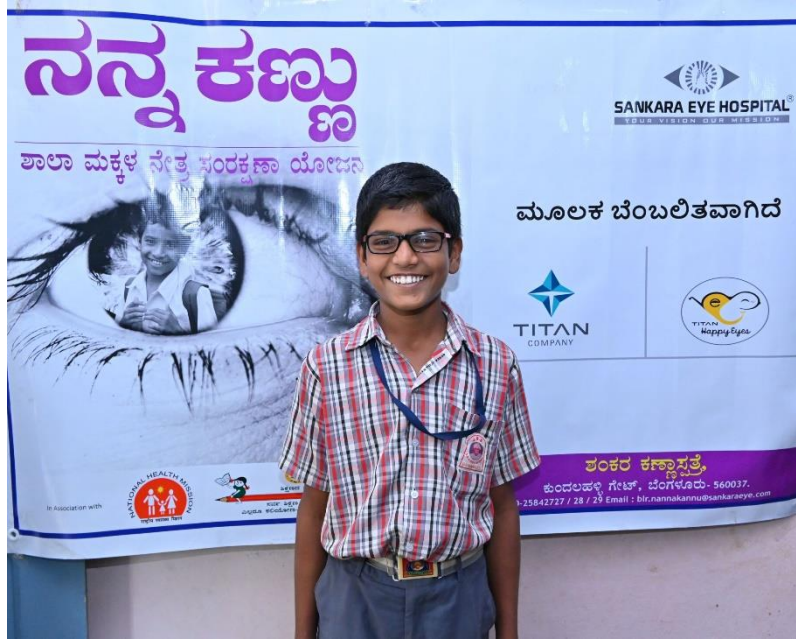




An Impact Assessment Report of Happy Eyes Program



Implemented by Sankara Eye Foundation



Study Conducted by



Soul Ace
2024 – 2025

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ABBREVIATIONS

CBBF & VI	Cataract Blindness Backlog & Visual Impairment
CSR	Corporate Social Responsibility
FY	Financial Year
GOI	Gift Of Vision
HDI	Human Development Index
KIM	Key Informant Method
MRVP	Mobile Rural Vision Screening Project
NGO	Non-Governmental Organisation
NITI	National Institution for Transforming India
NPCB	National Programme for Control of Blindness
SDG	Sustainable Development Goals
SEFI	Sankara Eye Foundation, India
TIDCO	Tamil Nadu Industrial Development Corporation



EXECUTIVE SUMMARY

The Happy Eyes Program, a multicomponent CSR initiative supported by Titan Company Limited carried out by the implementing partner Sankara Eye Foundation, India (SEFI) - Sri Kanchi Kamakoti Medical Trust, was intended to address the critical issue of preventable blindness. People from socio-economically backward sections of the community have to bear an additional financial burden if they have to undergo eye conditions needing treatment or surgical interventions. They often postpone visiting an eye clinic for screening or taking up treatments due to the prohibitive costs involved in reliable eye care. To enhance better preventive screening and treat eye conditions at an early stage, Titan's Happy Eye program adopts a comprehensive approach towards quality eye care inclusive of larger community outreach, preventive screenings, sustained awareness campaigns, eye screenings, free cataract surgeries, and post-operative follow-ups. These interventions significantly improve beneficiaries' physical health and socioeconomic productivity by restoring vision and increasing independence. The program has been found to be well aligned with the Sustainable Development Goals (SDGs), including SDG 3 (Good Health and Well-Being) and SDG 10 (Reduced Inequality). The program also complements the goals of India's National Blindness Control Program, which aimed for a blindness prevalence rate of less than 0.3%. By empowering underserved communities and reducing healthcare disparities, the Happy Eyes Program not only improved individual lives but also strengthened the social fabric through its commitment to inclusivity and sustainability.

About the NGO partner

The Sankara Eye Foundation, India (SEFI), a unit of Sri Kanchi Kamakoti Medical Trust, has been a pioneer and a leader in transforming eye care in India for 48 years. Founded in 1977 by Dr. R.V. Ramani, SEFI has grown from a single hospital to a network of 14 super-speciality eye hospitals across nine states. With a mission to eliminate needless blindness, SEFI focuses on addressing the challenges of accessibility and affordability of quality eye care, particularly in rural India.

SEFI's unique and sustainable Community Outreach Model has impacted over ten million lives through initiatives such as the Gift of Vision program, which provides free eye care services to 80% of its beneficiaries by cross-subsidising costs through patient payments. SEFI, which combines world-class infrastructure, innovative practices, and effective financial planning, continues to provide accessible, cost-effective eye care and is one of India's largest community eye care providers.

Project 1: NANNA Kannu- HAPPY EYES

Sankara Eye Hospital, Bagalkote

The Nanna Kannu Comprehensive Eye Care Program for Children has since 2009 continued to provide the tiered screening & treatment of children from less privileged

sections. The salient feature of this program is the focus on not just preventive or curative eye care but has focused on the comprehensive spectrum of preventive, curative and rehabilitative eye care to the poor and needy children. Thus, ensuring comprehensive but holistic care and thereby ensuring compliance to care and efficiency and higher success rates.

The Nanna Kannu Program is focused on providing a bright future to visually handicapped children who are our future citizens. This program covers children of the age group 4 to 15 years, who are studying in schools and aims at ensuring that the children have a bright future; by providing timely diagnosis of Ophthalmological issues (in school) and providing them with correct remedial measures and medical and surgical care wherever required, free of cost. Children seen to have advanced or complications are provided higher referral to the (base) Sankara Hospital for further management free of cost. Additionally, free spectacles are also provided to children with refractive errors.

Program Coverage in 2023-24	Total no. of Beneficiaries	Sample Size for the study
Total Children Screened	2,93,454	104 Individuals
Spectacles Prescribed	9,114	
Spectacles Distributed	6,467	
Pediatric Surgeries	132	
Teachers/Volunteers Trained	1,479	

Source: Sankara Eye Hospital Report

PROJECT 2: The Mobile Rural Vision Screening Program (MRVP)

Sankara Eye Hospital, Bangalore

The objective of the MRVP project is to provide adequate support and care to adults, who are delimited by ophthalmological issues, by diagnosing their visual defects and providing them with required remedial measures / spectacles and surgical care in far and remote areas of Karnataka. The 8-year-old program has benefitted over one lakh beneficiaries directly till 2024.

It is envisaged that through this program, patients will be provided with access to specialized eye care services in the remote and with poor access to healthcare areas, thereby reducing expenses due to travel. Additionally, the program aims at reducing burden due to morbidity. It implements the strategy of early detection of disease and thereby reducing the burden of debilitating ophthalmological conditions through the mobile clinics being implemented. The project through its fully equipped bus helps in diagnosing and screening of all ophthalmic conditions, including vision examination including auto refraction, slit lamp examination, ophthalmic pre-screening devices, computerized lens meter, direct & indirect ophthalmoscopes, tele-consultations, optical dispensing and counselling.

Through the Mobile bus the project was able to create a good impact by providing timely, advanced and quality eye care to needy at the remote camp site.

Program Coverage in 2023-24	Total no. of Beneficiaries	Sample Size for the study
Total Screened	19,780	50 Individuals
Spectacles Distributed	8,078	
Free Cataract Surgeries Performed	516	

Source: Sankaraan Eye Hospital Report

PROJECT 3: Cataract Blindness Backlog Free & Visual Impairment Free Taluks

Sankara Eye Hospital, Coimbatore & Krishnan Koil

Sankara Eye Foundation India took on a unique challenge and attempted in the making of two Taluks become 'Cataract Blindness Backlog free' in Tamil Nadu State, India. The objective was to reach the needy remote communities in a time-bound duration of twenty months by working on a focused, mission mode. These two taluks were identified by considering multiple factors such as Prevalence of cataract, NITI Aayog aspirational districts, and low Human Development Index (HDI). Additionally, a door-to-door screening was used to estimate the prevalence of cataract blindness and identification of visually impaired people in the area.

The project adopted a highly unique multi-pronged approach methodology to ensure meeting of the program objective. It adopted a key informant method (KIM) wherein proven community-based specific beneficiary identification and mobilization methods were adopted to ensure that the objective of tracing every case of cataract in the community and providing them with correct line of treatment was achieved. Awareness on the initiative towards motivating the community to uptake the services was also concomitantly initiated.

As a part of the approach methodology adopted, the Key Informants (KIs) identified (teachers, social workers, ASHA workers, NGO workers, PHC staff, SHG leaders etc.) in each village. Based on the interest, time and knowledge about the location & project, the shortlisted KIs were provided training on eye screening for diseases, engagement for referral and Identification of needy communities in their villages. Additionally, community mobilization was also initiated through institutional screening in schools, colleges, industries, etc., to ensure complete and comprehensive coverage of the two talukas. IEC materials for spreading awareness and referrals on eye care were created and distributed. Patients identified with visual issues including cataract in the community camps were referred to the base hospital for surgery. Patients with refractive errors were referred to vision centers for the prescription and distribution of spectacles.

The highlight of the time bound definitive-objective program was that it had an exit strategy, wherein all the stake holders, key informants and community members were

sensitized and linked to the Vision Centre to ensure sustainability of the efforts undertaken to eliminate and identify early the cases of future incidences of cataract in the community.

Program Coverage in 2023-24	April 23- Nov 23	Dec 23 -March 24	Sample Size
Taluks Covered	2	2	88 Individuals
Panchayats Covered	55	15	
Population Screened	1,07,285	58,515	
Spectacles Distributed	4,679	1,015	
Surgeries Performed	1,457	202	

Source: Sankara Eye Hospital Report

Project 4: Vision Centre - Providing comprehensive primary eye care services to the rural patients.

Sankara Eye Hospital, Coimbatore

The vision center proposes to provide quality eye care at the doorstep of rural India at a location which is closer to them thus addressing the vital question of availability and accessibility. The vision center focused on intensification of the activity for provision of primary eye care to the community and provision holistic eye care (secondary and tertiary) through strengthening and establishing upward referral linkages to base hospitals through tele-ophthalmology and direct referrals. The program further integrated sustainability by ensuring that the community continues to support and provide holistic demographic and eye care along with good information. In the FY 2023-24, the vision centers in Anai Katti, Pappampatti and Gudalur in Tamil Nadu had performed as given below:

Program Coverage in 2023-24	Anai Katti	Pappampatti	Gudalur	Sample Size
Total Outpatients	1,276	1,780	2,560	19 Individuals
Total Optical Orders	165	195	347	
Non-paying surgeries	81	60	20	
Operational Self-sufficiency	19%	32%	37%	

Source: Sankara Eye Hospital Report

Project 5: Gift Of Vision (GOV)

Sankara Eye Hospitals: Tamil Nadu & Karnataka

Gift of vision is the rural community outreach program that aims at addressing the barriers that lead to asymmetry of utilization of eye care services. The rural outreach camps were organized towards identifying beneficiaries with vision impairments. The identified beneficiaries were then brought to the Sankara eye base hospitals, where they were examined, assessed, and surgery was performed on the necessary cases, medications provided and transported back to their villages free of cost. The outreach program ensured that the poorest of the poor receive the best quality of eye care services.

In the FY 23-24, Titan supported the surgeries done at the Sankara Eye Hospitals in Krishnan Koil and Shimoga. A total of 12,760 rural poor people were reached and made a profound difference to the lives with restored vision, cataract surgeries successfully:

Project Coverage	Total no. of Beneficiaries	Sample Size
Tamil Nadu	7,500	24
Karnataka	5,260	

Source: Sankara Eye Hospital Report

Project 6: Myopia Clinic

Sankara Eye Hospital: SHIMOGA, Karnataka

With the increased number of children with refractive errors, the full-fledged Myopia clinic was set up in the Pediatric Ophthalmology Department at Sankara Eye Hospital, Shimoga with the support received from Titan.

Myopia has evolved into a significant public health problem. With a large percentage of children showing symptoms of disease progression, a large interest in identifying possible interventions that would slow down the progression of disease. Keeping the above-mentioned needs, a program with multimodal treatment strategy was implemented. Scientific research and publication on the data on 'the use of low dose atropine, and the additive effect of sunlight with Fatropine on myopia progression' were also achieved during the tenure. A customized approach that looks at comprehensive evidence-based care is now required.

Total no. of beneficiaries undergone treatment at the Myopia Clinic in 2023-24	Sample Size
14	3

Source: Sankara Eye Hospital Report

Project details

- **Implementation year:** FY 2023-24
- **Assessment year:** FY 2024-25
- **Beneficiaries:** Individuals suffering from avoidable blindness
- **Location:** Bagalkote, Bangalore and Coimbatore (Tamil Nadu & Karnataka)
- **Number of beneficiaries:** 5,10,650
- **Budget:** INR 5, 90,00,000
- **Implementing partner** – Sankara Eye Foundation, India (SEFI) – Sri Kanchi Kamakoti Medical Trust

Project Activities

- Screening Camps
- Medical Support (Free cataract surgeries and corrective glasses).
- Post-Surgery Follow-Up
- Training and Empowerment
- Community Outreach and Awareness Campaigns.
- Transportation Assistance

Alignment with SDG goals

- SDG 3: Good Health and Well-being
- SDG 1: No Poverty
- SDG 10: Reduced Inequalities
- SDG 17: Partnerships for the Goals

Key Findings

1. Nanna Kannu – Happy Eyes Project, Bagalkote

Total patients treated: 2,93,454.

a. Diagnosis and Treatment During Screening

- (97.1%) 101 of the 104 children screened required corrective glasses.
- (98.1%) 102 of the 104 children screened received treatment or corrective glasses within one month of diagnosis.

b. Vision Improvement and Post-Treatment Outcomes

- All of the 104 children (100%) who underwent surgery at Sankara Eye Hospital reported significant improvement in their vision.
- 98 of the 104 children (94.2%) regularly wore their corrective glasses after receiving them.
- 86 of the 104 children (82.7%) reported significant improvement in vision or overall eye health after the intervention.

- 100% All 104 children who reported having difficulty seeing the blackboard before the intervention reported no issues after treatment.
- 100 of the 104 children (97.1%) reported no difficulty reading textbooks or completing home assignments after the treatment.

c. Experience and Satisfaction

- 97.1% of the respondents reported that clear explanations about their eye condition were given to them.
- 90.4% of the respondents reported being completely comfortable during screening and treatment.
- 100% of the respondents were satisfied with the quality of spectacles and overall service provided.
- 96.2% of the participants rated free treatment and spectacles as the most beneficial aspect of the program.

2. Mobile Rural Vision Screening Program (MRVP), Bangalore

Total patients treated: 19,780.

a. Access to Eye Care Before Screening

- 94.0% Of the respondents lived more than 10 km away from the nearest eye clinic, highlighting accessibility challenges.
- 72.0% Of the respondents said they had not received any treatment for vision conditions in the past two years before the screening camp.

b. Diagnosis and Treatment Outcomes

- 88.0% respondents learned about the MRVP mobile clinic through community announcements or word of mouth, while 10% were informed by local health centers or referrals from family or friends.
- 94.0% of the respondents reported that the staff explained their diagnosis and recommended treatment options very clearly, ensuring complete understanding.
- 42.0% of the respondents said they were diagnosed with Myopia, 32% with hyperopia, 24% with cataract and 10% with Glaucoma or dry eyes during the MRVP screenings.
- 73.6% of the participants received treatment, care, or corrective glasses within a week of screening and remaining 21.1% received it within a month.

c. Post-Treatment Care and Follow-Up

- 72.0% of the respondents wore their corrective glasses regularly, 20% used them only for reading, and 8% wore them occasionally or as needed.
- 83.3% of the respondents confirmed that travel arrangements from home to the hospital and back were provided by the project during their treatment journey.

- 74.0% of the respondents reported receiving clear explanations for follow-up care after treatment at Sankara Eye Hospital.

3. **Cataract Blindness Backlog Free & Visual Impairment Free Taluks (CBBF & VI), Coimbatore**

Total patients treated: 1,65,800.

a. Awareness and Accessibility

- 80.7% of the respondents were unaware of their cataract status before the screening was conducted through the CSR intervention.
- 80.3% of the respondents had never attempted cataract surgery before attending the screening camp.

b. Pre- and Post-Surgery Support

- 97.7% of the respondents received free transportation from home to the base hospital by the project, and 93.2% were satisfied with the arrangements.
- 100% of the respondents were offered free in-patient admission for cataract surgery.
- 97.7% of the respondents said they received clear pre-surgery counselling and information about the cataract surgery procedure.
- 98.9% of the respondents confirmed that they were given information regarding in-patient admission and post-surgical care.
- 98.9% of the respondents felt that the surgery effectively addressed their vision impairment.

c. Impacts of Cataract Surgery

- 78.4% of the respondents reported increased visual clarity and sharpness during daily activities.
- 84.1% of the respondents reported higher self-confidence and self-esteem.
- 76.1% of the respondents reported an improvement in attending and participating in social gatherings and community events.
- 63.6% of the respondents regained the ability to return to work and earn a living.

4. **Vision Centre Project – Coimbatore**

Total patients treated: 5,616.

a. Access to Vision Care Services

- 84.2% of the respondents had not received prior treatment for vision problems in two years preceding the camp.
- 89.5% of the respondents said they avoided visiting eye clinics before using the mobile eye clinic services.

b. Treatment and Improvements

- 94.7% of the respondents had received treatment or corrective glasses between a week and a month of the screening being done.
- 78.9% of the respondents reported improved visual clarity and sharper vision after receiving corrective glasses.

- 100% of the respondents experienced increased self-confidence and self-esteem after using corrective glasses.
- 57.9% of the respondents reported an improvement in their ability to work and earn money after receiving corrective glasses.

5. Gift Of Vision (GOV) Project – Coimbatore

Total patients treated: 26,000.

a. Pre-Treatment Context

- 70.8% of the respondents had not received any treatment for their vision problems in the two years preceding the screening camp.
- 58.3% of the respondents lived more than 10 kms away from the nearest eye clinic which was available, thus making access to eyecare and treatment more difficult.

b. Surgery and Follow-Up Care

- 92.3% of the respondents had pre-surgery counselling for cataracts or corrective surgery.
- 100% of the respondents received free cataract or corrective surgery and free hospital admission.
- 100% of the respondents reported sufficiency of medications and post-surgery care instructions.
- 87.5% of the respondents received treatment, care, or corrective glasses within a month of the screening.
- 92.3% of the respondents reported better visual clarity and sharpness in daily activities following surgery.
- 81.8% of the people who received corrective glasses reported increased economic productivity.
- 100% of the respondents received free spectacles after cataracts or corrective surgery.
- 100% of the respondents found the surgery to be effective in treating vision impairment.
- 100% of the respondents reported feeling more confident in social interactions after receiving corrective glasses or surgery.

Key Impact

Improved Healthcare Awareness

The program raised awareness about eye health, preventive measures, and regular check-ups, promoting proactive healthcare-seeking behaviour in underserved communities.

Educational opportunities

Early interventions for children, such as free spectacles, ensured continuous learning, improved academic performance, and equal participation in classrooms, securing a brighter future for the young beneficiaries.

Restoration of dignity and independence

The program helped individuals regain independence by restoring vision and allowing them to do routine tasks without assistance. This significantly increased their sense of dignity and self-worth, resulting in a sustained improvement in their quality of life.

Enhanced Social Inclusion

Improved vision enabled beneficiaries to reconnect with their families and communities, participate in social gatherings, and rebuild relationships. This strengthened community ties and reduced social isolation, which is common among people with vision impairments.

Economic Empowerment

The program increased household income by allowing beneficiaries to return to work or start earning again. Restored productivity had a knock-on effect, helping to boost local economic development and break the cycle of poverty.

CHAPTER 1

INTRODUCTION

1.1 NEED OF THE PROGRAM

India faces a significant burden of preventable blindness, with rural and underserved communities being disproportionately affected due to a lack of access to quality eye care services. The challenges of unavailability, unaffordability, and a lack of awareness about preventive and curative eye care have resulted in a high prevalence of visual impairment, particularly among children and the elderly.

According to WHO estimates, the vast majority of blindness cases in India can be prevented or treated with timely intervention. Children in rural areas frequently suffer from undiagnosed refractive errors, which cause academic difficulties and limit opportunities for personal growth. Cataracts and other age-related visual impairments are common among adults, particularly the elderly, and have a significant impact on their quality of life and productivity. The lack of available eye care services in remote areas exacerbates these problems, leaving many people untreated.

