



Impact Report

JULY 1, 2018 – JUNE 30, 2019



*“...make a difference about something
other than yourself.”* — TONI MORRISON

This is exactly what you, our partners, staff, and board members have done for decades.

You made 2018 one of our most transformational years to date. You helped us provide eye care services in 20 countries to over one million people - 1,539,981 men, women, and children, to be exact.

Seva staff and partners have done remarkable and groundbreaking work for decades - restoring sight and transforming lives around the world. And yet, with the world getting older, the demand for our expertise increases, not decreases. Together, we have changed the way sustainable eye care is delivered worldwide. But we need to be ready to do more.

This report will showcase the impact of our 20 newly established primary eye care vision centers (PECVCs) in Cambodia, Nepal, Bangladesh, and India. It also will give you an overview of the ground-breaking learning exchange program with doctors from Kaiser Permanente, and the Visualiza eye care clinic in Guatemala - the first of many regionally-focused training exchanges in the Americas.

What truly matters in the end is the people we serve. The real change we make in an individual's life, on their family and their community. In this report we spotlight two adorable sisters from Burundi - Darlene, age 4, and Myriam, age 2. The sisters developed cataracts at an early age. Without proper eye care, they risked losing their vision forever. Come and read how one of our partners intervened in time, and gave them back their sight.

Seva is well known for being the organization that directs your good where it will do the most. On behalf of everyone who can't say so for themselves - *thank you* for helping transform the world a million times over. Thank you for making a difference through your generosity.



KATE MOYNIHAN, EXECUTIVE DIRECTOR



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PROGRAM HIGHLIGHTS FY 2018-2019



Trainings Conducted

5,351

Total Individuals Trained

302

Clinically Trained Individuals

5,049

Non-clinically trained individuals

178

Total Training Sessions Provided

68

Clinical Training Sessions

110

Non-clinical Training Sessions

TRAINING HIGHLIGHTS

- » 5,049 non-clinical staff trained, including hospital managers, program managers, & hospital data administrators.
- » 302 clinicians trained.
 - + Specialties include small incision cataract surgery (SICS), oculoplasty, diabetic retinopathy, phacoemulsification, corneal transplant, ophthalmic assistants, & retina conditions.
 - + Also includes 24 HIV/AIDS clinicians trained in Myanmar, Ukraine, India, and Mozambique to conduct an eye exam to detect CMV retinitis and TB.
- » Dr. Raghunandan Byanju, Chief Medical Director at NNJS/Bharatpur Eye Hospital in Nepal, was named an IAPB Eye Health Hero in August 2018, for over 25 years of selfless humanitarian service.
- » The ASCRS Foundation honored Dr. Richard Litwin with Chang Humanitarian Award in May 2019, for his lifelong commitment to training doctors around the world.
- » Dr. Prom PovSorina completed her second year of residency in ophthalmology at Thailand's Thammasat University Eye Center. Dr. PovSorina, who hails from Cambodia, has one year left before she graduates. Seva is proud to provide financial support for her training.
- » 15 mentee hospitals added
- » 469,138 cataract surgeries completed in 2018 by GSI Hospitals



PROMOTING ACCESS

When it comes to vision care, access is everything. As of 2019, an estimated 253 million men, women, and children worldwide live with moderate to severe visual impairment. The vast majority of these cases, 80% of them, could be treated or prevented. The only barrier that stands between them and regaining their sight is a lack of access to affordable quality eye care.

Losing one's vision can be catastrophic for someone in the developing world.

Adults often miss work and frequently lose their ability to work. Children suffering from visual impairment drop out of school or never attend, thus losing their chance at an education. Elder relatives become unable to care for themselves and require continual care from their younger family members. In other words, visual impairment further perpetuates the vicious cycle of poverty in the developing world — all because millions do not have access to basic eye care.

Seva seeks to help these individuals receive the care they need. Working with local partners,

we actively engage in public outreach to find and counsel patients in remote communities. Our programs place a special emphasis on women and girls, who traditionally have less access to eye care. Seva's programs break down geographical and financial barriers by providing transportation and lodging to patients. They also promote eye care education by training local community healthcare volunteers and teachers. Seva's network of partners typically provide medical procedures, medication, treatment of trauma, corrective glasses, highly efficient 15-minute cataract surgeries, and sub-specialty eye surgeries.

