This presentation is a review of various Blindness Prevention projects that have been done around the world by Rotary Clubs and Districts as well as various organizations that partnered with Rotary.
Examples of Completed Blindness Prevention Projects

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This presentation was given by Dr. Kenneth D. Tuck, Chairman of the Rotarian Action Group for Blindness Prevention. It was presented during the Blindness Prevention workshop at the 2007 RI Convention in Salt Lake City.
The Eerste River Hospital is located in an underprivileged area of Cape Town, South Africa. In 2003 the RC of Constantia helped to establish a viable eye clinic in the hospital. The first year only 52 patients received treatment for cataracts. The program has continued to grow over the years with additional diagnostic equipment being added and this year they treated 160 patients during a single month alone.
Here we see a cataract patient being prepared for surgery by a Rotary volunteer. Note the specialized equipment that is suspended from the overhead arm. This was provided with the help of a Rotary Foundation Matching Grant.
A recent addition to the hospital’s equipment is an Aragon Laser supplied with the help of a Rotary Foundation grant. Diabetes is a major problem among the poor Cape Town population and this new equipment now enables the hospital to offer retinal treatment for diabetic patients.
Zaheerabad, India

RC of Magnolia, Arkansas (USA)  
And  
RC of Zaheerabad, India

This project, sponsored by the RC of Magnolia, Arkansas (USA) and the RC of Zaheerabad, India, also received DDF funding from Districts 6170 and 6060 in Missouri as well as the Blindness Prevention Donor Advised Fund. The project provided 500 cataract surgeries. 1,000 refractive exams with 1000 pairs of prescription glasses and 1000 pair of safety glasses for agricultural workers.
This mother, in her early 40’s, was blind from cataracts in both eyes. She has an 11 year old son who had to leave school in order to earn a few rupees since his mother could not work.
She had one cataract removed as part of the Rotary project and her son is now back in school. In 3-4 months, she will have the other cataract removed.
Matching Grant #62332

RC of Dharmavaram Midtown, India
And
Rotary Club of South Gateway, IN

Matching Grant 62332 funded 1500 cataract surgeries, 2000 refractive exams and prescription glasses and 1000 pair of safety glasses for agricultural workers. It was sponsored by the RC of Dharmavaram Midtown in India and the RC of South Gateway in South Bend, Indiana. Additional funding came from Districts 6060 and 6110 as well as the Blindness Prevention Donor Advised Fund.
This young fellow is a college student studying for his Master of Arts degree. Not only were his studies at risk, but there is great social stigma attached to having a cataract that is so visible.
He came through the surgery with great results and is now back at his studies in earnest.
Dr. Uma Ravishankar Kowshik Venkatasubbiah of the RC of Mysore West, is the Medical Director of the Usha Kiran Eye Hospital in Karnataka, India. Through her efforts the RC of Mysore West, assisted by a TRF Matching Grant has been responsible for sponsoring numerous corrective eye surgeries. Here are just a few of the hundreds of success stories.
More than 1 million people live in the northwestern region of Argentina. Before 2004 there were only two medical centers that were performing cornea transplants.
In 2004, thanks to the efforts of the Rotary Club of Tucuman, Argentina, a new eye bank was opened at the Angel C. Padilla Hospital.
Since its opening 54 cornea transplants have been performed and all have been at no charge to the low income recipients.
RI District 1990 in Western Switzerland donated $145,000 (US$) to acquire essential instruments, equipment and a patient bus for the Nepal Red Cross’s Shree Janaki Eye Hospital.
Each year this hospital restores the sight of over 6500 poor people by performing surgery necessitated by poverty-induced cataract and trachoma. In addition, over 125,000 people receive clinical and educational services for which the bus has proven very important to reach remote populations. The RC of Jankpur assisted the hospital in the framing of the joint eye care programs of the Swiss Red Cross and the Nepal Red Cross.
The RC of Jodhpur in India performed a Rotary Foundation Matching Grant Project at the Terabai Desai Eye Hospital. The project was a collaboration between the RC of Jodhpur, the National Society for the Prevention of Blindness and the Lions Club of Jodhpur Jodhana.
The purpose of the project was to do screening for early detection of visual impairment and eye disease to prevent blindness in the pediatric population.
The project consisted of:

1. Screen for visual acuity, color vision defects, latent squint and convergence
2. Anterior segment examination for eye disease
3. Refraction and dispensing of glasses
4. Follow up care at Tarabai Desai Eye Hospital
5. Eye Health Education
A total of 4264 children were examined as part of the project with the following results:

1. 25.4% (1084) were diagnosed with eye problems and referred for treatment, most of which were refractive error problems.