The Happy Eyes Program, in collaboration with the Sankara Eye Foundation, addresses these critical needs by offering comprehensive and accessible eye care to underserved communities. The program's multi-pronged approach, which includes Mobile Rural screenings, cataract surgeries, free spectacles and the establishment of vision centres, aims to reduce the prevalence of avoidable blindness and improve overall eye health while ensuring equitable access to quality eye care for vulnerable populations.

1.2 OBJECTIVE OF THE PROGRAM

The program aims to eliminate preventable blindness and ensure equal access to quality eye care services, particularly for underserved communities. The program's specific objectives are as follows:

- To Identify and address vision impairments in school-aged children through screening, spectacle distribution, and medical/surgical interventions.
- To ensure early detection and treatment of vision defects among rural elderly men and women.
- To eliminate visual impairments in taluks through door-to-door screenings, cataract surgeries, and ongoing community engagement.
- To provide accessible and affordable primary eye care services in rural areas, supported by teleophthalmology and referral systems.

1.3 ABOUT TITAN COMPANY LIMITED

Titan Company Ltd is the organization that brought about a paradigm shift in the Indian watch market when it introduced its futuristic quartz technology, complemented by international styling. With India's two most recognized and loved brands Titan and Tanishq to its credit, Titan Company Ltd is the fifth largest integrated own brand watch manufacturer in the world.

The success story began in 1984 with a joint venture between the Tata Group and the Tamil Nadu Industrial Development Corporation. Presenting Titan quartz watches that sported an international look, Titan Company Ltd transformed the Indian watch market. After Sonata, a value brand of functionally styled watches at affordable prices, Titan Company Ltd reached out to the youth segment with Fastrack, its third brand, trendy and chic. The company has sold 150 million watches world over and manufactures over 15 million watches every year. Over the last four decades, Titan has expanded into underpenetrated markets and created lifestyle brands across different product categories including fragrances (SKINN), accessories and Indian dress wear (Taneira) and thoughtfully designed Women's Bags (IRTH).

Backed by over 8,000 employees, two exclusive design studios for watches and jewellery, 10 manufacturing units, and innumerable admirers' world over, Titan Company Ltd continues to grow and set new standards for innovation and quality. The organization is all geared to repeat the Titan and Tanishq success story with each new offering.

ABOUT NGO PARTNER –

About Sankara Eye Foundation, India (SEFI)

Sankara Eye Foundation, India (SEFI), a unit of Sri Kanchi Kamakoti Medical Trust, has been a leader in transforming eye care in India for 47 years. Founded in 1977 by Dr. R.V. Ramani, SEFI has grown from a single hospital to a network of 12 super-speciality eye hospitals across nine states. With a mission to eliminate needless blindness, SEFI focuses on addressing the challenges of accessibility and affordability of quality eye care, particularly in rural India.

SEFI's unique and sustainable Community Outreach Model has impacted over ten million lives through initiatives such as the Gift of Vision program, which provides free eye care services to 80% of its beneficiaries by cross-subsidizing costs through patient payments. SEFI, which combines world-class infrastructure, innovative practices, and effective financial planning, continues to provide accessible, cost-effective eye care and is one of India's largest community eye care providers.

CHAPTER 2

RESEARCH METHODOLOGY

Titan Company Limited assigned SoulAce to conduct a study on the work done by the Sankara Eye Foundation, India (SEFI) to assess the impact of its CSR initiative in the field of eye care and evaluate the effectiveness of SEFI's community outreach and vision restoration programs.

2.1 Objectives of the Study

The primary objectives of the study were to:

- To evaluate the immediate impacts of the program implemented and assess the enduring impacts of the program.
- To measure the extent to which the program has enhanced access to quality eye care, improved community awareness, and contributed to the reduction of preventable blindness in underserved regions.
- To provide insights into the strengths and areas for improvement of the program implementation.

2.2 Use of Mixed Method Approach

The evaluation adopted a comprehensive mixed-methods approach, integrating both qualitative and quantitative research methodologies. The qualitative component allowed for an in-depth exploration of the subjective experiences and viewpoints of key stakeholders offering a nuanced grasp of their perspectives. Concurrently, quantitative methods facilitated the gathering and analysis of numerical data obtained from the beneficiaries- electricians and plumbers, yielding statistical insights and identifying trends. By employing a mixed methodology approach, the evaluation leveraged the strengths of both qualitative and quantitative techniques, resulting in the collection of robust and diverse data. This holistic approach provided a comprehensive understanding of the project & impact, ensuring a well-rounded and multifaceted assessment.

2.2.1 Application of Qualitative Techniques

Qualitative methods provide insights into the real-life experiences, viewpoints, and stories of beneficiaries and stakeholders like those responsible for project implementation. Engaging these stakeholders through in-depth interviews and focus group discussions allows for a comprehensive examination of observed changes. These methods facilitate a detailed exploration of improvements in the overall skilling and employability of the beneficiaries through the intervention. By capturing the lived realities and narratives of those involved, qualitative approaches offer a nuanced understanding of the project & impact.

2.2.2 Application of Quantitative Techniques

Quantitative techniques are employed to evaluate the project & impact through data analysis objectively. Surveys and questionnaires are utilised to collect numerical data on various indicators from beneficiaries of each program. By comparing the data gathered before and after the intervention, the project & effects and the enhancements it has facilitated can be assessed. These quantitative methods provide a measurable approach to gauge the project & outcomes and evaluate its success through statistical evidence.

2.3 Ensuring Triangulation

To bolster the reliability and validity of its conclusions, the study implemented various triangulation strategies. Data triangulation was achieved by gathering information from diverse sources, including field notes, interviews with beneficiaries, and feedback from project staff. This extensive data collection process facilitated a comprehensive evaluation of the program & impact. Additionally, methodological triangulation was employed, utilising a range of research methods such as surveys, interviews, and focus group discussions. This approach allowed for cross-verification of information and helped

mitigate potential biases inherent to any single method. Through the implementation of these triangulation techniques, the study ensured a robust and dependable analysis, reinforcing the trustworthiness and credibility of its findings.

Design Snapshot

7. **Name of the project:** Happy Eyes Program (Nanna Kannu, MRVP, CBBF & VI, Vision Centres, Gift of Vision and Myopia Clinic)
 - **Implementing agency:** Sankara Eye Foundation, India (SEFI), a unit of Sri Kanchi Kamakoti Medical Trust
 - **Research design used:** Descriptive research design.
 - **Sampling technique:** Purposive sampling,
 - **Total Sample: 285**

Sub-programmes	Sample Size
Nanna Kannu	4
MRVP	
CBBF & VI	
Vision Centres	
Gift Of Vision	
Myopia Clinic-Qualitative	Interviews

- **Qualitative method used:** Semi-structured interviews, testimonials and focus group discussions with beneficiaries along with key stakeholders.

2.4 Key Stakeholders

- Individuals with Vision Impairments
- Sankara Eye Foundation, India (SEFI)
- Community Leaders and members
- Volunteers and Non-Medical Staff

2.5 Study Tools

Questionnaires for primary beneficiaries – Structured questionnaires were developed reviewing the project details for each of the focus areas and indicators were pre-defined before conducting the surveys. Stakeholders were identified across the focus areas. Semi-structured interviews and focus group discussions were conducted with the project staff.

2.6 Ethical Considerations

The impact evaluation research was guided by a strong ethical framework, ensuring that the study was conducted responsibly and ethically. Adhering rigorously to ethical principles of research, the study prioritised the rights and well-being of participants throughout the process. Informed consent was meticulously obtained by providing comprehensive information about the study & objectives, procedures, potential risks, and benefits, allowing participants to make informed decisions about their involvement after having their questions addressed. Robust measures were implemented to uphold confidentiality and privacy, with data securely stored and accessible only to authorised personnel, and participant identities protected through anonymization or coding techniques. Crucially, participation was fully voluntary, free from coercion or pressure, underscoring the importance of autonomy and respect for individual choice. Throughout the study, participants were treated with the utmost respect, dignity, and fairness, with their well-being being the top priority and necessary support or assistance provided whenever needed.

CHAPTER 3

KEY FINDINGS AND ASSESSMENT OF IMPACT

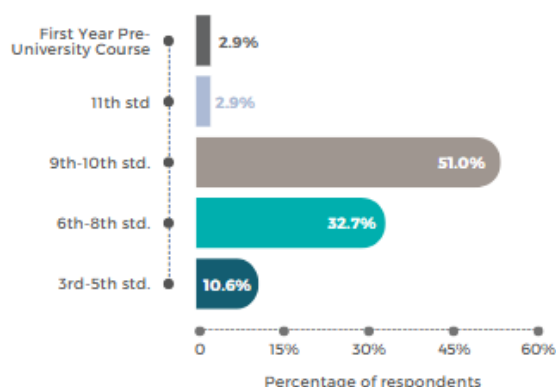
This chapter compiles and analyses data from multiple sources to evaluate the overall impact and effectiveness of the program. It integrates qualitative and quantitative insights gathered through extensive surveys and detailed interactions with stakeholders. Drawing on diverse viewpoints, the chapter provides an in-depth analysis of how well the program has met its intended goals and contributed to long-term sustainability.

PROJECT 1: NANNA KANNU: Comprehensive Eye Care Programme for Children Sankara Eye Hospital, Bangalore

A. DEMOGRAPHIC INFORMATION

1. Present grade of the respondents

CHART 1: PRESENT GRADE OF THE RESPONDENTS

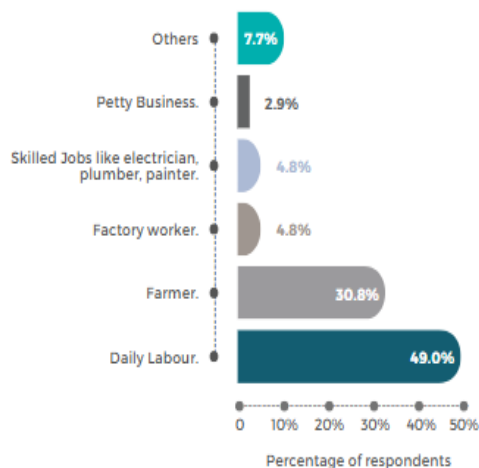


Among the participants in this study, 62.5% were female and 37.5% were male (Source: Primary data). The majority (51%) are from grades 9th and 10th, followed by grades 6th and 8th, indicating significant participation of students in the age group 10-15 years. A smaller number of respondents are from grades 3rd and 5th, as well as pre-university levels, reflecting the program's focus on all sections of school-age children. The Program has enabled early screening among school students leading to early

intervention. It can be stated that early intervention is vital for achieving better outcomes for vision conditions. It is interesting to note that most of the respondents affirmed that it was the first time they participated in vision screening, and they would not have known of their vision conditions without the present screening intervention.

2. Parent's Occupation

CHART 2: PARENT'S OCCUPATION



The data on parents' occupations reveals the socioeconomic backgrounds of the schoolchildren. A sizable proportion of the respondents' parents work (49%) as daily wage labor or farm Labour associated with lesser earning potential.

A Smaller segment (4.8%) were factory workers, skilled labourers such as electricians and plumbers, and small business owners. Cooks, vegetable vendors, petty shop owners and individuals working in hotels or local services constituted the rest of the occupations. It can be

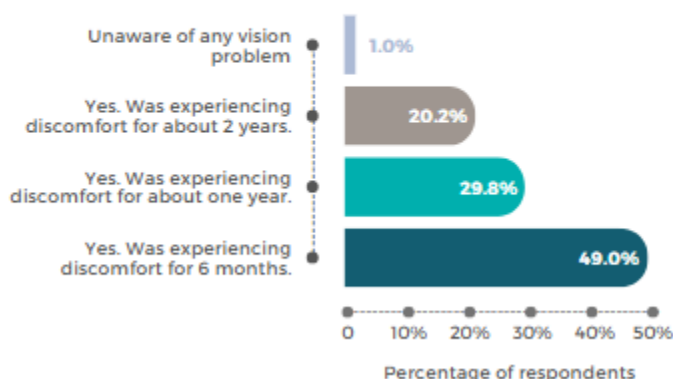
stated that parents of all the school children were involved in financially less productive jobs, indicating their economic vulnerability. It can be expected that community members belonging to this segment of society have very less resources to spare for eye care, often leading to the postponement of screening till the emergence of a critical condition warranting urgent medical intervention. Thus it can be inferred that the program has rightly catered to the deserving sections of the society.

During an interaction with the impact assessment team, Mr. Nigappa, a farm labourer and father of a 3rd-grade child from Bagalkot District, stated that the Nanna Kannu project has greatly benefited our community by raising awareness of eye health and nutrition. Through screenings and guidance, parents like me now understand the significance of periodic eye tests and Vitamin A-rich diets. I hope that this essential program expands to other schools in our district.

B. SCREENING PROCESS AND DIAGNOSIS

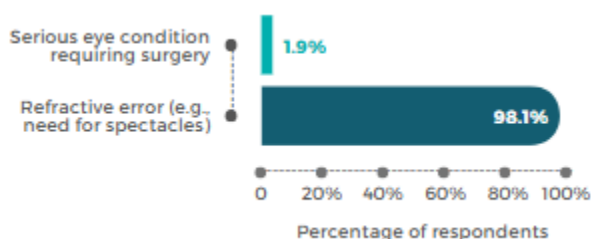
3. Vision Discomfort Experienced Before attending the Screening Camp

CHART 3: VISION DISCOMFORT EXPERIENCED BEFORE ATTENDING THE SCREENING CAMP



This data demonstrates the magnitude of the problem, as most respondents reported experiencing vision discomfort before the screening camp, with the majority experiencing problems for six months to a year. A smaller group endured suffering for up to two years. This data validates the point that economically weaker people tend to ignore vision problems unless emergency treatment is required. This postponement of eye care and treatment has the potential of exacerbating their eye condition resulting in their vision problems assuming serious proportions in due course. Thus, it can be inferred that the school screening process undertaken through this initiative has provided an opportunity for the students for screening and treatment.

4. Diagnosis results During the Screening



The screening results indicate that nearly all participants were diagnosed with refractive errors, highlighting the extensive requirement for corrective interventions, such as spectacles, among school-aged children. A limited number were diagnosed with severe ophthalmic conditions necessitating surgical intervention. These findings underscore the significance of the initiatives in effectively addressing both common and critical vision issues.

C. INSIGHTS ON POST-SURGERY FOLLOW-UP AND TREATMENT

The Nanna Kannu Programme has made significant progress in providing quality eye care, particularly cataract surgeries and corrective treatments. However, post-operative care and treatment are critical to ensuring long-term success and benefits for beneficiaries. Here are some key insights into post-surgical care and follow-up measures.

Structure of Follow-Up Care in the Programme

First Follow-Up (Within a Week): Patients undergo an initial assessment to check for any immediate post-surgery complications.

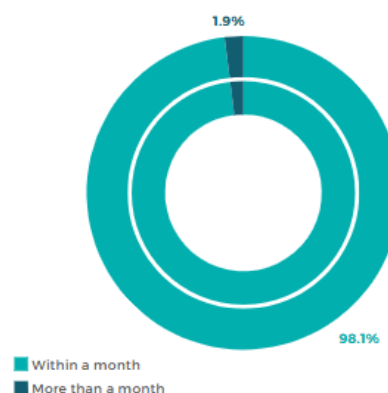
Second Follow-Up (After a Month): Evaluation of vision improvement, healing progress, and the possible need for additional interventions like prescription glasses.

Long-Term Monitoring: Some beneficiaries, especially the elderly, may require continuous monitoring to manage age-related vision deterioration.

5. Time Taken to Receive Treatment After Screening

The majority of respondents received treatment, care, or corrective glasses within a month of the

CHART 5: TIME TAKEN TO RECEIVE TREATMENT AFTER SCREENING



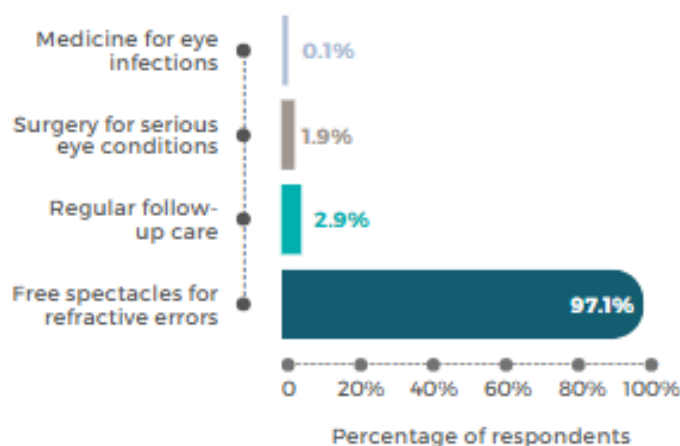
screening. A small number reported that it took more than a month to receive corrective glasses.

It can be inferred that almost all the students received corrective glasses promptly, which is essential for maintaining proper eye care.

"Our collaboration with Sankara Eye Hospital has been seamless. After screening the students, we send the list of those who need glasses or additional treatment to the Nanna Kannu team, who then coordinate with the hospital. The hospital staff is extremely professional, and their services are excellent. This coordination ensures that every child receives the care they require without delay" (Ms LakkaVa, a teacher at Chimada Primary School).

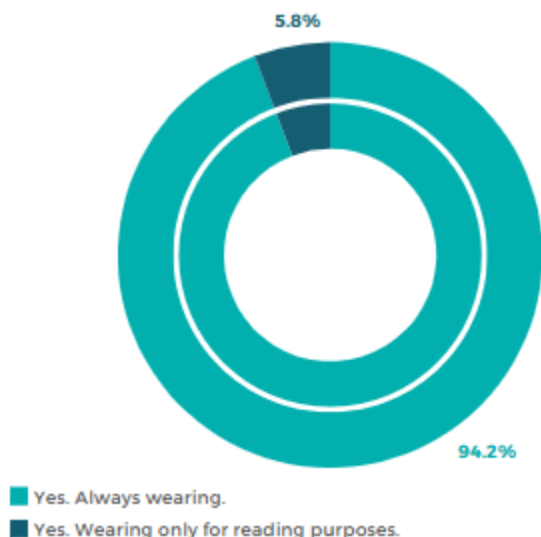
6. Treatment or Care Received After Diagnosis

CHART 6: TREATMENT OR CARE RECEIVED AFTER DIAGNOSIS



The Nanna Kannu project provided treatment and care that met a wide range of needs. The majority of respondents (97.1%) received free spectacles to address refractive errors. A smaller number benefited from follow-up care, surgical interventions for serious conditions, or eye infection medications. Thus it can be said that the CSR intervention provided the appropriate remedial intervention as required.

7. Regularity of Wearing Corrective Glasses After Prescription



Most respondents (94.2%) reported wearing their prescribed corrective glasses always, while a limited number of respondents indicated that they wear glasses solely for reading purposes only. It is a known fact that consistent usage of prescribed corrective glasses leads to better vision outcomes, and it is encouraging to find that all the respondents complied with the medical advice provided for vision correction.

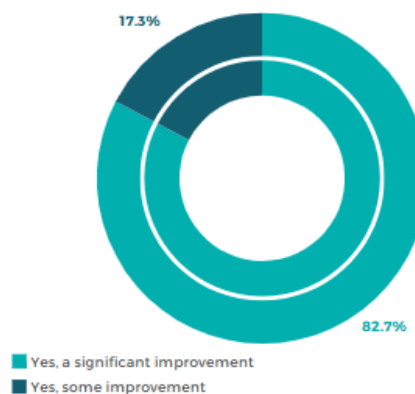
The Nanna Kannu Programme's commitment to follow-up care is crucial in maximizing the impact of eye surgeries and corrective treatments. Strengthening post-surgery engagement, accessibility, and education will enhance long-term vision health, enabling beneficiaries to lead more independent and productive lives.

D. OUTCOME AND IMPACT OF THE PROGRAM

8. Improvement in Vision or Eye Health After Treatment

The majority of respondents (82.7%) reported substantial improvement in their vision or eye health following treatment. A minority indicated some improvement in their vision condition after the treatment. This demonstrates the program's efficacy in tackling vision-related concerns and improving the quality of life for school-aged children.

CHART 8: IMPROVEMENT IN VISION OR EYE HEALTH AFTER TREATMENT



Mr Nigappa, the father of a girl child, stated that he is completely satisfied and that his entire family is extremely grateful for the Nanna Kannu project and the free treatment provided by TITAN. My daughter's squint has been corrected, and she is now confident and happy. Her academic performance has improved, and she now concentrates more on her studies. Thank you to the volunteers, teachers, and the Sankara Eye Foundation for this great initiative.