Continuing to Create Access

Seva's Primary Eye Care Vision Centers (PECVCs) play a major role in expanding access to eye care to even the most remote communities. Most vision-impaired people live in underserved areas, often in rural communities, far from hospitals that can treat them. Economically and socially disadvantaged individuals, particularly women and children, are often unable to travel into major cities to seek treatment. We aim to solve this problem by establishing PECVCs in remote areas, to serve those who would otherwise be forced to go without vision care.

Staffed by locally recruited and well-trained technicians, PECVCs serve as permanent eye care facilities in the community. They are the first level of response in offering comprehensive eye care services. Services typically include screenings, eyeglasses, diagnosis of common eye conditions, and referrals to a hospital for cases needing further intervention. This past year,

Seva supported the creation of 20 PECVCs in Cambodia, Nepal, Bangladesh and India. Fifteen more PECVCs are scheduled to open in the coming year in Nepal, India and Bangladesh.

Telemedicine greatly expands patients' options as well. Individuals seeking care at PECVCs can video conference with doctors at larger hospitals, allowing them to receive more specialized care, if needed. The patient can receive more information about a medical issue, share test results electronically, and be prescribed medication if necessary. By providing these services, PECVCs make vision care a regular and easily-accessible part of the social fabric of remote communities. Patients can receive screenings, diagnosis, and basic treatment as soon as they start experiencing symptoms, instead of having to travel long distances to receive care.



PATIENT STORY:

Meet Darlene and Myriam, a pair of cheerful, playful sisters. Darlene is 4 years old, and Myriam is 2. They live with their mother and grandmother in the African country of Burundi. When Darlene was 2, her mother began to notice that something was wrong. The little girl's eyes looked cloudy, and she seemed to be having difficulty focusing on and tracking objects. Her mom took her to a nearby health center, but couldn't get a proper diagnosis or treatment. As if this wasn't already enough of a challenge, just a few days later, Myriam was born. Before long, it became clear that she had the same difficulty seeing as her older sister.

"Before the surgery, Darly and Myriam were always sad," remembers their grandma. "They rarely smiled. They could not play with others. We had to be very keen for them not get injured or involved in an accident."

It began to take a toll on the family's ability to feed itself, too, says their grandma: "We had to take turns working in the field. If I went farming, Mama had to stay. If she went, I had to stay with the girls. We didn't know how to take care of a blind child. We couldn't imagine what the future held for the two blind children."

Their mom and grandma feared that they would never be able to restore the girls' sight. People in their community began to suggest that their blindness was caused by a family curse.

Thankfully, an outreach worker from one of Seva's partner hospitals met the family at the local market. He referred them to the Centre Tertiaire de Sante Oculaire de l'Enfants (CTSOE), a hospital in the city of Bujumbura. In March, the outreach worker accompanied the girls and their family to the hospital, where they were properly diagnosed with cataracts and scheduled for surgery later in the week.

A quick, safe surgery was all it took to change the girls' lives forever.

"It was such a miracle to see my children walking for themselves," reflects their mother. "They can now see my face and smile at me. Before surgery, when I leave them somewhere, they would be stuck there until I come back but now that has changed, they are all over the place at home!"

The girls, of course, are thrilled to be able to see and play with their friends. Darlene will attend preschool in September, and their family has high hopes for the girls' future.



PHOTO ABOVE: Myriam and her mother



BUILDING CAPACITY

One of Seva's core aims is to ensure that communities around the world can provide eye care for themselves. As the old proverb goes, "Give someone a fish, and they will eat today. Teach someone how to fish, and they will eat for a lifetime." The Global Sight Initiative (GSI) is our partnership-based program that enables doctors, paraprofessionals, and hospital staff worldwide to provide the vision care services that their communities need. In doing so, we help them provide ongoing, year-round care to their hometowns and regions, without having to rely on volunteer doctors from other countries.

The GSI enables "mentor" institutions to provide training and consultancy services to "mentee"

hospitals around the world. The GSI coordinates between 10 mentor institutions, and 115 mentee clinics, in 16 different countries all around the globe. Each of these partners shares the mission to build high-quality, affordable, and sustainable eye health services in communities within their own countries and beyond. Mentor hospitals partner with mentee hospitals to foster management systems, and equip local staff with the tools they need to provide comprehensive care. Essential services include cataract surgery, glasses, medications, and other core needs.

