Impact Assessment Report 2023-24

DRISHTI

Ayurveda Eyecare Project

National AYUSH Mission Kerala

Contents

Introduction

"DRISHTI" -Prevent the preventable blindness program

Blindness has profound physical and socioeconomic consequences in all societies, imposing significant economic burdens on individuals, families, and society. The costs associated with lost productivity, rehabilitation, and education of the blind are substantial. A comprehensive national assessment in Australia highlighted the economic impact of visual impairment, revealing that vision disorders rank seventh and account for 2.7% of the national loss of wellbeing. Five principal eye conditions - Cataract, Age-related macular degeneration, Glaucoma, Diabetic retinopathy, and Under-corrected refractive error account for approximately 75% of all visual impairments. Studies indicate that blindness affects 0.8 per 1000 children, with one-third experiencing partial vision loss before the age of 20. In India, the prevalence of blindness among children ranges from 3% to 22%, according to population-based studies. Early medical intervention is crucial in reducing or preventing eye problems, often attributed to factors such as malnutrition, anaemia, lifestyle choices, and dietary habits.

Globally, cataract is the leading cause of blindness, responsible for 47% of cases, according to the WHO. Most cataracts develop due to aging or injury affecting the eye's lens. Genetic disorders, other eye conditions, past eye surgeries, diabetes, and long-term steroid use can also increase the risk of cataract formation. The WHO's Vision 2020 initiative emphasizes the prevention of preventable blindness. In our country, the leading causes of blindness are cataract, diabetic retinopathy, and glaucoma. Population studies reveal a significant reluctance among the public to undergo surgical procedures due to fear, cost, and potential complications. Ayurveda offers an alternative approach to managing cataracts, particularly in the early immature stages. Conservative management can help prevent cataracts from progressing to a mature state. This project under the National AYUSH Mission (NAM) successfully addresses such complaints, providing early intervention and effective management to prevent further vision loss.

DRISHTI - Prevent the preventable blindness is an amalgamation of PRISM and MIZHI Projects for comprehensive eye care for all the age group. This project aims to converge different projects of ISM and NAM concerned with Nethra Chikitsa and to improve the proper functioning of ISM Nethra units by conducting outreach programs like school health programs (as previously done in Mizhi), early detection of diabetic retinopathy, glaucoma etc. in a comprehensive manner.

Aim

In accordance to the **National Program for the Control of Blindness and Visual Impairment**, **Drishti** aims to prevent preventable blindness in the community by providing comprehensive eye care services, correcting refractive errors, treating ophthalmic problems, detecting early signs of cataract, diabetic retinopathy, and glaucoma, and improving vision and overall eye health.

Objectives

1. Early identification of ophthalmic problems across different age groups, with a specific focus on school-going children.
2. Diagnosis and treatment of refractive errors in children.
3. Early-stage control of cataract, glaucoma, and diabetic retinopathy.
4. Early diagnosis of glaucoma in susceptible patients.
5. Reduction of increased intraocular pressure (IOP) caused by glaucoma.
6. Early treatment for diagnosed diseases to improve vision and prevent blindness.
7. Sensitization and education of parents of school-going children about ophthalmic problems in children.
8. Provision of advanced ophthalmic services through referrals.

Purpose of impact assessment

This impact assessment report for the Drishti Project provides a detailed overview of the project's objectives, activities, methodology, outcomes, and beneficiary details over the last three years across various districts in Kerala. The report covers the following key points:

- The report begins with an introduction to the Drishti Project, emphasizing its aim to prevent preventable blindness and improve eye health outcomes in the community. The purpose of the impact assessment is outlined, focusing on evaluating the project's implementation, effectiveness, reach, and contributions to eye health services.

- The aim of the Drishti Project is aligned with the National Program for the Control of Blindness and Visual Impairment, targeting comprehensive eye care services, early detection, treatment, and awareness. Specific objectives include early identification of eye problems, diagnosis and treatment of refractive errors, control of cataract, glaucoma, and diabetic retinopathy, and sensitization of parents and communities.
- The report details various activities conducted under the Drishti Project, including screening camps, referrals, vision tests, awareness classes, dietary education, eye exercise training, and advanced ophthalmic services.
- The impact assessment methodology involves a retrospective observational study design using quantitative and qualitative data collection methods. Data analysis includes patient demographics, types of eye conditions, treatment outcomes, recovery rates, documentation levels, stakeholder perceptions, and experiences.
- The report provides a comprehensive review of the project's outcomes over three years, including the number of camps conducted, patients treated, age-wise and gender-wise distributions, types of eye conditions, treatment modalities, recovery rates, and documentation levels. It also discusses beneficiary feedback, satisfaction levels, and challenges faced in accessing eye care services.
- The report includes detailed assessments of the Drishti Project's impact in Trivandrum, Idukki, Thrissur, and Kannur districts. It highlights the screenings, treatments, outreach activities, awareness programs, patient demographics, types of cases, treatment preferences, and recovery rates specific to each district.
- The report mentions research activities conducted under the Drishti Project, focusing on smartphone usage effects on neuro-ophthalmology, post-COVID-19 eye issues, and various case studies and case series related to eye conditions and Ayurvedic management.