Total Children Screened	Spectacles Prescribed	Spectacles Distributed	Pediatric Surgeries	Teachers/Volunteers Trained
2,93,454	9,114	6,467	132	1,479

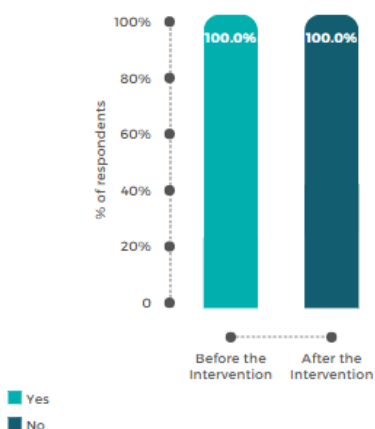
Source: Sankara Eye Foundation, Report

The project screened an impressive 2,93,454 children, identifying 9,114 who needed corrective measures, and successfully distributed spectacles to 6,467 children, ensuring better access to critical vision aids. Furthermore, 132 pediatric surgeries were performed, addressing serious eye conditions and demonstrating the project's emphasis on critical care. To ensure sustainability, 1,479 teachers and volunteers were trained, resulting in a network of people capable of identifying and addressing vision-related issues in children. This comprehensive approach demonstrates the project's dedication to early detection, timely intervention, and capacity development for long-term success.

Ms. LakkaVa, a teacher at Chimada Primary School, stated that "as a teacher, the training I received from the Nanna Kannu - Happy Eyes Project was extremely helpful." I trained how to use screening tools effectively and identify vision issues in my students. With this knowledge, I was able to screen all of the children in my class and refer those with vision problems for further treatment. It's rewarding to be a part of a program that makes such a big difference in students' lives."

9. Difficulty in Seeing the Blackboard Clearly (Post-Treatment Comparison)

CHART 9: DIFFICULTY IN SEEING THE BLACKBOARD CLEARLY (POST-TREATMENT COMPARISON)



It is common knowledge that students with vision problems do face problems in seeing the blackboard. Having a clear view of materials written on the blackboard is the very basic requirement for learning to occur in a classroom setting.

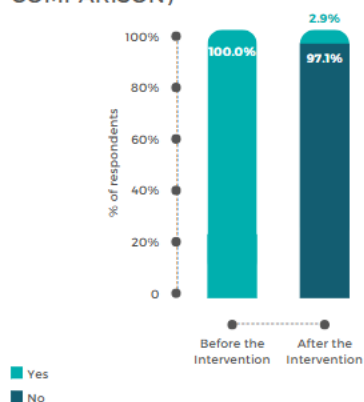
Before the intervention, all participants reported difficulties in seeing the blackboard properly. After the program's screenings and receipt of corrective glasses and/or appropriate treatment, none of the

respondents reported any difficulty in looking at the blackboard.

Most of the students who interacted during the study expressed that they were very happy and relieved of their difficulty in seeing the contents on the blackboard. The newfound ability has also enhanced their classroom learning and experience.

10. Difficulty in Reading Textbooks (Post-Treatment Comparison)

CHART 10: DIFFICULTY IN READING TEXTBOOKS (POST-TREATMENT COMPARISON)



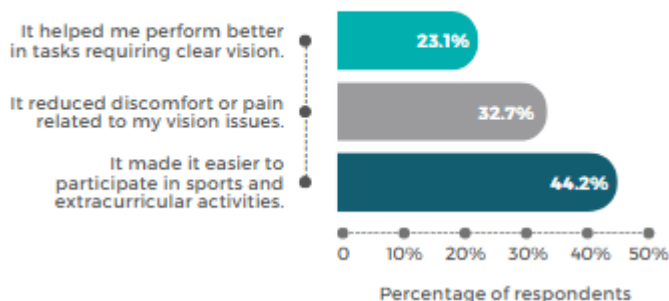
In corroboration of the above analysis, all the respondents reported difficulty in reading textbooks or writing home assignments before the Intervention.

After the Intervention, 97.1% of the respondents reported facing no difficulty about the same. Only 2.9% of the respondents still face some difficulty in reading textbooks and writing home assignments and these respondents could require further screening and treatment to address their difficulty.

On the whole, it is encouraging to note, that the program has provided access for students with vision conditions to look at the blackboard and reading materials without difficulty, which is a crucial factor for learning to occur.

11. Impact of Glasses or Surgery on Daily Life

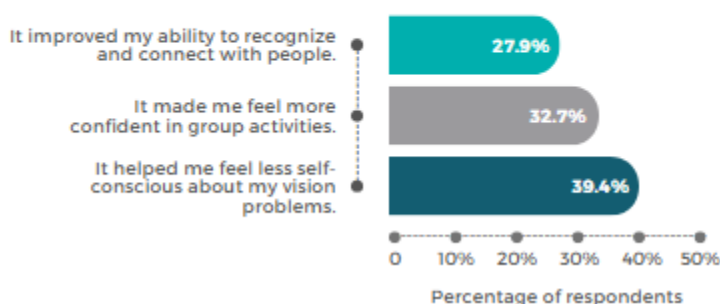
CHART 11: IMPACT OF GLASSES OR SURGERY ON DAILY LIFE



The data shows how the Nanna Kannu project has transformed students' daily lives. A significant number of respondents (44.2%) reported increased participation in sports and extracurricular activities, while many (32.7%) reported less discomfort or pain due to vision problems. Others (23.1%) reported improved performance in tasks that required clear vision, demonstrating the project's positive impact on both physical and academic activities.

12. Impact of Corrective Glasses or Treatment on Interactions with Others

CHART 12: IMPACT OF CORRECTIVE GLASSES OR TREATMENT ON INTERACTIONS WITH OTHERS



The project had a beneficial impact on participants' social interactions and confidence. A wide range of participants (39.4%) indicated a reduction in self-consciousness regarding their vision impairments following their getting of corrective glasses or treatment.

Enhanced confidence in group activities was observed (32.7%), alongside an improved capacity to recognize and engage with people was reported by a considerable proportion (27.9%) of the respondents.

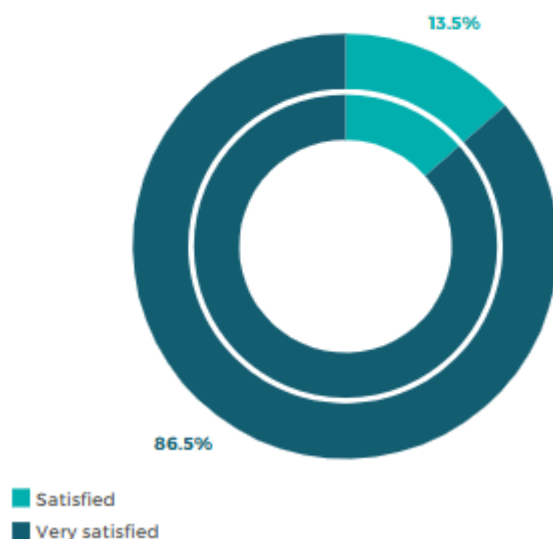
This points to the fact that apart from the Physical impact of vision improvement, the program also had a psychological impact on the respondents by improving their self-esteem and social skills.

A teacher stated, "I have seen remarkable changes in students since receiving treatment through the Nanna Kannu project. Children who were previously shy and hesitant to participate in class activities now have more confidence. Their academic performance has improved, and they are now more focused and enthusiastic. This program has improved both their vision and their overall development."

E. FEEDBACK AND SATISFACTION

13. Satisfaction with the Quality of Spectacles and Treatment Provided

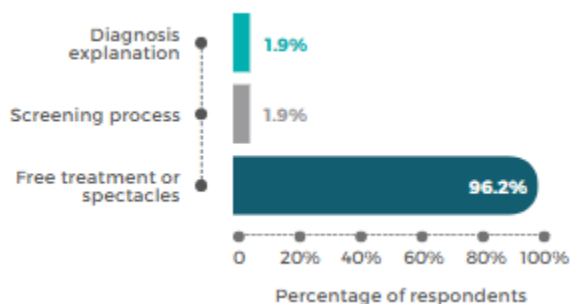
CHART 13: SATISFACTION WITH THE QUALITY OF SPECTACLES AND TREATMENT PROVIDED



The beneficiaries were extremely satisfied with the quality of the spectacles and treatment provided. The majority of participants reported being very satisfied, with a smaller group indicating satisfaction. This demonstrates the program's success in meeting expectations and providing effective eye care solutions to schoolchildren.

Ms Kavitha a parent said that "The Nanna Kannu project has been a blessing to my child and our family." The teacher's initial screening, as well as volunteer guidance, ensured that patients received timely treatment at Sankaraa Eye Hospital. The assistance with documentation, transportation, and follow-ups streamlined the process. My child's vision has now been restored, and we are deeply grateful.

14. Most Helpful Aspect of the Program



The program's comprehensive approach, which includes screening, diagnosis, and treatment, is critical for addressing vision-related issues. However, the provision of free treatment and spectacles emerged as the program's most valued aspect, with the majority of respondents appreciating its significant impact.

Case Study: Transforming Life of Ayyappa Chalabi through Nanna Kannu-Happy Eye Project

Ayyappa Chalabi, a 7-year-old boy from a low-income family in Bagalkot district, had difficulty seeing because he squinted both eyes. His father, an agricultural labourer with a limited income, was unable to afford treatment. The family heard about the Nanna Kannu - Happy Eyes Project from schoolteachers and volunteers. Ayyappa's condition was found during a school screening, and he received diagnostic tests and surgery at Sankaraa Eye Hospital. Following surgery, Ayyappa's squint was corrected, boosting his confidence and physical appearance. He is now more focused on his studies, actively participates in class, and strives to achieve his goals. His parents, who were assisted by project volunteers throughout the process, are overjoyed with the transformation and proud of his progress. Ayyappa is no longer shy or teased by peers, and his family is optimistic about his bright future, free of the limitations of untreated vision problems.

The Nanna Kannu - Happy Eyes Project has significantly improved students' vision health, academic performance, and confidence, with a long-term impact on their behaviour and the community. By encouraging stakeholder collaboration and emphasising preventive eye care, it has laid the foundation for sustainable health initiatives. The next project is the MRVP (Mobile Rural Vision Screening Program), which

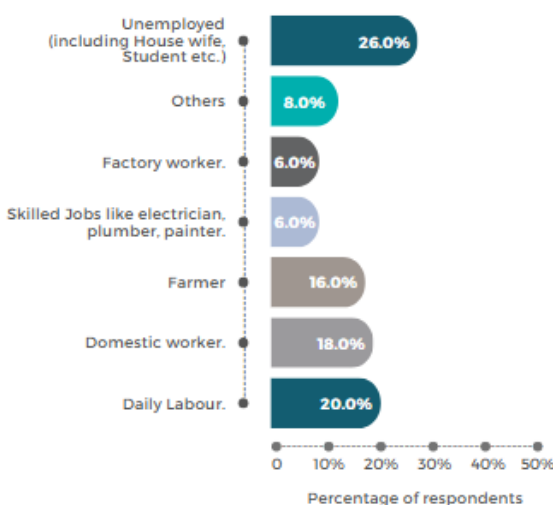
is being implemented to improve rural eye health and provide transformative benefits to underserved communities.

PROJECT 2: MRVP – HAPPY EYES PROJECT- SANKARA EYE HOSPITAL, BANGALORE

A. SOCIOECONOMIC PROFILE OF RESPONDENT

1. Occupation of the Respondents

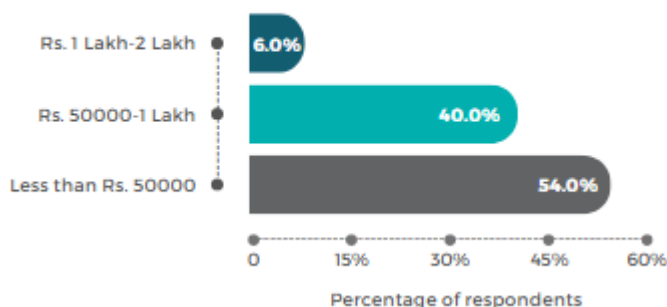
CHART 15: OCCUPATION OF THE RESPONDENTS



The sample constituted people from lower economic strata like daily labor, domestic workers, farm labor, skilled workers and factory workers, besides a small number of Housewives. It can be stated that all these jobs are associated with very low financial returns and the MRVP program has rightly served the poor and deserving sections of the society.

2. Annual Family Income

CHART 16: ANNUAL FAMILY INCOME



The majority of respondents to the MRVP project reported an annual family income of less than Rs. 50,000, indicating that the program was primarily for low-income households. A smaller group earned between Rs. 50,000 and

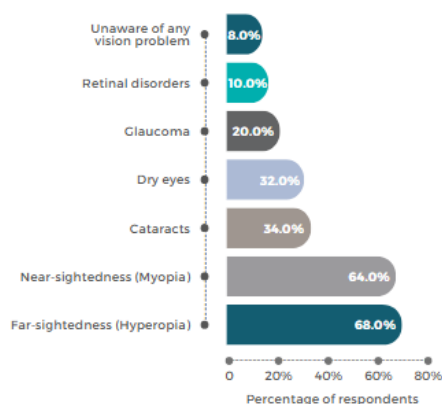
Rs. 1 lakh, with very few families falling into the higher income bracket.

Mr Paramesh, the project coordinator, stated that ensuring inclusivity was a top priority. We focused on reaching out to the elderly, women, and economically disadvantaged groups to ensure that everyone had an equal opportunity to benefit from the program. This program is more than just medical intervention; it is about changing people's lives and empowering communities.

B. EYE HEALTH HISTORY AND PRE-SCREENING CONDITIONS

3. Vision Conditions Experienced Before Attending the Screening Camp

CHART 17: VISION CONDITIONS EXPERIENCED BEFORE ATTENDING THE SCREENING CAMP



Before attending the MRVP screening camp, many respondents had several pre-existing conditions including far-vision conditions like hyperopia, myopia, cataract, dry eye, and glaucoma. Only a negligent section (8%) of the respondents were not aware of any vision issues.

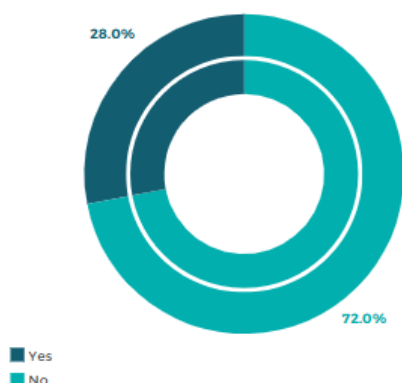
Interactions with the respondents revealed that though they were aware of their vision conditions

we had had a follow-up treatment for 2 years and more before the screening camp, which was attributed to challenges in accessing and affording proper vision care.

A parent stated, "The fact that all services, including spectacles, surgeries, and follow-up visits, are provided free of cost has made a significant difference in our community. Many families here cannot afford such treatments, but this initiative has removed the financial barrier for us."

4. Undergone Treatment for Vision Conditions in the 2 Years Before Screening Camp

CHART 18: UNDERGONE TREATMENT FOR VISION CONDITIONS IN THE 2 YEARS BEFORE SCREENING CAMP



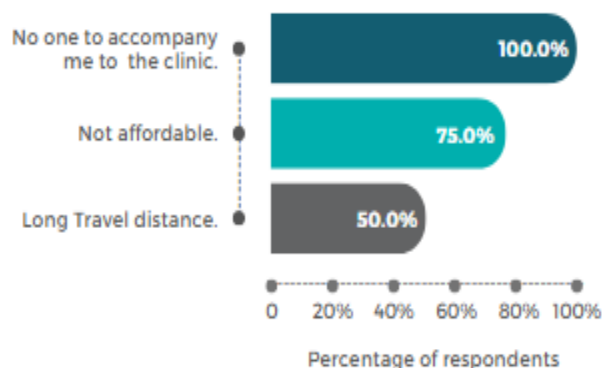
In corroboration of the previous analysis, the majority of respondents (72%) did not receive treatment for their vision conditions in the two years before attending the MRVP screening camp, indicating limited access to eye care. It is a known fact that lack of consistent follow-up care can lead to deterioration of vision in due course and a majority of the respondents could not access proper vision care for close to 2 years.

This shows that challenges of accessibility and affordability for proper eye care prevented these people from availing the same, and the MRVP project provided them with a gateway to access much-needed vision care.

This highlights the importance of the MRVP project in providing timely, free treatment to underserved communities, thereby improving their eye health and quality of life.

5. Reasons for Avoiding Eye Clinic Visits Previously

CHART 19: REASONS FOR AVOIDING EYE CLINIC VISITS PREVIOUSLY



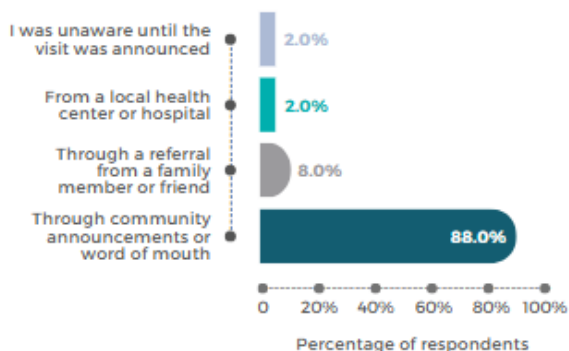
Respondents cited all three reasons for avoiding eye clinic visits, including the long travel distance, affordability concerns, and the lack of someone to accompany them. These challenges highlight the importance of the MRVP project in providing mobile eye care services, removing barriers, and ensuring that underserved populations receive timely treatment.

C. ACCESS TO EYE CARE SERVICES, SCREENING, AND DIAGNOSIS

6. Source of Information About the MRVP Mobile Clinic Visit

The majority of respondents became aware of the MRVP mobile clinic through community announcements or word of mouth, demonstrating the program's broad grassroots reach and community involvement. A smaller number were informed by family, friends, or local health clinics. This emphasises the importance of using local networks to increase awareness and participation in such initiatives.

CHART 20: SOURCE OF INFORMATION ABOUT THE MRVP MOBILE CLINIC VISIT

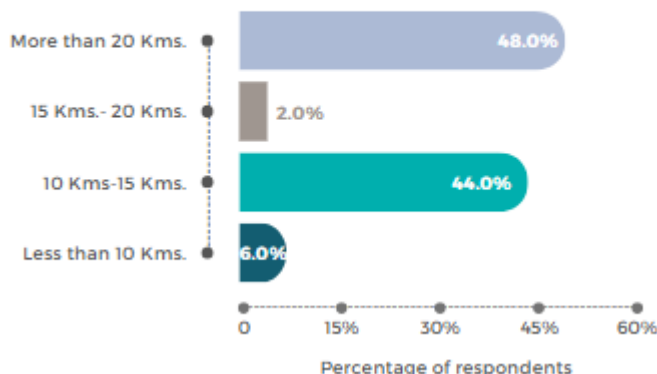


"As Project Coordinator, my role in this program was to bridge the gap between the community and healthcare providers, ensuring that everything ran smoothly at all stages. Identifying target areas, collaborating with local organisations, and planning logistics were all critical components of the planning phase. We tailored the program to the community's specific needs and expectations by consulting with local leaders and conducting surveys." (Mr Paramesh, Project Coordinator).



7. Distance of the Eye Clinic from Home

CHART 21: DISTANCE OF THE EYE CLINIC FROM HOME

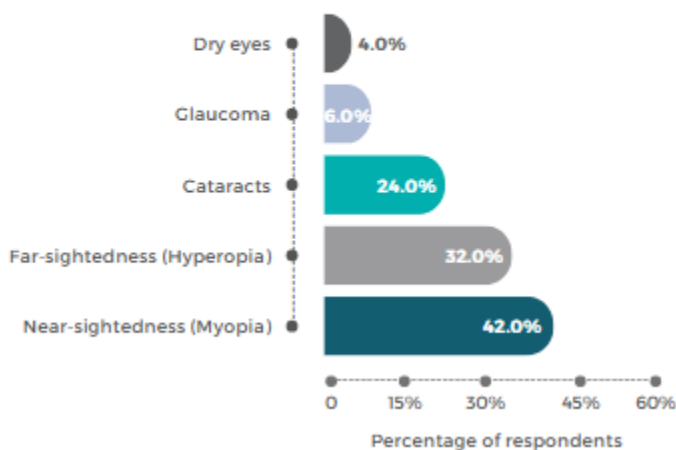


The data show that the majority of respondents (94%) lived more than 10 kilometers from an eye clinic, with nearly half living more than 20 kilometers away. This highlights the significant difficulty in accessing eye care services due to travel distances. The MRVP mobile

clinic effectively bridges this gap by providing critical eye care services directly to underserved communities.

