Extra Funds are Needed for Vision 2020: The Right to Sight

Mike Lynskey BA
Chief Executive
The Fred Hollows Foundation
Locked Bag 100
Rosebery NSW 1445
Sydney
Australia

The Vision 2020 campaign was conceived as a fundraising concept because the incidence of avoidable blindness in developing countries was increasing faster than available resources to tackle the problem. Without extra resources the levels of avoidable blindness will double over the next twenty years.

Avoidable blindness is a major health problem in less developed countries because large numbers of people do not have access to eye health personnel, equipment and consumables. Blindness prevention is very attractive to potential donors because it is one of the few areas of public health where things can be done. In comparison to other public health issues, blindness prevention can be very cost effective. Hence the Vision 2020: The Right to Sight campaign.

Good Planning is Needed

Fundraising for Vision 2020 cannot be done in isolation from the special development needs of blindness prevention. Money alone will not solve the problem. Funds raised must be well targeted and effectively used.

Fundraising and resource mobilisation to help train eye health workers, to acquire equipment, to help with the supply of consumables and to develop management systems will be the key to the success of Vision 2020.

It will be necessary to explain to funders that different approaches will be needed in different places to implement Vision 2020. It is not simply a matter of transferring technology and techniques that might work in New York or London to a remote province in China, rural India or in an African village.

For example, by lowering the cost of cataract surgery to around US$25 – US$50 per eye in some developing countries (significantly lower than the US$1,000 plus it costs in many developed and developing countries), it begins to be possible for even the poorest-of-the-poor to benefit from modern eye surgery. Many places this has happened. In Vietnam it is now estimated that 100,000 people per year have their sight restored through modern eye surgery which is paid for with local money. Countries like India, Nepal and Pakistan have also made dramatic progress, and cost recovery makes this self-sustaining.

So if cost recovery is a critical strategy in blindness prevention, funds also need to be raised to pay for the development of cost recovery work.

Fundraising Cannot Marginalise Local Input

Many people in developed countries believe that nothing can be done in a developing country without help from wealthy developed country donations. The reality is that the contribution from foreign donors is unlikely to work without strong, committed and effective local involvement. It is most important that the Vision 2020 campaign explains and communicates that local capacity building is the key to success. This will also help attract the kind of donor who can work more effectively with the Vision 2020 campaign.

Unique Selling Point to Funders – 80% of Blindness is Avoidable

It is rare to find positive, life changing and cost effective examples of development aid and health care. The Vision 2020 campaign needs to develop strategies to exploit its unique fundraising advantage.

Affordable, high quality eye care can be made available to disadvantaged blind people in developing countries, 80% of whom are estimated to be avoidably blind. There are few other examples of such a powerful selling point to funders.

How Much Extra Money is Needed?

The Vision 2020 campaign currently contributes around US$100 million to blindness prevention work through NGOs such as Lions International, Agenzia Internazionale Per La Prevenzione Della Cecita, Al Noor Foundation, Christian Blind Mission International, Sight Savers International, Helen Keller Worldwide, Orbis International, International Centre for Eye-care Education, Operation Eyesight Uni-

---

COMMUNITY EYE HEALTH WORKSHOPS

The workshops at the following venues are designed for eye health workers who are working or plan to work in Community Eye Health. Applicants must be resident in the region to which they apply.

<table>
<thead>
<tr>
<th>Region</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Colombia</td>
<td>April 2001</td>
</tr>
<tr>
<td>Pakistan</td>
<td>April 2001</td>
</tr>
<tr>
<td>Tanzania</td>
<td>June 2001</td>
</tr>
<tr>
<td>India</td>
<td>July 2001</td>
</tr>
<tr>
<td>Nigeria</td>
<td>September 2001</td>
</tr>
</tbody>
</table>

Letters of enquiry should be sent to:
Graham Dyer, ICEH, 11–43 Bath Street, London, EC1V 9EL
Fax: 00 44 (0)20 7608 6950 E-mail: graham.dyer@ucl.ac.uk
Vision 2020: The Right to Sight

universal, Organisation pour la Prevention de la Cécité, The Carter Center, The Fred Hollows Foundation and some 60 other organisations.

It is estimated that an extra US$100 million per year is needed.

How Do We Reach the Funders?

A wide range of sources will be targeted. These include:

- wealthy foundations
- governmental and inter-governmental donors, such as the European Union and the World Bank
- the corporate and business communities
- individual donors.