2. On those that were referred 576 children were fitted with glasses at no charge

3. The remaining 508 children were diagnosed other eye conditions and treated.

This project is an example of how clubs can collaborate with organizations outside of Rotary in order to a project completed.
Refractive error is the primary cause of loss of vision and it is also the easiest to correct. One outstanding program is the Mayan Vision Projects. Part of the project involves mentally and physically handicapped students who sort used eyeglasses for shipping to a new vision clinic in Merida, Yucatan, Mexico.
The Rotaractors who help sort all of the used eyeglasses are part of the first Special Needs Rotaract club in the world. Their organizer is Rotarian Robert Martin, a member of the Board of Directors of the Rotarian Action Group for Blindness Prevention.
This dedicated group of volunteers packed and shipped nearly 80,000 eyeglasses last year and so far this year they have packed about 30,000 more for a new clinic. This project has taken on a life of its own and continues to grow by leaps and bounds.
The Mayan Vision Projects is changing to Global Revision. Their focus is to emphasize the fact that remediation of refractive error represents 95% of the solution to all visual impairments in the world and how these clinics can serve as springboards to treatment venues for all other vision impairments.
During the next portion of our program you’ll learn about partnering with other clubs and districts as well as other organizations for your Blindness Prevention Projects. One such organization is Operation Eyesight Universal, a Canada-based international development organization dedicated to preventing blindness.

Since 1963 this organization has brought sight-restoration and blindness-prevention treatment to more than 34 million men, women, and children in the developing world. Operation Eyesight seeks to create high-quality eye care and community development programs that are self-sustaining and able to provide the best service for the world’s poorest people.

Today, Operation Eyesight continues their work around the world supporting the efforts of physicians and community development teams in India, Pakistan, Bangladesh, Kenya, Zambia and other parts of Africa. All parties involved are guided by the principle of “the best for the poorest,” working toward the day when all people have access to reliable eye care.
One example of their work is in the area of Trachoma. Trachoma is the leading cause of preventable blindness worldwide. It is caused by infections with bacteria that causes painful inflammation in the eyelid. Constant infections over the years result in scarring of the eyelid, turning the lashes inwards which then scrape the cornea, causing permanent damage and blindness. The photos which you are seeing were provided by Operation Eyesight and were taken by photographer Peter Carrette.
Today, more than 8 million people are blind as a result of trachoma. An additional 84 million suffer from active infections. Left untreated this will result in blindness and needless suffering. The key word here is NEEDLESS. It doesn’t have to be this way.
Children bear the highest burden of disease for active trachoma infections. Most children and their parents do not know they have an infection and as a result, trachoma is often ignored and left untreated.
Operation Eyesight uses the SAFE strategy to combat Trachome.

First: Surgery repairs the eyelid

Second: Antibiotics rid the body of the infection

Third: Face-washing prevents spreading the disease and new infections

And Fourth: Environmental infrastructure eliminates the breeding areas of the flies which carry the disease
Clean water is the key to overcoming Trachoma. Without a reliable supply of clean water the SAFE strategy cannot work. Trachoma only occurs in those places that do not have a reliable clean water supply. One of Operation Eyesight’s overall objectives is to ensure that everyone living in areas with trachoma is within 500 meters of a clean water source.
In Africa, clean water means life and health. For example, this well in the Gwembe Valley in Zambia now provides safe drinking water. Having access to clean water has reduced Trachoma in this area from greater than 45% of the population to less than 5%.

That is why, when planning a Blindness Prevention project in developing countries, we encourage you to also look at the availability of clean water in the area and endeavor to include it as part of your project to help insure its continued success.

These examples of Blindness Prevention projects are but a few of the many that are being completed worldwide. Many of them were assisted by contributions from The Rotary Foundation and in some cases from the Blindness Prevention Donor Advised Fund.
For information on how YOU can become involved in Blindness Prevention with Us

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