8. Vision Condition Diagnosed for the First Time at Screening Camp

CHART 22: VISION CONDITION DIAGNOSED FOR THE FIRST TIME AT SCREENING CAMP



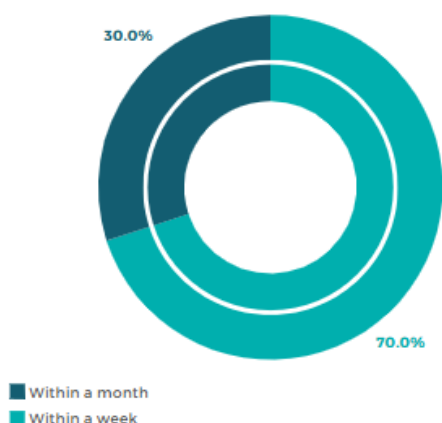
The MRVP screening camp revealed a variety of vision conditions among respondents for the first time, with near-sightedness and far-sightedness being the most common. Cataracts, glaucoma, and dry eyes were also diagnosed in several people. These findings highlight the program's role in facilitating early detection and targeted treatment for a variety of eye health issues.

The project team stated, "Through our outreach, we observed a high prevalence of cataracts among elderly people, particularly farmers and outdoor labourers." Women faced more barriers to timely eye care, emphasising the critical need for targeted interventions in underserved communities."

D. TREATMENT AND FOLLOW-UP CARE

9. Time Taken to Provide Treatment, Care, or Corrective Glasses After Screening

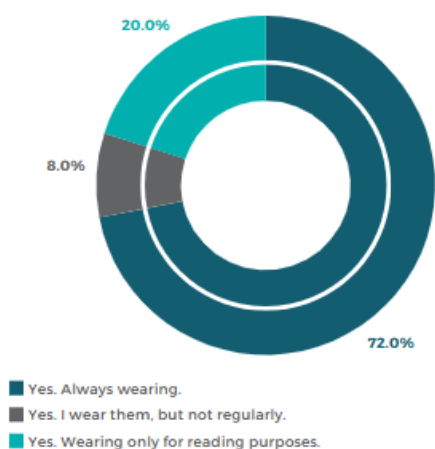
CHART 23: TREATMENT AND FOLLOW-UP CARE



The MRVP project ensured timely post-screening care, with the majority of respondents receiving treatment or corrective glasses within a week and others within a month. This efficiency demonstrates the program's commitment to timely intervention, which reduces delays in addressing vision issues and improves access to quality eye care.

10. Regular Use of Corrective Glasses After Prescription

CHART 22: VISION CONDITION DIAGNOSED FOR THE FIRST TIME AT SCREENING CAMP



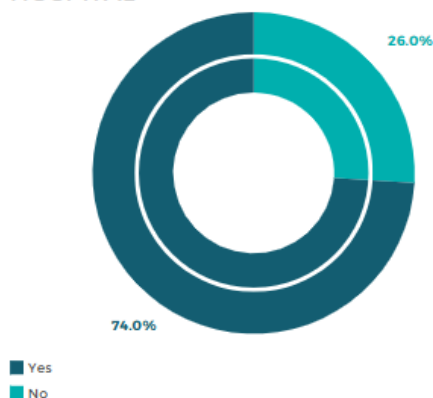
The project has effectively promoted the regular use of corrective glasses among the majority of respondents (72%), with a notable proportion wearing them consistently. Some of them (20%) wear them only for specific tasks like reading or writing.

However, the remaining 8% of respondents did not wear corrective glasses regularly, which could be due to a variety of factors. Some people may experience discomfort, headaches,

or an improper fit, making it difficult to wear the glasses consistently. Others, particularly those who have only recently received them, may not have developed the habit of using them regularly.

11. Clarity of Follow-Up Care Explanation After Treatment at Sankara Eye Hospital

CHART 23: CLARITY OF FOLLOW-UP CARE EXPLANATION AFTER TREATMENT AT SANKARA EYE HOSPITAL



Most of the people (74%) who answered said that they got clear explanations of their follow-up care after treatment at Sankara Eye Hospital. This made it easier for them to stick to their treatment plan. A big part of them, though, said things weren't clear, which shows the scope to improve and give more specific instructions to make post-treatment care work better.

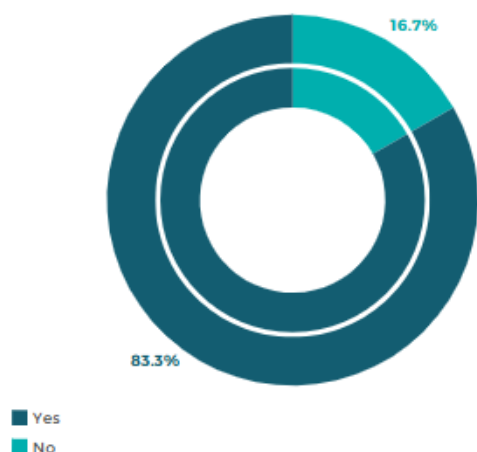
"As a surgeon, specialises in cataract surgery and community eye care, it has been both a privilege and a responsibility to serve underserved populations through these initiatives. Witnessing the profound transformation in patients' lives after they regain their vision is extremely rewarding. Every surgery is a step towards enabling people to live independent and productive lives. The challenges in reaching remote areas and overcoming obstacles such as a lack of awareness and transportation are significant, but the gratitude and joy expressed by patients make it all worthwhile. Our mission is not only to restore sight but also to instil hope and confidence in people who have long struggled with vision loss.

Working with dedicated teams and community organisations has been critical to increasing access to quality eye care. Together, we are creating a future in which preventable blindness is no longer a barrier to leading a fulfilling life." **(Dr Anand Balasubramaniam, Cataract Surgeon and Specialist in Cornea and Refractive Services)**

E. FREE OF COST IN-PATIENT ADMISSION CHARGES FOR CATARACT SURGERY

12. Arrangements for Travel from Home to Hospital and Back

CHART 24: ARRANGEMENTS FOR TRAVEL FROM HOME TO HOSPITAL AND BACK



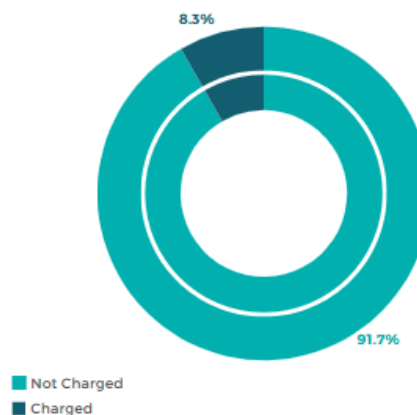
All participants who underwent cataract surgery confirmed that the procedure was entirely free (Source: Primary Data). Moreover, most respondents (83.3%) indicated that travel logistics from home to the hospital and return were streamlined, enhancing accessibility and substantially reducing the burden on patients.

A beneficiary from Kaveri Nagar stated that many people had difficulty arranging travel for surgeries. While the program provided travel assistance, a few beneficiaries had to make their arrangements due to unavailable travel tickets. This showed a gap in the logistical support provided.

13. Charges for In-Patient Admission During Cataract Surgery

Almost all participants who received cataract surgery indicated that there were no fees for in-patient admission during their treatment, providing financial relief and accessibility for the beneficiaries.

CHART 25: CHARGES FOR IN-PATIENT ADMISSION DURING CATARACT SURGERY



Case Study: Transforming Lives with Free Cataract Surgery

Nagarathnamma, a 49-year-old homemaker from Ullala Upanagar, Bengaluru, had been dealing with poor vision for several years. Everyday tasks like cooking, reading, and recognising faces became more difficult, leaving her reliant on others and deeply frustrated. Financial constraints and a lack of awareness kept her from seeking treatment quickly.

Her life changed when she heard about Sankara Hospital's free cataract surgery program at a local eye camp. Despite her initial fears about the procedure, the hospital staff's supportive counselling and clear explanations reassured her, motivating her to proceed.

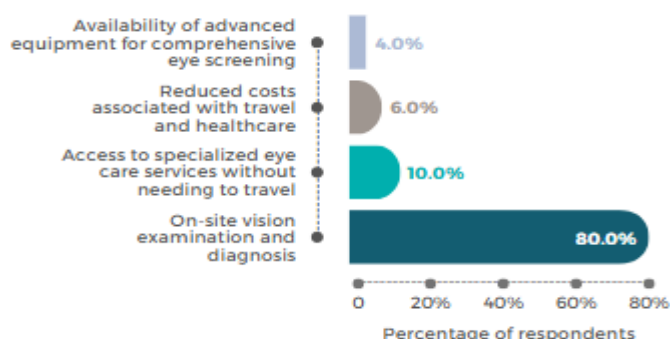
Sankara Hospital offered comprehensive assistance throughout the process, including transportation, pre-surgery medical tests, and counselling. Nagarathnamma's vision improved significantly following surgery, allowing her to regain independence in daily tasks such as cooking and reading. This newfound independence increased her confidence and emotional well-being, reducing her sense of helplessness. It reduced her reliance on family members while increasing her efficiency in handling household responsibilities.

Nagarathnamma expressed profound gratitude, stating that the surgery had transformed her life. She emphasised the importance of increasing awareness in rural areas so that more people can access such life-changing services.

F. IMPACT OF TREATMENT AND SERVICES

14. Most Beneficial Aspects of MRVP Mobile Clinic Services

CHART 26: MOST BENEFICIAL ASPECTS OF MRVP MOBILE CLINIC SERVICES



The majority of respondents (80%) expressed that the on-site vision examination and diagnosis was the most advantageous feature of the MRVP mobile clinic services, illustrating the program's effectiveness in accessing communities. Others valued the diminished necessity for travel (10%), financial savings (6%), and

access to specialised care with advanced technology (4%) highlighting the project's holistic strategy in meeting vision care requirements.

The project coordinator stated, "My responsibilities included overseeing patient registration, coordinating transportation for beneficiaries, and collaborating with hospital partners to ensure the availability and upkeep of essential equipment. Managing logistics was an important aspect of the program, and providing transportation for beneficiaries to the hospital was a top priority."

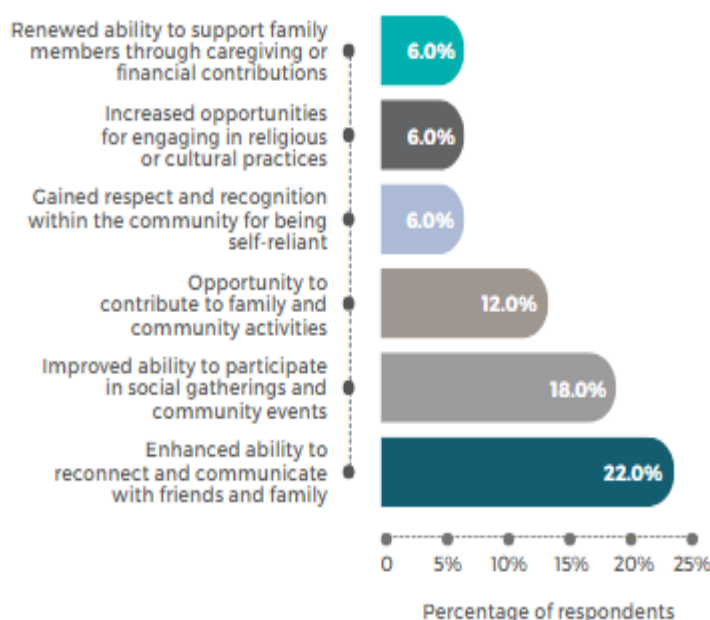
Total Screened	Spectacles Distributed	Spectacles Distributed
19,780	8,078	516

Source: Sankara Eye Foundation Report

According to the Sankara Eye Foundation Report, 8,078 of the 19,780 individuals screened received spectacles, indicating a strong focus on refractive errors. Additionally, 516 free cataract surgeries were performed, demonstrating a significant impact in improving vision for those with cataracts. The data reflect a well-targeted effort to improve community access to eye care services.

15. Improvement in Daily Activities After Cataract Surgery/Corrective Surgery, or Glasses

CHART 27: IMPROVEMENT IN DAILY ACTIVITIES AFTER CATARACT SURGERY, CORRECTIVE SURGERY, OR GLASSES



Following Cataract surgery/ corrective surgeries and receipt of corrective glasses respondents indicated considerable improvement in their ability to carry out daily activities independently.

Many of the respondents (22%) expressed their happiness about their ability to travel or walk independently without assistance.

Respondents (18%) were also able to engage in activities like reading books, newspapers or essential documents.

Women respondents (16%) were particularly glad, that they were now able to manage cooking and do household chores independently.

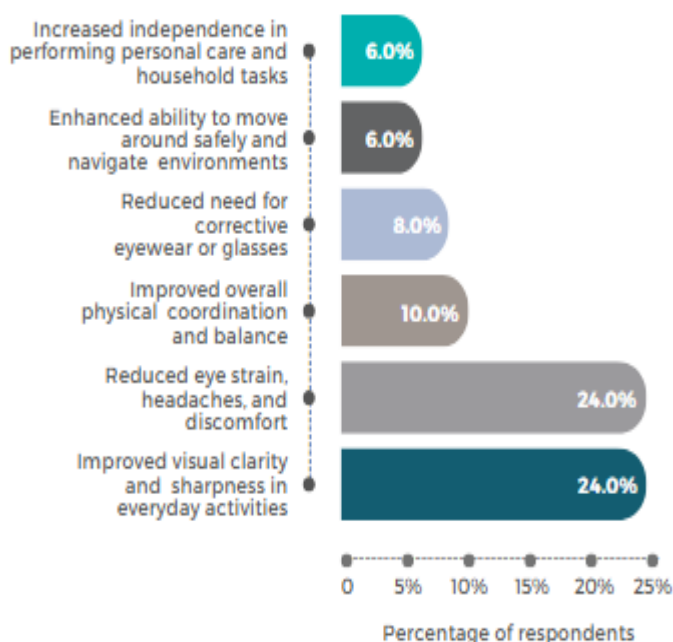
Some respondents (16%) were happy about the fact that following the treatment they were able to watch television comfortably, which they were not able to do so, earlier.

The study recorded that all the beneficiaries were able to engage in activities better now which were earlier hampered by poor vision, and they felt grateful for the CSR Intervention which made it possible.

During an interaction in Ullal Upanagara, a beneficiary stated, "I am sincerely grateful for the free cataract surgery program. Before the surgery, I struggled with daily activities such as reading and cooking. Now I can see clearly and feel more independent. The hospital staff's help and transportation assistance made everything much easier. "Thank you for changing my life."

16. Physical Impacts of Cataract Surgery, Corrective Surgery, or Glasses

CHART 28: PHYSICAL IMPACTS OF CATARACT SURGERY, CORRECTIVE SURGERY, OR GLASSES



Following cataract/corrective surgery and the receipt of corrective glasses, respondents reported significant physical benefits in their daily activities.

Improved Visual Clarity and Sharpness- A significant 24% of respondents reported improved visual clarity and sharpness in everyday activities, indicating that they are more confident in performing their daily tasks.

Reduction in Eye Strain and Discomfort- Another 24% reported a significant reduction in eye strain, headaches, and discomfort, indicating increased overall physical

comfort.

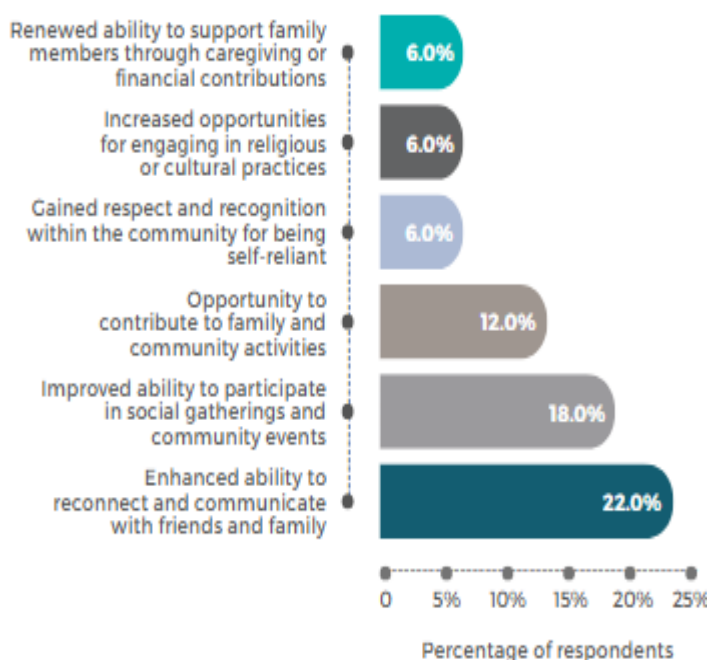
Improved Coordination and Enhance Mobility and Safety - 10% reported improved physical coordination and balance, easing daily mobility and lowering the risk of falls or injuries. 8% of recipients reported that after surgery, their need for corrective eyewear decreased. 6% reported greater independence in performing personal care and household tasks, while another 6% felt safer navigating their environments, indicating a positive impact on their quality of life.

The study found that the interventions provided had a transformative effect on respondents' physical well-being, improving visual clarity, reducing discomfort, and allowing for greater independence.

Mr Venkatesh from Bagepalli village acknowledged, "The cataract surgery has changed my life. I now have a clear and sharp vision in my daily activities, which has greatly reduced the eye strain and headaches I used to have. My overall physical coordination and balance have improved, allowing me to move around safely and complete personal tasks independently. I feel more confident and independent in my daily life."

17. Social Impacts of Cataract Surgery, Corrective Surgery, or Glasses

CHART 29: SOCIAL IMPACTS OF CATARACT SURGERY, CORRECTIVE SURGERY, OR GLASSES



Respondents who have undergone cataract surgery/corrective surgery or received glasses report significant improvements in their social interactions and community participation.

Enhanced ability to reconnect and communicate with friends and family- 22% of respondents reported being able to reconnect and communicate more effectively with friends and family, which shows how the better vision helped in fostering personal bonds and

brought happiness to their relationships.

Social engagement- 8% of beneficiaries reported increased attendance at social gatherings and community events, indicating greater confidence and inclusion in social circles. 6% of respondents also reported more opportunities to participate in religious or cultural activities.

Contributions to family and community- 12% of respondents acknowledge that they could now make more effective contributions to family and community events and develop a sense of collective ownership. 6% of respondents were able to resume caregiving responsibilities or contribute financially, highlighting their importance in their households.

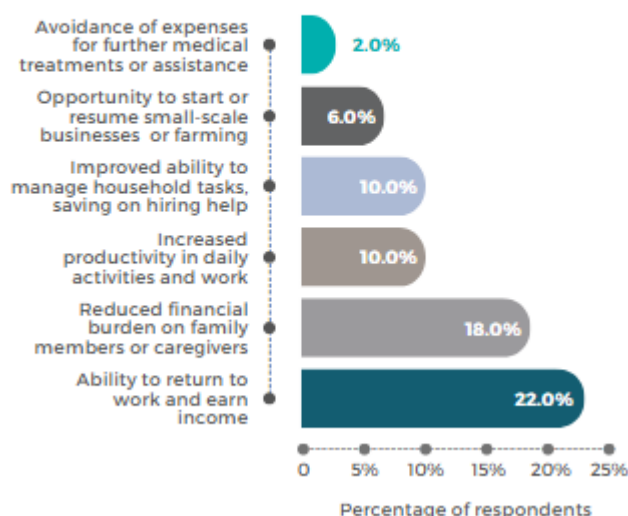
Mr Sidhappa from Kaverinagara shared with the research team. "After corrective surgery, I feel more connected to my family and community. I can now reconnect with loved ones and attend social gatherings without hesitation. Being able to contribute to household chores and community activities has given me a lot of joy and respect. Furthermore, resuming my religious practice has given me a renewed sense of purpose. "This intervention has completely transformed my social life.