Seva provides rigorous training in management, clinical skills, and community outreach, along with a myriad of other roles required for a strong program. Seva gives small investment grants

Capacity Building Program Highlight: Learning Exchange with Kaiser Permanente

This past May, Seva embarked on a new learning exchange program with Kaiser Permanente. Six Kaiser ophthalmologists traveled to the Visualiza Clínica Médica Oftalmológica (known simply as “Visualiza”), one of our partner clinics in Guatemala. There, they shadowed eye doctors from Visualiza, to hone their skills, learn the latest techniques, and expand their expertise. Each doctor specialized in different conditions, including glaucoma, cornea problems, and diabetic retinopathy.

The visiting Kaiser doctors consulted on cases, but did not partake in surgery on patients; this was left to the Latin American doctors, who were there for hands-on training. At the end of the exchange, both groups of doctors left feeling enlightened and confident in what they had learned. We at Seva are thrilled at the success of this exchange, and we look forward to holding many more like it over the coming years.

Since 2006, Visualiza has been one of Seva’s key partners in the Latin American region. Visualiza serves patients in Guatemala City, as well as the traditionally underserved rural region of Petén. Through its partnership with Seva, Visualiza also serves as a mentor hospital to five mentee hospitals throughout Latin America.

in order to launch robust community-based services, which increasingly take the form of PECVCs. These centers often grow to cover their costs through low patient fees and the sale of prescription glasses.

The results speak for themselves: a recent study of 25 GSI hospitals found an average increase in cataract surgical volume over baseline. Twelve hospitals showed increases of over 100% after participating for four years. By teaching clinics how to efficiently and sustainably provide these services, Seva ensures that nobody in these communities has to lose his or her sight from a lack of eye care.

Seva-sponsored capacity building and training activities in the past year:

- » 302 doctors, nurses and other health professionals received clinical training in the ophthalmic field — including fellowships in retina and cornea conditions and high-level training in cataract surgical technique.
- » 5,049 teachers, local health partners and other key outreach personnel received eye care training.
- » 110 non-clinical trainings were conducted for hospital managers, program managers, health promotion workers and volunteers, and hospital data administrators.



COLLECTING AND LEARNING FROM EVIDENCE

All of Seva's programs, initiatives, and campaigns are, at their core, data-driven. Everywhere we work, we collect data. We do this because we constantly strive to be a better, more efficient, more effective organization. We meticulously and systematically keep track of how many total people have been examined, the gender of patients, their conditions, how many go on to seek surgery, their post-op visual acuity, and many other important data points. These help us determine what types of visual impairment are most frequently afflicting the people we serve, what

their treatment needs are, and how effective our partners' community outreach has been.

We also collect data on our partner hospitals, particularly how many surgeries are completed at each site, and what conditions are they able to successfully treat. Two of our most important data points are the number of eyeglasses distributed by a hospital, and the number of patients that receive cataract surgery. Cataracts are relatively simple and cost-effective to treat. If a partner hospital is able to successfully handle a large caseload of cataract patients, they may be ready to branch into treating more complex

SPOTLIGHT: DRA. LUCIA SILVA FROM GUATEMALA

One of Seva's core values is promoting gender equity in ophthalmology. Dr. Lucia Silva is one of our many partners who help champion this cause through her dedicated and selfless labor. As Medical Director of Visualiza in Guatemala, Dr. Silva plays a key role in our efforts to expand vision care throughout Latin America. Visualiza recently hosted a Seva learning exchange with Kaiser-Permanente. Six Kaiser ophthalmologists traveled to Guatemala City. There, they shadowed Visualiza doctors, consulting on difficult cases and learning from the local doctors themselves.

Dr. Silva, who specializes in glaucoma, has faced her share of challenges as a female ophthalmologist. *"At the beginning, it's hard to be accepted in a position like this, even by your own colleagues,"* she reflects. *"Some co-workers find it hard to follow directions from a woman, especially if you are young."*

While many young physicians would be discouraged by this, Silva is determined to help change the gender balance.

"As a physician, I'm committed to doing my job the best I can," she explains. *"But as a woman, I'm also interested in giving other women leadership and decision-making opportunities."*

eye conditions, such as diabetic retinopathy or glaucoma. If they are struggling to handle their current caseload, the data we collect helps us determine where they could use help, ie, in management, in community outreach, in record-keeping, etc.

Another area where Seva collects data is in our training efforts. One of our most important objectives is to create a "human resources pipeline," from the worldwide pool of talented eye care professionals and volunteers, to the patients, communities, and hospitals that need their help. We keep track of how many doctors, nurses, and paraprofessionals we have trained, and what procedures and practices we have



PHOTO ABOVE: Dr. Lucia Silva

Visualiza is already making changes to its structure to promote gender equality. Over the last two years, more than 70% of employees who have been promoted to manager positions have been women.

