covered multipurpose basketball court and civic stage. Open sides provide poor light control but you don't get wet when it rains!

We examined, treated and dispensed 500 patients that day. How can you possibly do that you may ask? The secret is organization and delegation. Let me describe a typical clinic day.

You get up at 6 a.m. and have breakfast and are on the bus by 7 a.m. When you arrive at the clinic site, which happens to be the local sports arena in the centre of the city, there are already 550 people inside the arena some of whom have been waiting for you since 4 a.m. Along with another 100 outside who arrived late but are hoping that someone will leave so they can take their place.

As you walk in, they all stand up and clap and give you a standing ovation! When was the last time a patient showed you that much appreciation?

The patients came from every age group. From infants to seniors. The only requirement was that they be self-assessed as poor, and needy of the service. I was amazed at the patience they showed by waiting quietly for many hours while sitting on con-

crete seats and shuffling along as we proceeded with the exams.

The volunteer team was composed of many walks of life. There were four young university students, a 64 year old retired office worker, a sales rep for a contact lens company, a 74 year old British ex-pat businessman with wonderful wit and eloquence, an optometric assistant and long time TWECS administrator, one assistant in an ophthalmology office, a retired biologist turned piano tuner, a statistician / amateur photographer, two opticians and four optometrists ranging from under 30 to a spry 57 year old (that would be me!). Some had been on projects before but most of us were first timers.

All had a role to play. Some worked the registration desk, others did visual acuity, one did auto-refraction, one did triage. The optometrists did refractions, ophthalmoscopy, slit lamp and disease treatments when appropriate. The opticians dispensed and did exit visual acuities and finally the statistician kept track of it all.

Someone took responsibility to keep everyone supplied with everything from bottled water to clipboards to fans to snacks. We had excellent local support with local nurses who acted as interpreters for us.

Altogether, we gelled into a well-oiled and efficient machine. How efficient you might ask? Well, not to brag, but in nine days the team examined over 5,000 people, and dispensed 4,000 pairs of glasses. (No kidding, just ask the statistician.) All free of charge.

Personally, I cannot remember a more rewarding professional experience except perhaps the passing of TPA legislation in New Brunswick. For two weeks, you meet and live with people who have given up as much as you have to be here and it is so refreshing to discover that there are people in this materialistic world who are prepared to give of themselves with no expectation of reward except a heartfelt thank you.

SHE COULD NOT SEE TO THREAD HER NEEDLE TO SEW THE BAGS TOGETHER AND COULD NO LONGER EARN A LIVING. JUST A SIMPLE PAIR OF READING GLASSES WAS ALL SHE NEEDED TO KEEP ON WORKING.

Interesting cases, here is just a personal sampling:

How about the high school boy who needed  $-22.00$  D glasses but we only had glasses up to  $-17.00$  so we gave him two pairs one  $-17$  and one  $-5.00$  to use one over the other. Don't ask me how he managed to get through school before this.

Or the old lady who came in with shopping bags made of recycled Mylar juice bags.

She could not see to thread her needle to sew the bags together and could no longer earn a living. Just a simple pair of reading glasses was all she needed to keep on working.

Then there was the little 8 year old girl with the turned-in eye that required a  $+ 8.00$  Rx and the eye just seemed to straighten right out almost immediately.

The three year-old boy with an acute purulent, bacterial eye infection who just needed a topical antibiotic.

Sometimes you just felt like a miracle worker.

Heartbreaks, yes, there were some:

The impotence felt when facing someone with dense cataracts beyond our help but with the frustrating knowledge that a free, twenty minute operation would give him back his sight... if only he lived in Canada.

The frustration of seeing a patient with obvious glaucomatous discs who could be controlled with medication. Instead he was destined to go blind just because he could not afford the cost of eye drops.



Dr Marina Roma-March performing ophthalmoscopy on young patients.

The heart-rending cases of toddlers with congenital cataracts who were destined to a dark world just because cataract surgery was beyond their reach.

Could we do more? ... Of course we could. Did we do some good? ... You bet we did. Was it appreciated? Well, consider that on our last day, besides the 550 people already inside the clinic, there were at least another 500 outside standing in line all around the arena just waiting and hoping for a small miracle.

If you want to make a difference, and if you want to give back and show your gratitude for the good fortune you have received, consider joining a TWECS project.

As my team demonstrates, all types of people and backgrounds can participate productively

You do not have to be an optical professional or involved in eye care.

You just need the willingness to be part of a group that wants to do some good.

You don't have to actually go on a mission to help out.

You can be a big help:

Just by having a used eye glasses collection box in your office.

Email [twecs@shaw.ca](mailto:twecs@shaw.ca) and ask for a TWECS collection box.

If you want to go on a mission, just call (604) 874-2733, ask for Dr. Marina Roma-March and ask her for all the particulars.

I hope to see you on my next TWECS project,

*Sincerely,*

*Pasq Marcantonio, O.D.*

#### TWECS LATEST PROJECT

##### Zanzibar Tanzania Sustainable Eye Clinic

Zanzibar, has a million people with only two optometrists and one eye clinic. In February of this year, TWECS met with the Ministry of Health in Zanzibar to draft a Memorandum of Understanding and a five year plan which would include raising enough funds to train two more optometrists and to build a permanent clinic site in Kwamtipura. Kwamtipura has six communities with 250,000 people living in houses, essentially squatters made with corrugated metal. The clinic will be on the top floor of a community triage clinic.