A beneficiary from Kaveri Nagar stated, "I had been struggling with my eyesight for years, but after the surgery, my vision improved dramatically. I can now see clearly and take part in community activities again. This program has restored both my vision and my confidence. I am extremely grateful for the assistance and care I have received."



18. Economic Impacts of Cataract Surgery, Corrective Surgery, or Glasses

CHART 30: ECONOMIC IMPACTS OF CATARACT SURGERY, CORRECTIVE SURGERY, OR GLASSES



Respondents have reported significant benefits from post-cataract surgery/corrective surgery or receiving glasses, allowing them to regain financial independence and reduce economic strain on their families.

Restoring earning capacity- 22% of respondents reported being able to return to work and earn an income, emphasizing individual economic

empowerment and the ability to earn a livelihood.

Relieving family burdens- 18% of respondents reported a reduction in financial burden on family members or carers, demonstrating the intervention's effectiveness.

Increasing productivity- 10% reported greater efficiency in daily activities and work, resulting in improved time management and economic contributions.

Household management- Another 10% found it easier to manage household tasks, resulting in lower costs for external help.

Entrepreneurial opportunities- 6% of respondents resumed or started small-scale businesses or farming, demonstrating the beneficiaries' freedom to choose their economic activity.

Mrs Alvelu of village Ullala Upnagara speaks to the study team " I can now manage household tasks efficiently, with renewed vision, I've even resumed small-scale farming, which contributes to our income. This intervention has been life-changing, allowing me to regain my independence while reducing unnecessary financial strain on my family.

The MRVP project successfully addressed critical eye care needs by performing cataract surgeries and distributing spectacles, with the progress of patients tracked with the maintenance of patient records, details of follow-ups, and beneficiary feedback. Counselling helped to mitigate patient anxiety and queries regarding surgery and local partnerships helped to address challenges such as transportation issues.

The project significantly improved vision and quality of life in underserved communities, demonstrating its effective and adaptable approach to healthcare delivery.

The next project is Cataract Blindness Backlog Free (CBBF) & Visual Impairment Free Taluks - Sankara Eye Foundation India attempted to make two Taluks in Tamil Nadu State Cataract Blindness Backlog Free Taluks by reaching out to the needy community in a limited time frame using mission mode.

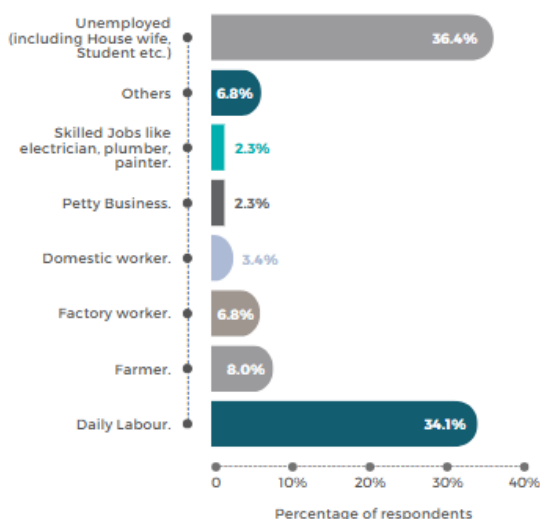
PROJECT 3: CATARACT BLINDNESS BACKLOG FREE & VISUAL IMPAIRMENT (CBBF & VI) FREE TALUKS – SANKARA EYE HOSPITALS, COIMBATORE

A. SOCIOECONOMIC BACKGROUND OF RESPONDENTS

1. Occupation of the respondents

A. SOCIO-ECONOMIC BACKGROUND OF RESPONDENTS

CHART 31: OCCUPATION OF THE RESPONDENTS



The majority of the respondents (65.9% females and 34.1% males, Source: primary data) in this assessment study were daily laborers and unemployed individuals, including housewives and students, who have either less or no income sources.

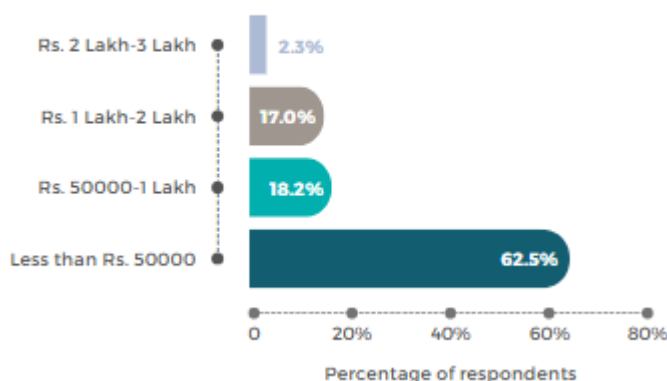
Most of the other respondents were farmers, factory workers, domestic workers, and skilled tradespeople such as electricians and painters with lesser incomes.

A small segment also included drivers, vegetable vendors, and tailors. The study shows that the project Intervention has catered to the vision care needs of the most

deserving sections of the underprivileged in the Communities served.

2. Annual Family Income

CHART 32: ANNUAL FAMILY INCOME



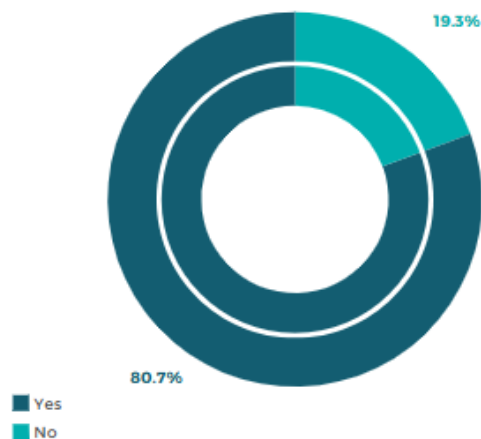
The majority of respondents had an annual family income of less than Rs. 50,000, indicating that the target group is economically disadvantaged. A smaller proportion had incomes ranging from Rs. 50,000 to Rs. 2 lakhs, highlighting the need for free cataract surgery interventions.

B. AWARENESS OF CATARACT STATUS BEFORE SCREENING

3. Whether aware of the cataract status before the screening done through the CSR intervention

The majority of respondents (80.7%) were already aware of their cataract condition before the screening facilitated by the CSR intervention. However, a sizable proportion remained unaware (19.3%) of their cataract status before the Intervention.

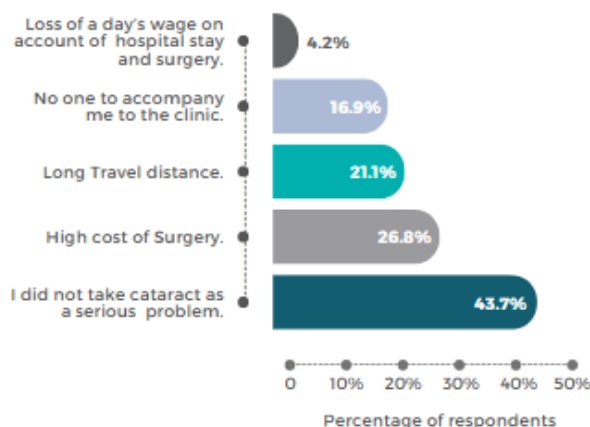
CHART 33: WHETHER AWARE OF THE CATARACT STATUS BEFORE THE SCREENING DONE THROUGH THE CSR INTERVENTION



"There has been a remarkable increase in awareness about cataracts and visual impairments in the community. People now recognize the importance of early diagnosis and actively seek advice on maintaining eye health."- M. Nadarashan, Panchayat President

4. Reasons for not undergoing surgery despite awareness of cataract status.

CHART 34: REASONS FOR NOT UNDERGOING SURGERY DESPITE AWARENESS OF CATARACT STATUS



Despite being aware of their cataract status, a significant number (80.3%) of respondents chose not to have surgery (Source: Primary data).

Several factors contribute to the lack of conversions into surgeries. Some beneficiaries underestimated the seriousness of their condition, believing that their vision impairment did not necessitate surgical intervention. Financial constraints

and travel challenges also played a role, as people were hesitant to have surgery due to the associated costs and difficulties in getting to healthcare facilities. Furthermore, a lack of support from family members, as well as the fear of losing wages during the recovery period, discouraged some people from undergoing surgery.

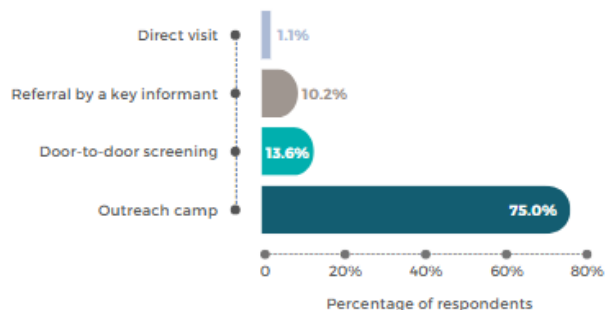
"The outreach and mobilisation efforts in the community have been outstanding. Working closely with volunteers has increased awareness and participation, particularly among tribal and rural populations. The program has instilled trust and confidence in the healthcare services provided, and it has been heartening to see people regain their independence through the surgeries."- PRI Member

C. SURGERY BY CBBF INTERVENTION

4. Source of awareness about the free cataract surgery program

Most respondents knew about the free cataract surgery program through outreach camps, demonstrating their effectiveness in reaching the intended target population. Door-to-door

CHART 35: SOURCE OF AWARENESS ABOUT THE FREE CATARACT SURGERY PROGRAM

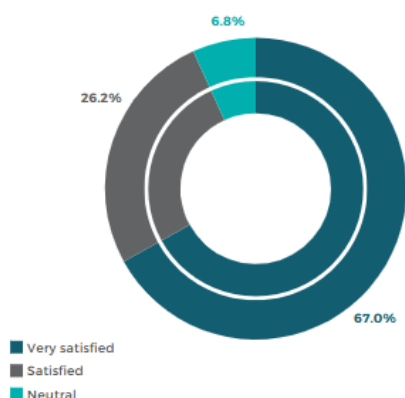


screening and referrals by key informants also played an important role, while direct visits were limited, emphasising the importance of proactive community engagement strategies in raising awareness.

"The outreach and mobilisation efforts in the community have been outstanding. Working closely with volunteers has increased awareness and participation, particularly among tribal and rural populations. The program has instilled trust and confidence in the healthcare services provided, and it has been heartening to see people regain their independence through the surgeries."- PRI Member

5. Level of satisfaction with the transportation to the base hospital

CHART 36: LEVEL OF SATISFACTION WITH THE TRANSPORTATION TO THE BASE HOSPITAL

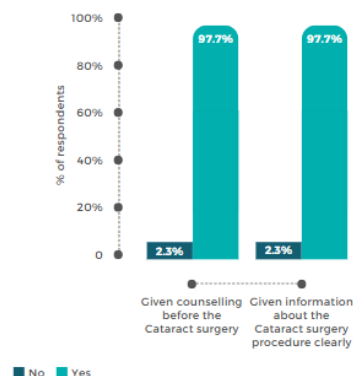


Among the respondents, 97.7% received transportation to the base hospital (Source: Survey Data). The majority of respondents were very satisfied with the transportation services provided to the base hospital, demonstrating the program's effectiveness in overcoming logistical barriers.

6. Pre-surgery counselling and clarity of information about cataract surgery procedure

All respondents who underwent surgery reported receiving completely free admission to the hospital for cataract surgery (Source: Survey Data). The program also ensured that nearly all respondents (97.7%) received pre-surgery counselling and detailed information about the cataract surgery procedure, demonstrating a strong emphasis on patient preparation and confidence.

CHART 37: PRE-SURGERY COUNSELING AND CLARITY OF INFORMATION ABOUT CATARACT SURGERY PROCEDURE

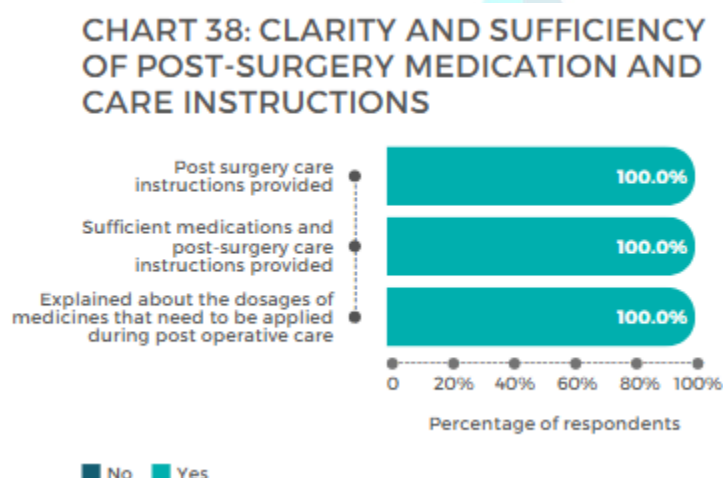


D. POST-SURGERY CARE AND TREATMENT

The CBBF program prioritised post-operative care to ensure a smooth recovery and maximise the benefits of cataract surgery. To improve patient outcomes, comprehensive follow-up measures were implemented, which included medication, vision support, and clear post-operative instructions.

All beneficiaries were given clear and detailed post-surgery medication and care instructions, with no reported communication breakdowns regarding dosage or recovery guidelines. This increased adherence to prescribed treatments, resulting in better recovery outcomes. The program also provided most beneficiaries with free spectacles, which improved their vision following surgery.

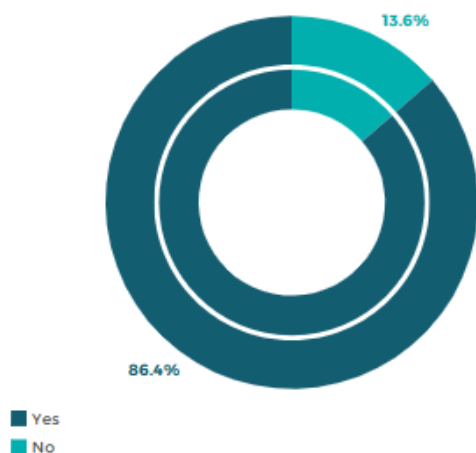
7. Sufficiency of post-surgery medication and care instructions



The project ensured that all beneficiaries received clear and comprehensive post-surgery medication and care instructions. There were no reported communication gaps regarding medication dosage or post-operative care, indicating that the program effectively addressed the need for comprehensive post-surgery guidance, resulting in positive recovery outcomes.

8. Whether provided with free spectacles after the cataract surgery

CHART 39: WHETHER PROVIDED WITH FREE SPECTACLES AFTER THE CATARACT SURGERY



The majority of beneficiaries received free spectacles following cataract surgery, ensuring that they had the necessary support to improve their vision after the procedure. However, a small proportion of respondents did not receive spectacles, indicating a small gap in overall service delivery.

The CBBF program improved vision and recovery by providing structured post-operative care, such as free medication, follow-up check-ups, and spectacles. Addressing the small gap in spectacle distribution can boost the program's impact on beneficiaries' quality of life.

Line Items (Apr 23- Nov 23)	CBBF - Coimbatore	CBBF - Virudhunagar	Total
Taluks Covered	1	1	2
Panchayats Covered	10	45	55
Population Screened	19,341	87,944	1,07,285
Spectacles Distributed	1,943	2,736	4,679
Surgeries Performed	336	1,121	1,457

Source: Sankara Eye Foundation Report

The table summarizes the scope and impact of the Cataract Blindness Backlog Free (CBBF) project, which was implemented in two Taluks in Tamil Nadu from April to November 2023. A total of 1,07,285 people were screened, with 4,679 spectacles distributed and 1,457 surgeries carried out. Virudhunagar Taluk had a higher number of panchayats, screenings, and surgeries, demonstrating the project's broad reach and successful intervention.

Line Items(Dec 23-Mar 24)	CBBF - Mettupalayam	CBBF - Rajapalayam	Total
Taluks Covered	1	1	2
Panchayats Covered	1	14	15
Population Screened	2488	56,027	58,515
Spectacles Distributed	66	949	1,015
Surgeries Performed	39	163	202

Source: Sankara Eye Foundation Report

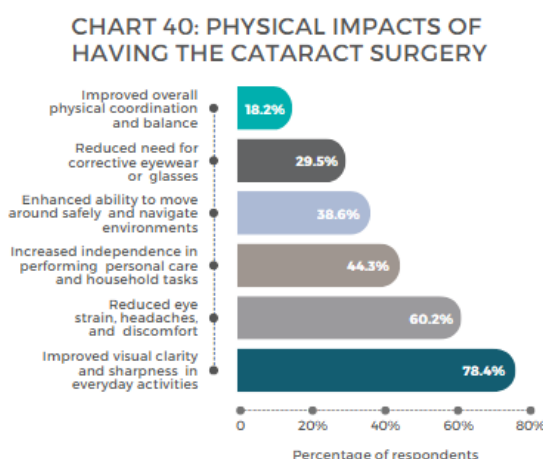
Between December 2023 and March 2024, the Cataract Blindness Backlog Free (CBBF) project was expanded to Mettupalayam and Rajapalayam Taluks. A total of 58,515 people were screened, with 1,015 spectacles distributed and 202 surgeries executed. Rajapalayam made significant contributions to the outreach, covering 14 panchayats, demonstrating the project's ongoing commitment to addressing cataract-related vision impairments within a specific timeframe.

E. IMPACT OF CATARACT SURGERY

9. Physical impacts of having cataract surgery

The chart highlights the profound physical benefits experienced by respondent post-cataract surgery, which improves their quality of life and daily functionality.

Improved visual clarity- 78.4% of respondents reported significantly clearer and sharper vision, allowing them to carry out daily tasks with ease and confidence.



Reduced discomfort- 60.2% of respondents reported relief from eye strain, headaches, and discomfort, indicating a general improvement in physical comfort and well-being.

Increased independence- 44.3% gained greater control over personal care and household tasks, reducing reliance on others.

Safety and mobility- 38.6% reported increased mobility and safer navigation, which reduced the risk of accidents or falls.

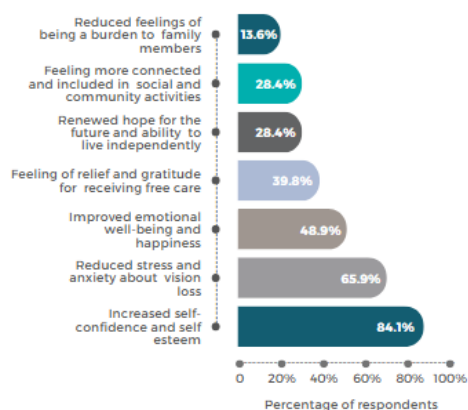
Reduced need for eyewear- 29.5% reported less reliance on corrective glasses, simplifying their daily routines.

Improved coordination- 18.2% reported better physical coordination and balance, resulting in smoother movement and functionality.

Saraswathi from Thottipalayam stated, "Having cataract surgery has been a transformative experience." My vision is now crystal clear, allowing me to carry out daily tasks confidently and effortlessly. I feel much more at ease throughout the day. My family has greatly benefited from my ability to manage personal care and household chores on my own now. This surgery has greatly improved my quality of life in every way possible."

A volunteer group stated, "This program has given us a strong sense of purpose." We have witnessed lives change as a result of our direct engagement with the community, particularly the elderly. The joy and gratitude of beneficiaries who have regained their sight are deeply rewarding. The experience strengthened our connection to the community and provided us with new skills in health advocacy and mobilisation."

CHART 41: PSYCHOLOGICAL IMPACTS OF HAVING THE FREE CATARACT SURGERY



10. Psychological impacts of having free cataract surgery

The study's participants' responses show that the psychological benefits of free cataract surgery have had a profound impact on respondents' mental well-being and emotional stability.

Boost in self-confidence and esteem- 84.1% of respondents reported feeling more

confident and positive about themselves, indicating a transformative impact on their sense of identity and capability.

Reducing stress and anxiety- 65.9% reported less concern about vision loss, highlighting the removal of a significant source of mental strain.

Enhanced emotional well-being- 48.9% of respondents reported greater happiness, indicating a significant improvement in their overall mood and outlook on life.

Gratitude for free care- 39.8% expressed deep relief and thankfulness for receiving free treatment, highlighting the importance of accessibility in healthcare.

Renewed hope and independence- 28.4% reported feeling hopeful about the future and capable of living independently, indicating that surgery played a role in restoring autonomy and optimism.

Increased social inclusion- 28.4% reported feeling more connected to social and community activities, indicating improved participation and integration.