"The best way to support younger women in ophthalmology is

through example," says Dr. Silva. "It's through sharing with them stories of how our capacities and talents count, and how other women have accomplished great things with hard work."

Seva is proud to support Dr. Silva's vital humanitarian work to end avoidable blindness in Latin America. Thanks to the support of our donors, she was able to attend this year's Women in Ophthalmology Summer Symposium in Coeur d'Alene, Idaho. There, she networked with other female ophthalmologists, sharing her experiences and learning new, valuable skills.

taught them. We particularly focus on training women, and creating vision care-related jobs for them, in the countries we serve.

With partners in more than 20 countries, data collection methods often need to be customized to fit the needs of each hospital. Many of the hospitals in the Global Sight Initiative (GSI) network operate within unique cultural contexts. Outreach in one country may present different challenges from outreach in another country. Through the Global Sight Initiative mentorship model, hospitals are able to improve outreach methods, and bring comprehensive vision care to those who otherwise would not have access.

PLANS FOR THE FUTURE

Seva is compelled to do its part to halt the international blindness epidemic, and is positioning our world-wide network to play a leadership role in ending avoidable blindness in our lifetime. Since 1978, together with our partners Seva has helped 5 million men, women, and children regain their sight, and brought vision care to an additional 35 million people worldwide.

Sadly the need for vision care continues to grow. By 2050, the overall number of visually impaired people is projected to triple, from 36 million to 115 million. To turn the tide on the growing blindness epidemic, we have to expand the breadth of our global impact. Much of the technology exists, our talented partners have the know-how and the world-wide network of committed hospitals who are poised to play a leadership role that is required. What we need is the additional resources to make this a reality. A new campaign launched by Seva, C20/20, will play a crucial part in achieving this goal, by growing our impact in four key areas:

EYE CARE FOR CHILDREN

Children suffering from blindness and low vision often require special procedures and equipment. In the areas where we work, most eye care facilities simply do not have the resources and trained doctors necessary to treat children. As part of this initiative, we will expand our range of school and community screenings, train new pediatric eye care professionals, and provide the tools that medical centers require to serve children in need.

Our C20/20 goal is to raise an additional \$7 million to provide services for at least 3 million children world-wide.

TECHNOLOGY

New technology is critical to fighting the blindness epidemic. By providing new equipment to our partners, vision impairing conditions can be detected, monitored, and treated earlier - decreasing the loss of vision our patients experience. Additionally, by using a combination of artificial intelligence and retinal imaging via telemedicine, patients can receive

care in the home communities, rather than sending them to distant hospitals for less-frequent screenings.

Through C20/20 we will raise an additional \$6 million that will bring the best in technology to the hardest to reach communities across the globe.

VISION CENTERS

Over the past 5 years, we have established 75 Primary Eye Care Vision Centers globally. These provide an entry point to eye care, acting as an extension of eye hospitals where trained staff perform eye exams, refraction, glasses, and referral to hospitals. As part of C20/20, we will establish 100 new vision care centers worldwide. We plan to serve 2.5 million individuals, utilizing telemedicine, locally-recruited paraprofessionals, and new technology to deliver primary eye care in the community, and refer complex cases to local hospitals.

C20/20 will raise an additional \$6 million to fund more than 140 centers that will reach an additional 4 million people world-wide.

TRAINING & JOB CREATION

One of the biggest challenges to ending avoidable blindness is ensuring there are enough trained eye health providers of all levels — including paraprofessionals, ophthalmic nurses, and ophthalmologists. We are expanding our commitment to train more people worldwide and expand the capacity of our partners to ensure they are able to provide high-quality care for those in need.

C20/20 will raise an additional \$3 million for training and job creation to train thousands of paraprofessionals who will have a life-long impact on their communities and earn income that helps support their families.



CONCLUSION

We hope this impact report has given you a taste of what your financial support made possible for over 1.3 million people this past year. By giving to Seva, you have helped thousands of people regain their sight, and transformed millions of lives for the better. We thank you for trusting Seva with your investment. It is our job to amplify your values, to unlock as much goodness as possible, and strive to create a world where no one loses their vision unnecessarily.

If you want to learn more about a specific area of Seva's work, please let us know by contacting us at give@seva.org. We are happy to provide you with additional information. On behalf of the Seva family, our partners, and everyone we serve around the world, thank you for your continued commitment and generous support!

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SEVA FOUNDATION

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