Because Vision 2020 has a wonderfully positive unique selling point, the chances of success with these funders are high.

Competition is so great with funders that a poorly thought out approach is unlikely to bring results. Under pressure from organisations such as the International Monetary Fund, governments the world over are shrinking their public sector. Government funds from developed countries for development aid is therefore falling as a percentage of the donor country’s own annual income, i.e., gross nation-al product. Unfortunately this decline in official funding is happening at a time when companies around the world are driven by shareholders who demand the highest returns possible on their investments. The capacity of private companies and industries to donate funds for development work is therefore also under great pressure.

Immense wealthy individuals such as Bill and Melinda Gates, Ted Turner and other philanthropists have to some extent filled the gap created by the reduction in government and corporate generosity. But the demands upon these people, foundations and organisations is extraordinary. So Vision 2020 must be very well organised, clever and inventive to get to the front of the ever growing queue of those fundraising.

An international Vision 2020 Executive Director, who will be located with the World Health Organization in Geneva, is also being recruited. A key responsibility of this position will be fundraising.

National Vision 2020 Entities

Some countries such as Australia, India and the United Kingdom have either decided or are considering establishing national Vision 2020 organisations to co-ordinate activities better within their own countries. The Vision 2020 logo and name is being registered as a trademark in a wide range of countries so that the good name of Vision 2020 can be professionally managed and protected. Fundraising guidelines and other organisational matters are also being developed.

National Vision 2020 entities will play an important part in helping facilitate fundraising.

Fundraising Strategy

Fundraising is a discipline involving a wide range of sophisticated techniques. These techniques include direct mail, telemarketing, bequests (legacies), special events, capital campaigns (to raise money for infrastructure and equipment) and public appeals.

Vision 2020, through its members and partners around the world, has access to highly developed fundraising expertise. Sharing knowledge, contacts, fundraising skills and expertise amongst the wide range of groups and individuals involved will be crucial to successful Vision 2020 fundraising. Guidelines on how to handle these matters are being developed.

ROYAL COLLEGE OF OPHTHALMOLOGISTS
17 Cornwall Terrace, Regent’s Park, London NW1 4QW, UK

Diploma Examination in Ophthalmology

DRCOphth

ANNOUNCING A CHANGE
TO THE STRUCTURE

From November 2001, there will be no Practical Refraction section in the Diploma examination

The New Diploma Examination (DRCOphth) is a test of ophthalmic knowledge including relevant basic sciences and clinical skills for candidates who have worked in ophthalmology for one year (full-time or equivalent). This work experience need not have been gained in the UK

Information, Exams syllabi, Applications from: The Head of the Examinations Department at the above address
Or tel: 00 44 (0) 20 7935 0702
Or fax: 00 44 (0) 20 7487 4674
Or e-mail: rco.exams@btinternet.com
Or visit the College website www.rcophth.ac.uk

UK and Overseas Examination Calendar 2001

<table>
<thead>
<tr>
<th>Exam</th>
<th>Dates of examination</th>
<th>Location</th>
<th>Closing date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Part 1</td>
<td>23–24 April</td>
<td>UK, India</td>
<td>12 March</td>
</tr>
<tr>
<td>MRCOphth</td>
<td>8–9 October</td>
<td>UK, India, Egypt</td>
<td>27 August</td>
</tr>
<tr>
<td>Part 2</td>
<td>18–22 June</td>
<td>UK</td>
<td>7 May</td>
</tr>
<tr>
<td>MRCOphth</td>
<td>10–11 October</td>
<td>India</td>
<td>27 August</td>
</tr>
<tr>
<td></td>
<td>5–9 November</td>
<td>UK</td>
<td>24 September</td>
</tr>
<tr>
<td>Part 3</td>
<td>12–15 March</td>
<td>UK</td>
<td>29 January</td>
</tr>
<tr>
<td>MRCOphth</td>
<td>17–21 September</td>
<td>UK</td>
<td>6 August</td>
</tr>
<tr>
<td></td>
<td>11–12 October</td>
<td>India</td>
<td>27 August</td>
</tr>
<tr>
<td>DRCOphth</td>
<td>25–28 June</td>
<td>UK</td>
<td>14 May</td>
</tr>
<tr>
<td></td>
<td>19–20 November</td>
<td>UK</td>
<td>8 October</td>
</tr>
</tbody>
</table>

Overseas locations:
Aravind Eye Hospital, Madurai, Tamil Nadu, India
The British Council, Cairo, Egypt