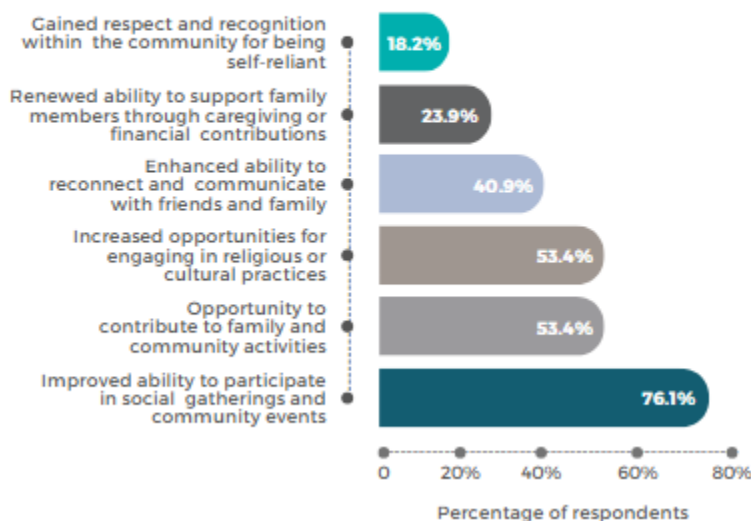
Reduced burden on family- 13.6% reported feeling relieved of being a burden, indicating that the surgery had a positive impact on family dynamics.

One of the respondents stated, "The free cataract surgery changed my life in unimaginable ways." I regained the confidence and capability that I had lost as a result of my declining vision. The constant stress and fear of going blind have subsided, leaving me happy and relieved. I am extremely grateful for the care I received, which renewed my hope for the future and gave me the ability to manage my own life. I now feel more connected to my family and community, and I don't feel like a burden to my loved ones. "This gift has truly restored light to my life."

During an FGD with volunteers V Lokeshkumar, K M Indrani, J Suguna, and S Nagamani, they stated, "Volunteering for the program has been an incredibly rewarding experience. I've learnt valuable skills in community engagement, health advocacy, and outreach while assisting the elderly in regaining their independence through cataract surgery. It has been extremely rewarding to see how their lives have changed, particularly their ability to overcome their fears of surgery. It's not just about restoring vision; it's about strengthening connections, fostering trust, and having a long-term impact on the community's well-being. We are proud to be a part of this life-changing initiative."

11. Social impacts of having cataract surgery

CHART 42: SOCIAL IMPACTS OF HAVING THE CATARACT SURGERY



The social impact of cataract surgery showed significant improvements in respondents' ability to reconnect with their community, family, and cultural practices. The above charts indicate the improvements in different social elements of people's lives.

Active participation in social gatherings- 76.1% of respondents reported an improved ability to attend social events, emphasising the restoration of their social presence and the reduction of feelings of loneliness.

Contribution to family and community- 53.4% reported a renewed ability to actively participate in family and community activities, demonstrating how the surgery enabled them to make meaningful contributions to their surroundings.

Engagement in cultural and religious practices- 53.4% reported having more opportunities to participate in these important aspects of their lives, indicating a restoration of spiritual and cultural connections.

Improved communication with loved ones- 40.9% reported feeling better prepared to reconnect with friends and family, with a focus on strengthening personal relationships.

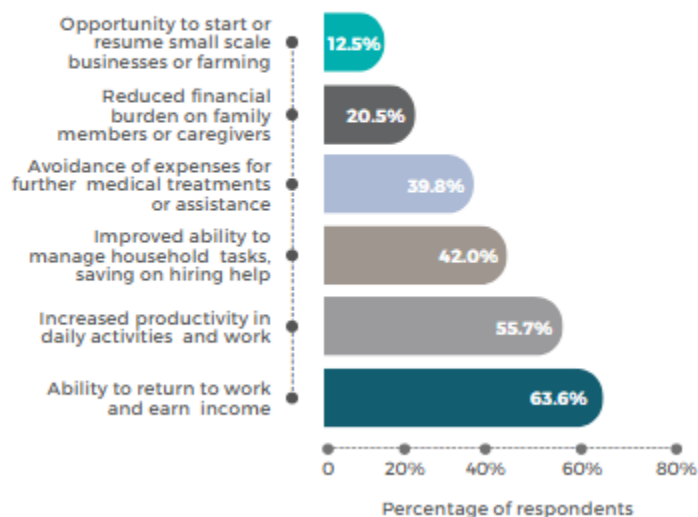
Support for family members- 23.9% were able to resume caregiving or financial contributions, demonstrating how the surgery enabled them to become valuable contributors once more.

Community recognition- 18.2% reported gaining respect from their community for their self-reliance, indicating social acceptance of their transformation.

Mrs. Nalammal of village Achampalayam stated during an interaction with the study team that "the cataract surgery has brought me back to life socially and emotionally." I can now go to family gatherings, festivals, and community events with confidence and joy. It feels great to be able to participate in family activities and help my loved ones again, whether through caregiving or financial support. I've also reconnected with my friends, which has strengthened my relationships. People in my community now regard me as independent and capable, which has increased my sense of pride and belonging. This surgery not only restored my vision but also my place in my family and community.

12. Economic impacts of having cataract surgery

CHART 43: ECONOMIC IMPACTS OF HAVING CATARACT SURGERY



The chart shows the economic impact of post-cataract surgery improvements in financial independence and productivity for respondents:

Return to work and income- 63.6% of respondents said they were able to return to work, indicating that their earning capacity and economic independence had been restored.

Increased productivity- 55.7% reported increased productivity in daily activities and work, allowing them to complete tasks more effectively at home and in professional settings.

Household management- 42.0% reported improved ability to manage household tasks, reducing the need to hire outside help, and saving money.

Avoiding medical costs- 39.8% of respondents avoided additional medical costs, demonstrating the long-term financial benefits of timely cataract surgery.

Reduced family burden- 20.5% of respondents felt they had lessened the financial strain on family members or carers, demonstrating the positive impact of their regained independence.

Entrepreneurial opportunities- 12.5% was able to restart small businesses or farms, demonstrating their ability to reintegrate into economic activities that had previously been hampered by vision loss.

Cataract surgery had a significant impact on respondents' economic well-being, with many able to return to work, increase productivity, and better manage household tasks.

Rajamani K said "The cataract surgery has been life-changing, not only for my health but also for my financial security. I can now return to work and earn a consistent income, which has reduced the strain on my family. My productivity at home and work has significantly increased, this surgery has given me a second chance at living a financially secure and fulfilling life."

Case Study

Arukanni R, a daily wage labourer from Kupanur village in Annur block, faced significant hardship when cataracts impaired her vision. With an annual household income of less than ₹50,000, accessing medical treatment was beyond her means. The loss of sight affected her ability to work, leading to financial strain and a growing dependence on others for basic tasks, which further impacted her confidence and independence.

Through the free cataract surgery program offered by Sankaraa Eye Hospital, Arukanni received timely medical intervention that transformed her life. After successful surgery, she regained her vision and returned to work, restoring not only her livelihood but also her sense of dignity. The support enabled her to become self-reliant once again,

highlighting how access to quality healthcare can create lasting socio-economic impact in underserved communities.

PROJECT 4: VISION CENTRE - PROVIDING COMPREHENSIVE PRIMARY EYE CARE SERVICES TO RURAL PATIENTS – SANKARA EYE HOSPITAL, COIMBATORE

Performance of Vision Centre Project FY 23-24

Parameter	Anaikatti	Pappampatti	Gudalur
Total Outpatients	1,276	1,780	2,560
Total Optical Orders	165	195	347
Non-paying surgeries	81	60	20
Operational Self-sufficiency	19%	32%	37%

Source: Sankara Eye Foundation Report

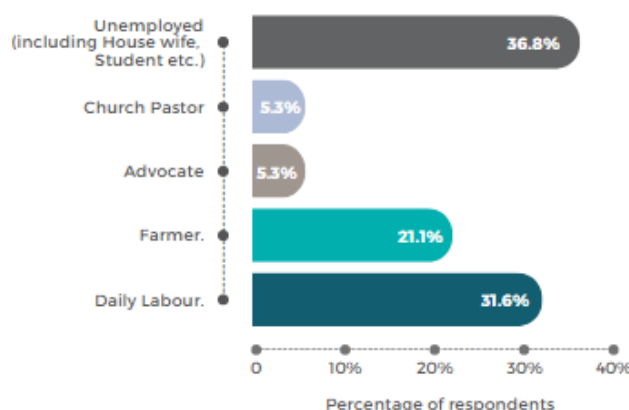
The Vision Centre project data shows that Gudalur had the most outpatient visits, and optical orders, indicating a higher demand for eye care services. Anaikatti had the most non-paying surgeries, indicating a greater need for free care. Gudalur also demonstrated the highest operational self-sufficiency, indicating greater financial sustainability. Pappampatti and Anaikatti had lower levels of self-sufficiency, indicating opportunities for improvement in financial independence and resource management for long-term operations.

A. SOCIO-ECONOMIC PROFILE OF RESPONDENT

1. Occupation of the respondents

The data show that respondents work in a range of occupations. A significant number (36.8%) are unemployed, including housewives and students. Daily labourers account for 31.6%,

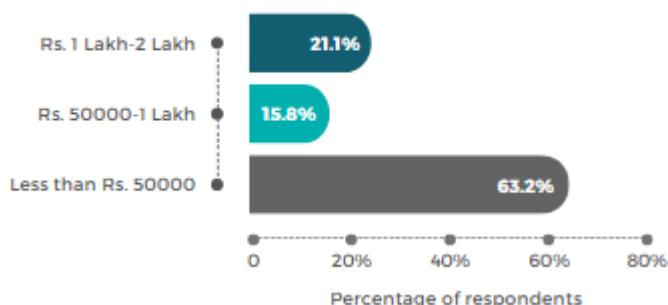
CHART 44: OCCUPATION OF THE RESPONDENTS



followed by farmers at 21.1%. Other occupations (including advocates and church pastors) account for 10.6%. This demonstrates a wide range of employment statuses, with a significant number working informally or unemployed.

2. Annual family income

CHART 45: ANNUAL FAMILY INCOME



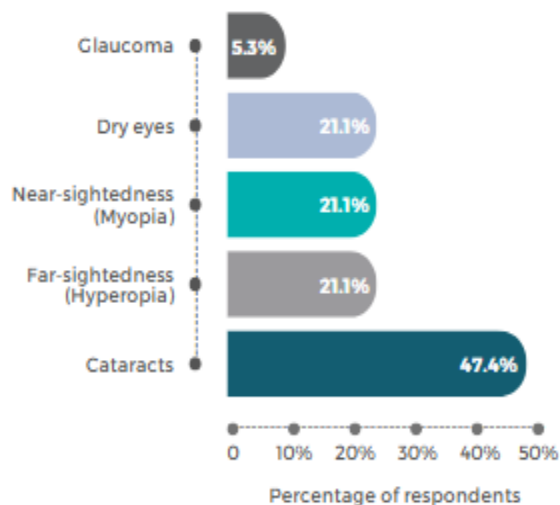
According to the income analysis, the majority of families earned less than Rs. 50,000 per year, indicating a predominantly low-income demographic. A smaller proportion of respondents reported incomes ranging from

Rs. 50,000 to Rs. 2 lakhs, demonstrating the Vision Centre's emphasis on economically disadvantaged populations.

B. PAST VISION HEALTH AND EYE CARE BEHAVIOUR

3. Vision conditions experienced before visiting Sankara Eye Hospital

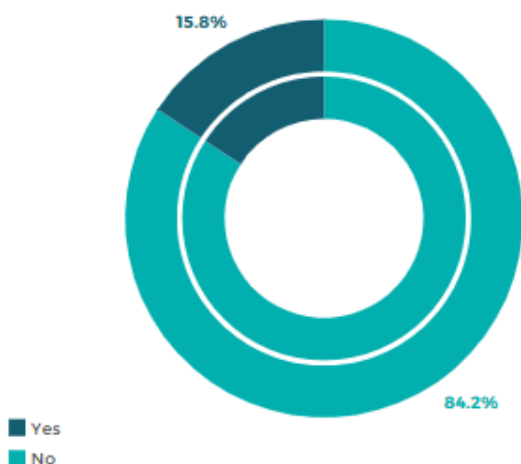
CHART 46: VISION CONDITIONS EXPERIENCED BEFORE VISITING SANKARA EYE HOSPITAL



Before visiting the Vision Centre, respondents reported several eye conditions, with cataracts being the most common. Other common issues included far-sightedness, near-sightedness, and dry eyes. A smaller proportion of respondents also reported glaucoma.

4. Previous treatment for vision conditions in the 2 years before the screening camp

CHART 47: PREVIOUS TREATMENT FOR VISION CONDITIONS IN THE 2 YEARS BEFORE SCREENING CAMP

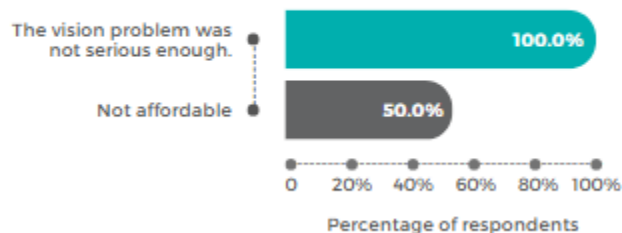


The vast majority of respondents had received no treatment for their vision conditions in the two years preceding the screening camp. This demonstrates the Vision Centre's critical role in bridging the access gap to eye care and addressing untreated vision problems in underserved communities.

M. Nadarashan, Panchayat President, stated, "The program's door-to-door screening was extremely effective in reaching vulnerable groups such as the elderly and women, who are frequently unable to attend centralised camps. The personal interaction increased trust and encouraged participation."

Reasons for avoiding visiting an eye clinic before

CHART 48: REASON FOR AVOIDING VISITING AN EYE CLINIC BEFORE

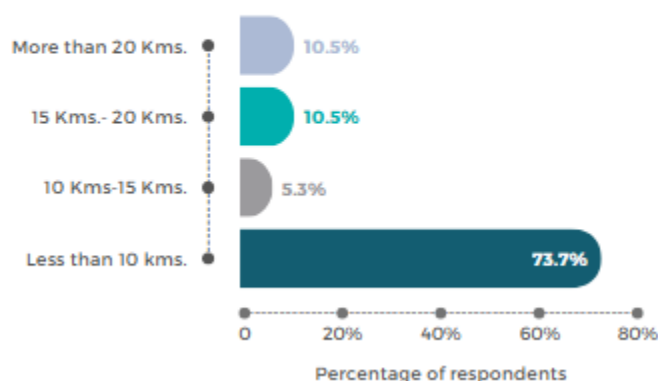


Approximately 90% of respondents avoided visiting the eye clinic before project intervention (Source: Survey data). The primary reason stated by the respondents was that they did not take their vision problem seriously and also due to unaffordability.

C. DIAGNOSIS AND TREATMENT PROVIDED BY VISION CENTRE

5. Distance of the eye clinic from the respondent's home

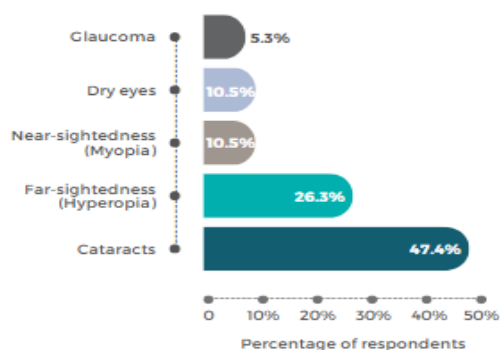
CHART 49: DISTANCE OF THE EYE CLINIC FROM THE RESPONDENT'S HOME



Most respondents lived within a 10-kilometre radius of the eye clinic, making it relatively accessible. However, a few respondents had to travel longer distances, emphasising the importance of the Vision Centre's goal of bringing eye care closer to rural communities and thus addressing accessibility issues.

Vision condition diagnosed through the screening (CSR intervention)

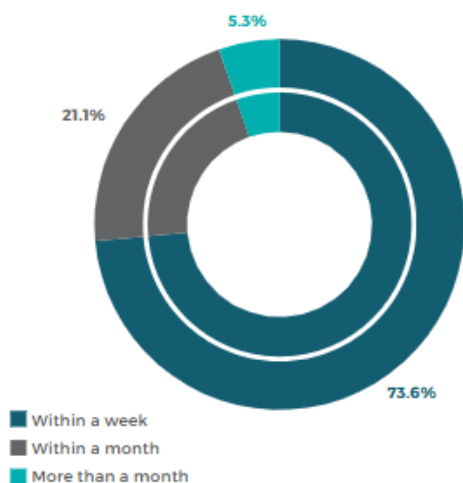
CHART 50: VISION CONDITION DIAGNOSED THROUGH THE SCREENING (CSR INTERVENTION)



The Vision Centre's screening identified several vision conditions among respondents, with cataracts being the most common. The project successfully identified and highlighted the community's need for corrective treatments, emphasising the importance of having access to eye care services in rural areas.

6. Duration between screening and provision of treatment or corrective glasses

CHART 51: DURATION BETWEEN SCREENING AND PROVISION OF TREATMENT OR CORRECTIVE GLASSES

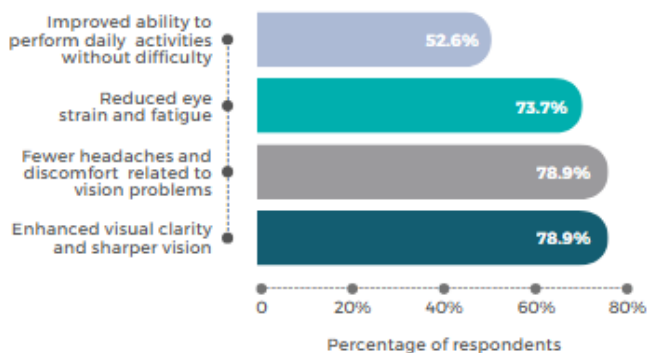


The majority of respondents received their treatment or corrective glasses within a week of screening, demonstrating the Vision Centre's efficient service delivery. A smaller proportion had a slightly longer wait, demonstrating the centre's timely response to rural eye care needs.

D. IMPACT OF CORRECTIVE GLASSES

7. Physical improvement noticed after receiving corrective glasses.

CHART 52: PHYSICAL IMPROVEMENT NOTICED AFTER RECEIVING CORRECTIVE GLASSES



According to the data, the majority of respondents (78.9%) reported significant improvements in visual clarity as well as a reduction in headaches and discomfort from vision problems after receiving corrective glasses.

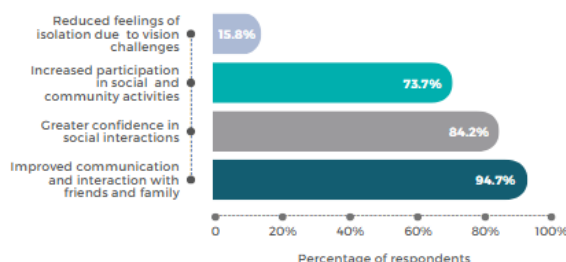
Furthermore, 73.7% reported less eye strain and fatigue, and more than half (52.6%) reported being able to perform daily activities more easily.

This suggests that corrective glasses have significantly improved respondents' quality of life, making daily tasks easier and reducing physical discomfort caused by poor vision.

Mrs Sivamma of village Gopanari told the assessment team, "After receiving corrective glasses, I noticed a significant improvement in my vision. My headaches and discomfort have significantly decreased, and I no longer experience constant strain on my eyes. Everyday activities are now easier, and I feel much more at ease and confident in my daily tasks."

8. Social benefits experienced after receiving corrective glasses.

CHART 53: SOCIAL BENEFITS EXPERIENCED AFTER RECEIVING CORRECTIVE GLASSES



All

respondents reported a significant social impact after receiving corrective glasses.

Improved communication and relationships- The vast majority of respondents (94.7%) reported better communication and interaction with friends and family after receiving corrective glasses.

Improved Confidence and Community Activities- Furthermore, 84.2% reported feeling more confident in social interactions, while 73.7% reported increased participation in social and community events. However, 15.8% reported a decrease in feelings of isolation due to vision issues, highlighting the comprehensive social well-being after using corrective glasses provided through the project.

Mr Nanjan Andi from Senguli stated, "Since receiving my corrective glasses, I've been able to reconnect with friends and family, making communication much easier." I am more confident in social settings and actively participate in community events. It's been a life-changing experience, and I no longer feel isolated because of my vision problems."

Case Study-

Maruthan, a 75-year-old man from Kopaneri Village, had a mature cataract in both eyes, causing 99% vision loss. His condition rendered him bedridden, completely reliant on his granddaughter for basic tasks such as going to the toilet. This dependency cut him off from social activities, and his livelihood of goat rearing came to an end, causing financial strain. His cataract condition had deteriorated over 1.6 years, but due to a lack of awareness and the stigma associated with cataract surgery, he never sought treatment.

Maruthan learnt about the free cataract surgery program through Sankara Eye Hospital's outreach efforts, which included staff visiting his village and explaining the benefits of the surgery. Initially concerned due to misconceptions about the procedure, he was reassured after counselling and decided to proceed, realising that surgery was his best option for regaining his independence.

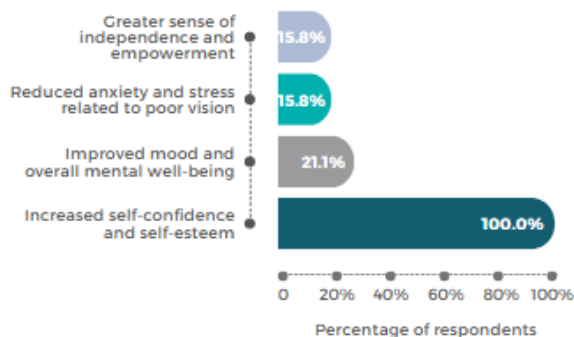
The hospital arranged transportation and performed a thorough screening. Maruthan received pre-surgical counselling, which included an explanation of the procedure and aftercare. His surgery was performed at Sankara Eye Hospital about six months ago, and he spent a week in the hospital, which included free meals. Follow-up visits were scheduled at a nearby Vision Centre to monitor his recovery.

Maruthan's vision improved dramatically following surgery, allowing him to complete daily tasks independently. He resumed goat rearing as his primary source of income, restoring his financial stability and reducing his reliance on his granddaughter. Maruthan reconnected with his community, taking part in previously inaccessible activities and festivals.

The surgery significantly improved Maruthan's emotional well-being, restoring his confidence and relieving him and his family of caregiving stress. This case demonstrates how free cataract surgery programs can transform lives, foster independence, and improve the overall quality of life for those in underserved communities.

9. Psychological effects experienced after receiving corrective glasses.

CHART 54: PSYCHOLOGICAL EFFECTS EXPERIENCED AFTER RECEIVING CORRECTIVE GLASSES



After receiving corrective glasses, all participants reported a significant increase in self-confidence and self-esteem, demonstrating the intervention's transformative psychological impact.

Increased self-confidence and self-esteem-

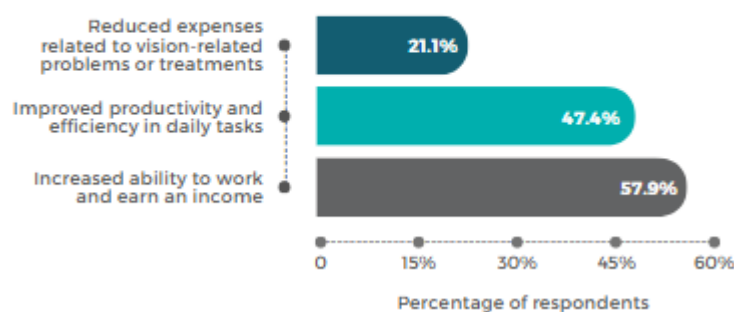
After receiving corrective glasses, all respondents (100%) reported increased self-confidence and self-esteem, indicating a significant psychological boost.

Improved mood and Reduced Anxiety- 21.1% of respondents reported improved mood and overall mental well-being, while 15.8% reported decreased anxiety and stress caused by poor vision. Similarly, 15.8% reported a stronger sense of independence and empowerment.

During interaction with the research team, Mr Devnbu shared that "Receiving corrective glasses has transformed my self-confidence. I now feel more confident in my daily life and capable of completing tasks that previously seemed difficult. While the glasses have alleviated some of my vision concerns, the most significant change is my increased confidence and pride in myself."

10. Economic benefits experienced after receiving corrective glasses.

CHART 55: ECONOMIC BENEFITS EXPERIENCED AFTER



Respondents reported significant economic benefits from receiving corrective glasses, particularly increased ability to work and earn an income. Many reported increased productivity and efficiency in daily tasks.

Increased Ability Work and Earn Income chart shows that 57.9% of respondents reported an increase in their ability to work and earn an income after receiving corrective glasses, demonstrating the significant economic empowerment of people who suffered from vision problems.

Improved Productivity- 47.4% of respondents reported increased productivity and efficiency in daily tasks, indicating better time and resource allocation.

A smaller percentage (21.1%) reported lower vision-related expenses, implying that, while financial savings were not universal, the glasses did alleviate some economic burdens.

Mrs. Selvi Nagaraj told to research team- "After receiving corrective glasses, I can now work more efficiently and contribute to my family's income. My productivity has increased significantly, allowing me to complete tasks more quickly and efficiently."

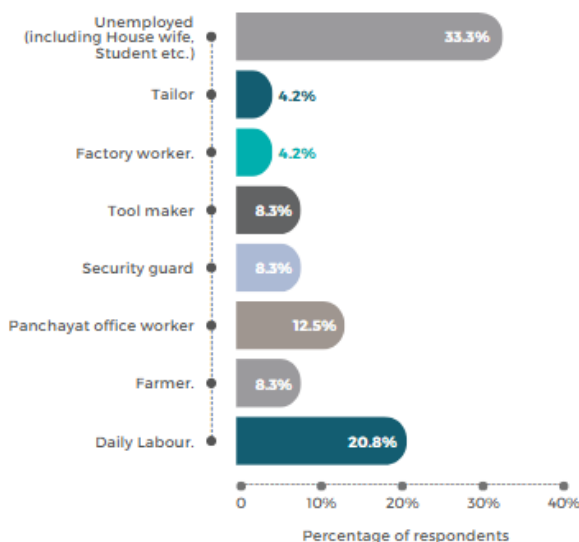
The Vision Centre project has significantly improved rural populations' vision, physical well-being, social interaction, and economic stability by making eye care more accessible. The project has benefited many people by increasing their self-confidence and independence. The next project, Gift of Vision (GOV) - Sankara Eye Hospitals, provides comprehensive vision care to more communities.

PROJECT 5: GIFT OF VISION (GOV) - Coimbatore

A. SOCIO-ECONOMIC PROFILE

1. Occupation of the Respondents

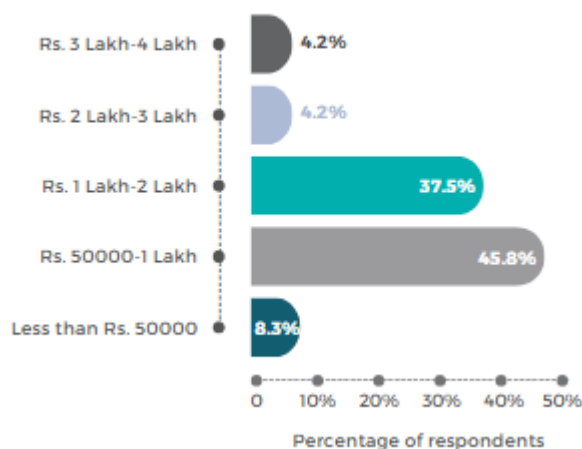
CHART 56: OCCUPATION OF THE RESPONDENTS



Respondents (29.2% Male & 70.8% Female, Source: Survey data) in the Gift of Vision project have a wide range of occupations, including daily labourers, farmers, and panchayat office workers, with the largest group being unemployed individuals such as homemakers and students. This demonstrates the program's reach to economically and socially diverse rural populations in need of affordable eye care.

2. Annual Family Income

CHART 57: ANNUAL FAMILY INCOME



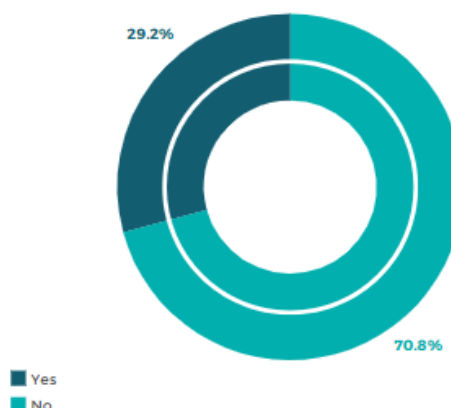
According to the data, a significant proportion are from low-income families, with the majority earning between Rs. 50,000 and Rs. 2,00,000 per year. And approximately 50% of families earn between Rs. 50,000 and Rs. 1,00,000. This demonstrates the project's emphasis on reaching economically disadvantaged

groups, ensuring access to quality eye care for those who may be unable to afford it.

"The majority of the beneficiaries we serve are from low-income families who face significant barriers to accessing quality healthcare. As volunteers, we are constantly striving to reach out to these underserved populations to ensure that they receive the necessary care. Witnessing their joy and relief as they receive free screenings, surgeries, and corrective glasses is extremely rewarding. It's rewarding to know that our efforts are impacting lives, restoring vision, and giving hope to those who need it the most." - Ms. K M Indrani, Volunteer

3. Previous Treatment for Vision Conditions in the 2 Years Before Screening Camp

CHART 58: PREVIOUS TREATMENT FOR VISION CONDITIONS IN THE 2 YEARS BEFORE SCREENING CAMP



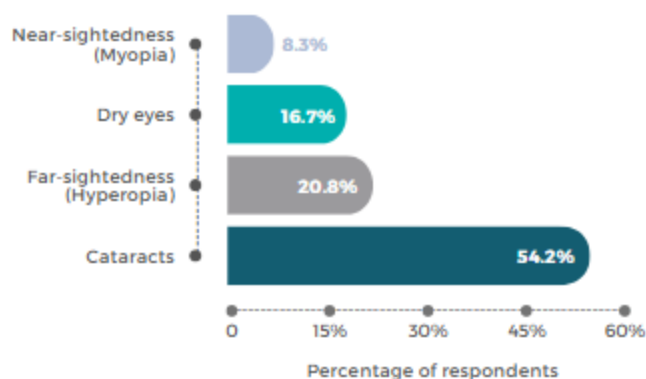
A significant proportion of respondents had not received any treatment for their vision problems in the two years preceding the screening camp.

This shows that the target population had very little access to proper eye care before the screening was done through the CSR intervention, which subsequently paved the way for their further treatment.

B. ACCESS TO EYE CARE THROUGH GIFT OF VISION INITIATIVES

4. Vision Condition Diagnosed at Sankara Eye Hospital

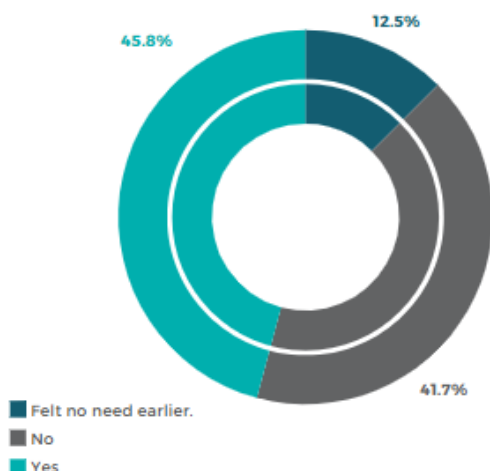
CHART 59: VISION CONDITION DIAGNOSED AT SANKARA EYE HOSPITAL (CSR INTERVENTION)



Cataracts (54.2%) were the most common diagnosis, followed by farsightedness (20.8%) and dry eyes. (16.7%). Nearsightedness was reported by 8.3% of the respondents. Most of the respondents acknowledged that it was through the screening and subsequent free treatment provided through the intervention, that they became aware of their vision conditions and got proper treatment for the same.

5. Time Taken to Provide Necessary Treatment/Care/Corrective Glasses After Screening

CHART 60: TIME TAKEN TO PROVIDE NECESSARY TREATMENT/ CARE/ CORRECTIVE GLASSES AFTER SCREENING



Most respondents (58.3%) received the necessary treatment or corrective glasses within a week of screening, while 29.2% of the respondents got them within a month.

Few beneficiaries (12.5%) reported receiving corrective glasses after the passage of a month.

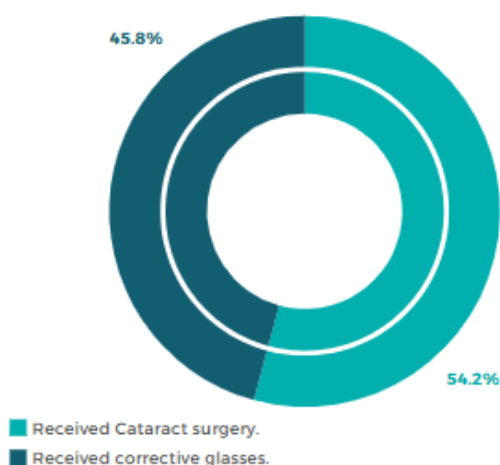
Though the provision of free glasses was done on time, there is yet scope to

provide corrective glasses to all the beneficiaries within the stipulated time.

During the interaction, a program team member stated, "Our team takes pride in providing timely eye care, with the majority of beneficiaries receiving treatment or glasses within a week of screening." However, we understand the importance of addressing the delays experienced by a few. We are committed to improving the program's impact and efficiency by ensuring faster access for all.

6. Services Availed at Sankara Eye Hospital

CHART 61: SERVICES AVAILED AT SANKARA EYE HOSPITAL

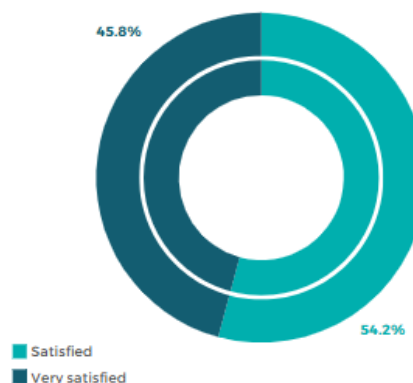


The project facilitated cataract surgeries for the majority of respondents, while others were given corrective glasses. These services reflect the project's goal of providing comprehensive eye care solutions, meeting both surgical and non-surgical vision needs, and improving the quality of life in underserved rural communities.

7. Level of Satisfaction with the Transportation Facility to Sankara Hospital

The majority of respondents felt satisfied with the transportation provided to Sankara Eye Hospital, with many indicating that they were either satisfied or very satisfied. This demonstrates the project's effective assistance in ensuring seamless travel for rural beneficiaries, lowering barriers to accessing quality eye care services.

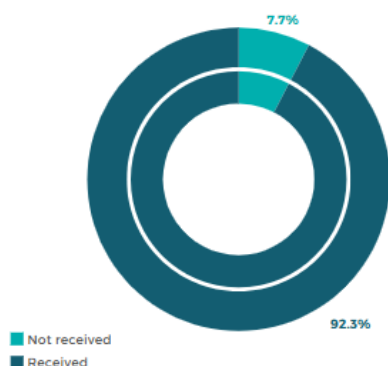
CHART 62: LEVEL OF SATISFACTION WITH THE TRANSPORTATION TO SANKARA HOSPITAL



"I feel great and relieved to have my vision back. I can now move around independently, care for myself, and even work again. This surgery relieved my granddaughter's stress in caring for me and brought us peace. I hope this program can help more people like me who need it the most." Maruthan

8. Pre-Surgery Counselling for Cataract/Corrective Surgery

CHART 63: PRE-SURGERY COUNSELLING FOR CATARACT/CORRECTIVE SURGERY

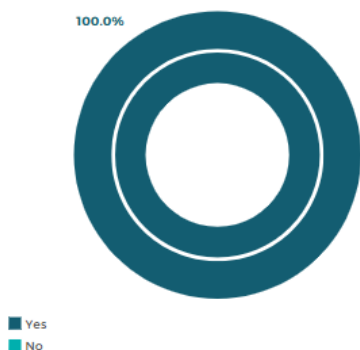


The majority of respondents who had cataract or corrective surgery received pre-surgery counselling, which is a positive aspect of the Gift of Vision initiative. While only 7.7% did not receive pre-surgery counselling. However, it is worth noting that, despite the lack of counselling, these individuals were able to have successful surgeries, demonstrating the initiative's ability to provide comprehensive care.

Patients awaiting surgical procedures are posed with a lot of queries about the nature of the surgery, the possible complications arising out of it and the anxiety resulting from these. It is encouraging to note that the pre-surgery counselling most likely mitigated the concerns of most of the cataract patients.

9. Free Hospital Admission and Cataract/Corrective Surgery

CHART 64: PROVISION OF COMPLETELY FREE CATARACT/CORRECTIVE SURGERY



All respondents who underwent cataract or corrective surgery through the Gift of Vision project received free hospital admission and surgery. Affordability being a major concern for the economically disadvantaged populace, it is encouraging to note that the CSR intervention aided cataract surgery/ corrective surgeries for patients completely free of cost.

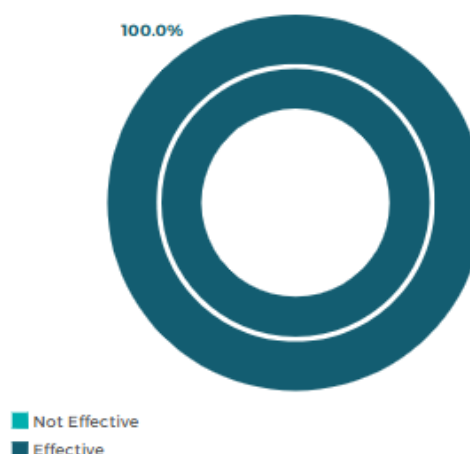
C. POST-SURGERY AND CORRECTIVE CARE

10. Effectiveness of Surgery, Sufficiency of Medications and Provision of Free Spectacles After Cataract/Corrective Surgery

All cataract patients acknowledged that the surgery was effective indicated by improved vision following surgery.

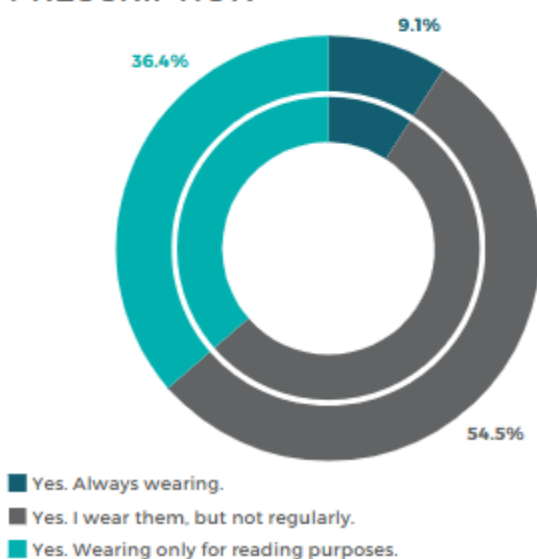
The respondents also confirmed that the post-surgery medications were sufficient, and they also received free spectacles, all of which aid in achieving better vision outcomes.

CHART 65: EFFECTIVENESS OF SURGERY, SUFFICIENCY OF MEDICATIONS AND PROVISION OF FREE SPECTACLES AFTER CATARACT/CORRECTIVE SURGERY



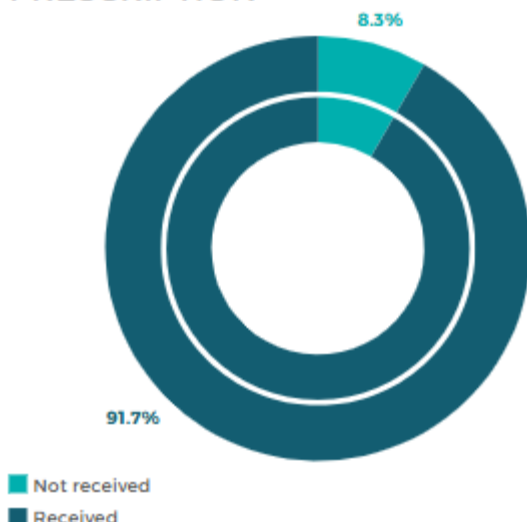
11. Regular Use of Corrective Glasses After Prescription

CHART 66: REGULAR USE OF CORRECTIVE GLASSES AFTER PRESCRIPTION



The majority of respondents who received corrective glasses wear them inconsistently, often only for reading. This emphasizes the importance of encouraging regular, long-term use of corrective glasses in order to maximise treatment benefits and improve vision over time.

CHART 67: REGULAR USE OF CORRECTIVE GLASSES AFTER PRESCRIPTION

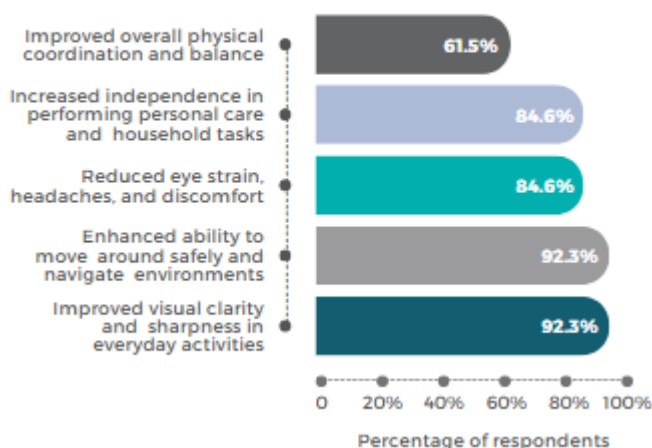


recovery and the importance of follow-up care in maintaining the efficacy of their treatments.

E. KEY IMPACT

13. Physical Impacts of Cataract/Corrective Surgery

CHART 68: PHYSICAL IMPACTS OF CATARACT/CORRECTIVE SURGERY



12. Explanation of Follow-Up Care After Treatment at Sankara Eye Hospital

The majority of respondents clearly explained about follow-up care after their treatment at Sankara Eye Hospital, indicating effective communication about post-surgery care.

This demonstrates the project's emphasis on ensuring beneficiaries understand the steps required for

Most respondents reflect the significant physical improvements following cataract/corrective surgery. Most respondents had better vision, navigation safety, and comfort after the surgery, enabling greater independence in daily activities and household tasks.

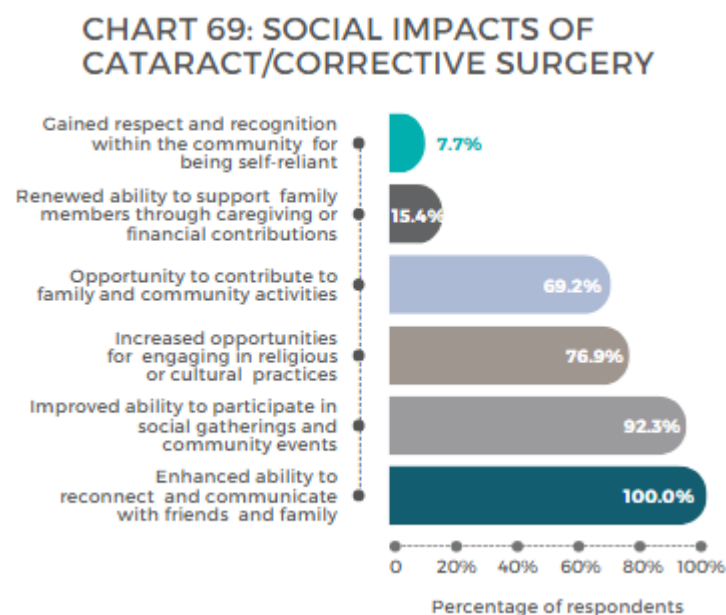
Improved Vision Clarity and daily activities- 92.3% of respondents reported increased visual clarity and ability to navigate safely, indicating a significant change in their daily lives.

Less Eye Strain and Headaches- 84.6% reported less discomfort, such as fewer headaches and eye strain, as well as greater independence with personal care and household tasks.

Improved Physical coordination- Improved physical coordination and balance, as reported by 61.5% of respondents, emphasises the surgery's positive impact on mobility and safety.

"Undergoing eye surgery was life-changing for me. My vision is now clear, and I can move around safely without assistance. The reduction in headaches and eye strain has given me enormous relief, and I feel more capable of managing my daily tasks. This surgery has significantly improved my quality of life and physical health."- Mr Kamran N, Village Achampalayam

14. Social Impacts of Cataract/Corrective Surgery



The social impact of cataract or corrective surgery on respondents shows a significant increase in their interpersonal and community participation.

Improved ability to reconnect and communicate - All respondents (100%) reported an improved ability to reconnect and communicate with friends and family, demonstrating how better vision promotes meaningful relationships.

Greater participation in social gatherings- Furthermore, 92.3% of respondents reported greater participation in social gatherings, while 76.9% reported increased involvement in religious and cultural activities.

Improved participation more actively in family and community- 69.2% participated more actively in family and community activities, indicating a renewed role in group settings.

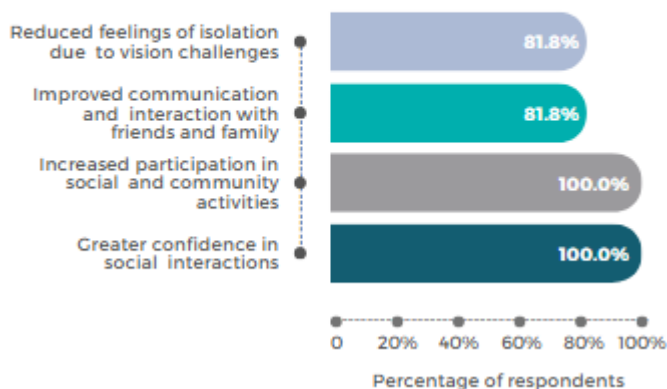
Financial family assistance 5.4% of respondents were able to provide financial or caregiving assistance to family members, while 7.7% were recognized for their self-reliance.

Improved social factors following surgery provide a significant opportunity to improve the overall social well-being of people suffering from a vision problem.

"After my eye surgery, I feel as if I've reconnected with my surroundings. I can now enjoy social gatherings and communicate with my family freely. Attending religious and cultural events has restored joy and a sense of belonging in my life. I am sincerely grateful for the new opportunities that this surgery has provided." Mrs. Jothi Mani, Colony Pudhur

15. Social Benefits Experienced After Receiving Corrective Glasses

CHART 70: SOCIAL BENEFITS EXPERIENCED AFTER RECEIVING CORRECTIVE GLASSES



The above chart shows that participants reported significant social benefits from receiving corrective glasses.

All people (100%) of respondents reported increased confidence in social interactions and community activities, demonstrating how improved vision can boost overall social engagement.

Furthermore, 81.8% of respondents reported improved communication with friends and family and decreased feelings of isolation, indicating a significant improvement in interpersonal relationships and emotional well-being.

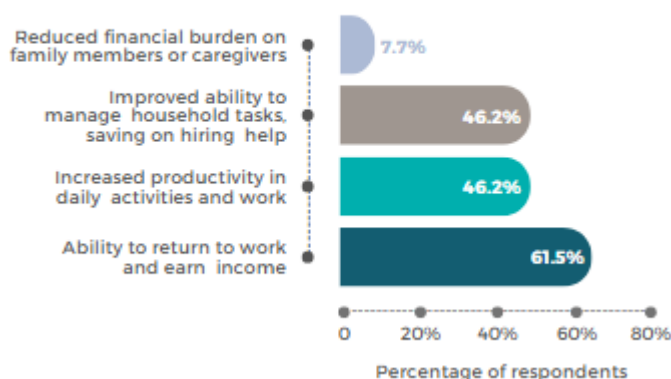
These improvements demonstrate corrective glasses' transformative power in rebuilding social connections and promoting inclusion enriching their social lives, fostering a sense of inclusion and connection within communities.

"Using corrective glasses has changed my life. I am more confident and engaged in social gatherings and community events. Being able to communicate easily with my family and friends has brought me great joy, and I no longer feel isolated due to my vision issues."

"This gift has reconnected me with the world around me." -Mrs Tamil Selvi, village Achampalayam

16. Economic Impacts of Cataract/Corrective Surgery

CHART 71: ECONOMIC IMPACTS OF CATARACT/CORRECTIVE SURGERY



The economic impact of cataract/corrective surgeries is substantial, as many returned to work and increased productivity. Improved household task management reduced some people's reliance on external help, which contributed to cost savings.

61.5% of respondents reported regaining the ability to work and earn an income, implying that the surgery helped them re-enter the workforce and improve their financial stability.

Furthermore, 46.2% of respondents reported increased productivity in daily activities and household tasks, reducing the need for external assistance and associated costs.

A farmer stated, "Thanks to the corrective glasses I received, I can work on my farm without straining my eyes." It increased my productivity and enabled me to care more for my family. I'm thankful to the Gift of Vision project for restoring my ability to work and provide."

"An elderly woman who underwent cataract surgery expressed her gratitude, "I am extremely grateful for the cataract surgery that allowed me to regain my vision. Being able to see clearly again has enabled me to actively care for my grandchildren, bringing me great joy and a renewed sense of purpose. It's also helped my relationship with my family. My son, who was suffering from vision impairment, also received corrective glasses through the program. His productivity has significantly increased, and he can now work efficiently to support our family's income."

The Gift of Vision project addressed vision impairments by providing timely interventions, corrective glasses, and comprehensive care. It improved beneficiaries' physical, social, and economic well-being, allowing them to regain independence,

actively participate in community life, and support their families. This initiative exemplifies impactful and inclusive healthcare. 12,760 poor people in rural areas had successful surgeries to fix their cataracts in 2023–24, which completely changed their lives (Source- Titan Happy Eyes Report).

Total project wise beneficiaries of Titan Happy Eyes program in 2023-2024.

Project Name	Reach Nos.
Nannakannu	2,93,454
MRVP	19,780
CBBF - Annur, Aruppukottai, Mettupalayam & Rajapalayam	1,65,800
Vision Centres	5,616
GOV Screenings	26,000
Total	5,10,650

(Source- Titan Happy Eyes Report)

The Titan Happy Eyes program for 2023-2024 reached a notable 5,10,650 people through various initiatives. Projects such as Nannakannu, MRVP, and CBBF made significant contributions to vision care, while Vision Centres and Gift of Vision screenings made eye health services more accessible. This program demonstrates Titan's effort to improve vision health and change lives in underserved communities.

During the discussion, Mr M. Nadarashan, Panchayat President, stated that "this program has greatly improved my ability to manage health initiatives, enhanced my skills in collaborating with various stakeholders, and boosted my confidence in advocating for healthcare programs across different sectors."

MYOPIA CLINIC – SANKARA EYE HOSPITAL, SHIMOGA

Key Impact

Community Awareness

The establishment of the Myopia Clinic has enhanced awareness regarding refractive errors and the significance of routine eye examinations within the community.

"The program has made us more aware of various eye problems, particularly myopia, as well as the importance of regular screenings for children who have difficulty reading or writing. We've learnt that nutritious foods, particularly

those high in Vitamin A, play an important role in maintaining good eye health. If myopia is diagnosed, following the doctor's advice, such as wearing spectacles and scheduling periodic eye checks, is critical to preventing vision loss." (Mrs Kavitha, parent of Manvith K)

Mr Rajendra, a parent from the village- Bhadravathi, shared his experience with the clinic's intervention for his daughter, Bhoomika R, a fifth-grade student "We became aware of the screening program via the outreach initiatives of Sankara Eye Hospital." I wanted good eye health for my children, so I ensured her participation. The entire process was seamless, suitable for children, and informative. Following Bhoomika's myopia diagnosis, the physicians advised us on surgical options and supplied premium corrective lenses".

Improved Academic Performance and Daily Functioning

Parents have noted a significant improvement in their children's concentration and academic performance following treatment. Moreover, children receiving treatment have indicated an increased sense of comfort and ease during routine activities, such as reading and outdoor play, without the challenges posed by blurred vision.

"Since her treatment, we have seen significant improvements in her academic performance and outdoor activities. Bhoomika's confidence has grown, and she can now complete her daily tasks independently. It's been a relief to see her improve and regain her confidence. The program not only improved her vision, but it also brought joy and hope to our family" (Rajendradra- father of Bhoomika).

Parental Satisfaction

Parents have pointed out the significance of early diagnosis and effective intervention provided by the clinic, emphasising their confidence in its holistic approach to eye care.

A parent shared "I am satisfied that my child's vision has improved significantly, allowing her to read better and manage personal tasks more easily. She no longer complains about vision issues. As a parent, I am happy and reassured to see her progress and confidence grow, thanks to this program."

"We are grateful for the Myopia Wellness Clinic and its screening program. It has provided us with important information and services. However, we recommend that parents have access to the screening reports in hard copy form, as this will allow us to better track our child's eye health records." (Mrs Kavitha, parent of Manvith K)

The Myopia Clinic has significantly influenced the handling of vision problems in children through early diagnosis, effective treatment, and improved awareness. Parents appreciated the clinic's holistic care, noting increases in their children's academic performance and overall quality of life. Through the raising of awareness and the promotion of timely interventions, the clinic has demonstrated its significance as a crucial resource for enhancing eye health and improving pros.

Sustainability

Community Awareness

The program raised long-term awareness about eye health, cataract prevention, and the importance of regular screenings. This community-level education has provided individuals with the knowledge required to continue advocating for their eye health even after the program's direct intervention has ended.

Establishment of Vision Centre

The establishment of Vision Centres and collaboration with local healthcare providers has strengthened the local healthcare infrastructure, ensuring that communities have continued access to basic eye care and corrective measures even after the program concludes.

Network Volunteer and Stakeholder

The Titan Happy Eyes has resulted in a network of trained community volunteers and local stakeholders, including PRI members. This network can continue to support eye health initiatives by raising awareness and assisting with future screenings and surgeries, ensuring long-term sustainability.

Scalability and Replicability

The program's success, with its replicable model and clear impact, makes it an excellent model for future expansion. With the right partnerships and funding, the model can be tailored to different regions, ensuring that the Titan Happy Eyes Program's benefits reach even more communities in the future.

Key Challenges and Barriers

(Source: Qualitative Data)

Access to Remote Locations

Reaching beneficiaries in geographically isolated areas, particularly tribal and hilly areas, was difficult. Screenings and follow-up appointments were frequently delayed due to poor infrastructure and transportation issues.

Lack of Awareness

Despite extensive outreach efforts, remote and tribal communities continue to have low awareness of cataracts and other vision-related issues. Persistent myths, fears, and stigma surrounding surgeries hampered beneficiary participation.

Volunteer Retention and Support

Volunteers played an important role in mobilising beneficiaries, but a lack of compensation, such as travel and refreshment support, made it difficult to retain committed volunteers.

Cultural and Social Barriers

Cultural norms and gender dynamics frequently prevent women and the elderly from receiving timely care, as family members prioritize other household or livelihood activities over health interventions.

Operational Logistics

Managing large-scale screenings, transportation, and hospital stays for beneficiaries required extensive logistical coordination, which sometimes resulted in delays or inefficiencies due to resource constraints.

Limitations of the Program

(Source: Qualitative Data)

Progress Tracking and Data Management

The lack of regular progress tracking and a digital database made it difficult to measure outcomes, track recoveries, and ensure consistent follow-ups.

Integration with Government Initiatives

Limited collaboration with government health programs, such as the National Blindness Control Program, hampered opportunities for scaling up and ensuring sustainability.

Limited Digital Outreach

Although traditional methods such as posters, pamphlets, and loudspeaker announcements were used, the program had difficulty reaching sceptical or unaware beneficiaries in remote areas. Digital tools and interactive sessions may have increased outreach.

External Dependency

The program's reliance on corporate funding for free services makes it vulnerable to budgetary constraints or shifts in CSR priorities, which could have an impact on its sustainability.

OECD-DAC Framework

Relevance (5/5)

The Titan Happy Eyes Program addresses the critical issue of avoidable blindness, which affects 11.2 million people in India, with cataracts being the most common cause (Source: National Blindness and Visual Impairment Survey (2015–2019)). The Happy Eyes program's emphasis on free cataract surgeries, spectacle distribution, and awareness campaigns ensures it meets community needs. The program has directly addressed healthcare gaps in underserved communities, making it extremely relevant.

Coherence (5/5)

The Program aligns with global and national development goals. It contributes to SDG 3 - Good Health and Well-Being by reducing avoidable blindness and improving healthcare access. Indirectly, it contributes to SDG 1- No Poverty by restoring vision, improving livelihoods, and reducing carer burdens. It also promotes SDG 10- Reduced Inequalities by providing inclusive healthcare to marginalised communities, as well as SDG 17- Partnerships for the Goals through collaboration with healthcare providers and community organisations. Nationally, it complements the National Blindness Control Program's goal of lowering blindness prevalence to less than 0.3% (Source: NPCB), demonstrating its alignment with health and development priorities.

Effectiveness (4/5)

The program's effectiveness is demonstrated by its tangible outcomes, which include the screening of more than 5lakh people, thousands of successful cataract surgeries, and the distribution of free spectacles. It effectively targeted marginalised communities and met its goals of improving vision health and improving beneficiaries' quality of life. High

participant satisfaction rates, clear communication of diagnosis and treatment, and significant improvements in physical, psychological, and economic well-being demonstrate the program's ability to address vision-related challenges comprehensively.

Efficiency (4.5/5)

The Happy Eyes Program demonstrated high efficiency by strategically allocating resources to maximise benefits for beneficiaries. The program was able to keep operational costs low by partnering with local hospitals and NGOs, while also providing cataract surgeries at significantly lower rates by subsidized agreements with healthcare providers.

The program's streamlined processes, which include mobile clinics, efficient screening and surgery scheduling, and corrective glasses distribution, have reduced delays and ensured timely care as well as post-surgery support and counselling. Additionally, providing free transportation and hospital admissions reduced barriers for beneficiaries. This collaborative approach made good use of both financial and operational resources, ensuring that high-quality eye care was delivered at a low cost to underserved communities.

Impact (4.5/5)

The program has had significant socioeconomic impacts. 80% of beneficiaries reported an improved quality of life, citing greater independence and productivity. Over 65% of respondents resumed income-generating activities following surgery, reducing financial dependency. Beneficiary families reported reduced caregiving burdens, which freed up time for other activities. By aligning with the Sustainable Development Goals and national health programs, the initiative addressed not only individual needs but also societal equity and inclusion, reducing disparities in healthcare access.

However, the lack of systematic impact assessment procedures limits the ability to accurately quantify long-term effects.

Sustainability (4.5/5)

The Happy Eyes Program's sustainability is ensured by strong partnerships with local hospitals, NGOs, and community organisations, which help to reduce operational costs and increase long-term impact. By training local healthcare professionals and establishing mobile clinics, the program increases local capacity and promotes the continuation of eye care services in the community. Furthermore, the inclusion of preventive care, such as regular eye exams and awareness campaigns, ensures that the program's benefits endure over time. The program's cost-effective model, which includes

subsidised surgeries and free transportation, ensures its long-term viability and scalability, making it suitable for future expansion in underserved areas.

CHAPTER 4: RECOMMENDATIONS

For Sankara Eye Foundation, India

Enhance Structured Follow-Up and Monitoring Mechanisms- Build a structured follow-up and monitoring system that includes dedicated personnel and digital tools for tracking the entire process, post-surgery recovery, and addressing patient concerns.

Strengthen Awareness Campaigns- Use digital tools like videos, interactive sessions, and social media platforms to increase outreach and engagement in underserved communities.

Capacity Building for Volunteers- Provide volunteers with additional training and financial support to ensure they are well-equipped to mobilise communities effectively.

For Titan Company Limited

Regular Monitoring and Evaluation- Invest in a reliable monitoring system that can track program progress, measure outcomes, and address implementation issues in a real timeline.

Scale the Program- Explore opportunities to replicate the Happy Eyes Program in other underserved areas, leveraging lessons from the current implementation.

CHAPTER 5: CONCLUSION

The Happy Eyes Program, supported by Titan Company Limited and carried out by the Sankara Eye Foundation, India (SEFI), exemplifies the transformative power of collective action in combating avoidable blindness. Through innovative outreach campaigns, comprehensive eye screenings, and life-changing surgeries, the program has transformed thousands of people's lives and restored hope, particularly in marginalised communities. By allowing beneficiaries to regain their vision, the program has not only improved their quality of life but has also given them socioeconomic empowerment, fostering independence and dignity.

The Program is perfectly aligned with national goals and global Sustainable Development Goals, demonstrating a sustainable model of healthcare delivery through effective partnerships. It is a beacon of hope to build a better, more inclusive future.