Overall, the impact assessment report provides a comprehensive analysis of the Drishti Project's achievements, challenges, and recommendations for enhancing its effectiveness in addressing eye health issues and preventing blindness in Kerala's communities.

Activities

- In collaboration with the GAD/GAH, screening camps are conducted in multiple locations
- Upon diagnosis of a disease during the screening camps, patients are referred to higher centres such as District Ayurveda Hospitals for further treatment.
- At higher centres, there is a provision of the latest diagnostic techniques and medicines.
- Periodical vision testing is conducted in the Ayurvedic Hospitals
- Awareness classes are conducted on Dietary habits/ food habits for the prevention and cure of eye diseases
- Eye exercise training is given and daily practice initiated

Methodology

The impact assessment for the Drishti Project follows a retrospective observational study design, analysing data collected over three consecutive years (2021-2024) from various districts in Kerala, including Trivandrum, Idukki, Thrissur, and Kannur. Data collection was conducted through a combination of quantitative and qualitative methods

- Collected from official records, patient registries, and project documentation, including the number of camps conducted, patients treated, age-wise and gender-wise distributions, types of eye conditions, treatment modalities, recovery rates, and documentation levels.

- Gathered through interviews, surveys, and focus group discussions with project stakeholders, including medical staff, beneficiaries, and community members, to assess perceptions, challenges, and experiences related to the Drishti Project.
    - Quantitative Analysis: Utilized statistical methods to analyse numerical data, including descriptive statistics (e.g., frequencies, percentages) to summarize patient demographics, types of cases, treatment outcomes, and trends over the study period.
    - Qualitative Analysis: Employed thematic analysis techniques to identify key themes, patterns, and insights from qualitative data sources, such as interviews and focus group discussions, to understand stakeholder perspectives and experiences.
- Patient Demographics: Age-wise and gender-wise distributions of beneficiaries accessing Drishti Project services.
- Type of Cases: Analysis of different eye conditions diagnosed and treated under the project, including refractive errors, cataracts, glaucoma, diabetic retinopathy, and others.
- Documentation Levels: Examination of documentation practices within the project, including patient records, treatment plans, follow-up protocols, and data reporting mechanisms.
- Incorporation of beneficiary feedback and satisfaction levels through surveys and interviews to assess the perceived impact of the Drishti Project on vision health outcomes, access to eye care services, and overall quality of care.
- Based on the findings from the impact assessment, formulate recommendations and an action plan to address identified gaps, enhance project effectiveness, improve service delivery, and promote sustainability of eye care initiatives under the Drishti Project.
- Recommendations may include strategies for capacity building, stakeholder engagement, resource allocation, data management, quality assurance, and community outreach to optimize the project's impact and reach.

Outcome assessment

Brief Review of Year 2021-22

In total, 32 camps were conducted and 14,293 patients were treated including IP cases.

Detailed project outline and work pattern was designed, expert committees were constituted, treatment protocol and case sheet IEC material were finalized. Screenings were conducted for glaucoma and diabetic retinopathy, utilizing available infrastructure facilities. Special awareness classes on diabetic complications were conducted, focusing on diabetic retinopathy and glaucoma. Online program "Ayush Mithayi" Season 2 was organized for diabetic patients. Other activities include Drishti project competitions and awareness classes, webinars, publication of a Handbook on Preventive Ophthalmology.

Brief Review of Year 2022-23

In total, 136 camps were conducted and 45746 patients were treated including 15,087 male cases, 15349 female cases, 19102 child cases and 498 IP cases.

Detailed project outline and work pattern was designed, expert committees were constituted, treatment protocol and case sheet IEC material were finalized. Screenings were conducted for glaucoma and diabetic retinopathy, utilizing available infrastructure facilities. Special awareness classes on diabetic complications were conducted, focusing on diabetic retinopathy and glaucoma. Other activities include Drishti project competitions and awareness classes, and webinars.

Brief Review of Year 2023-24

In total, 112 camps were conducted and 45101 patients were treated including 17855 male cases, 18991 female cases, 6953 child cases and 412 IP cases. Detailed project outline and work pattern was designed, expert committees were constituted, treatment protocol and case sheet IEC material were finalized. Screenings were conducted for glaucoma and diabetic retinopathy, utilizing available infrastructure facilities. Special awareness classes on diabetic complications were conducted, focusing on diabetic retinopathy and glaucoma. Other activities include Drishti project competitions and awareness classes, and webinars.

Awareness channels of Drishti project among community

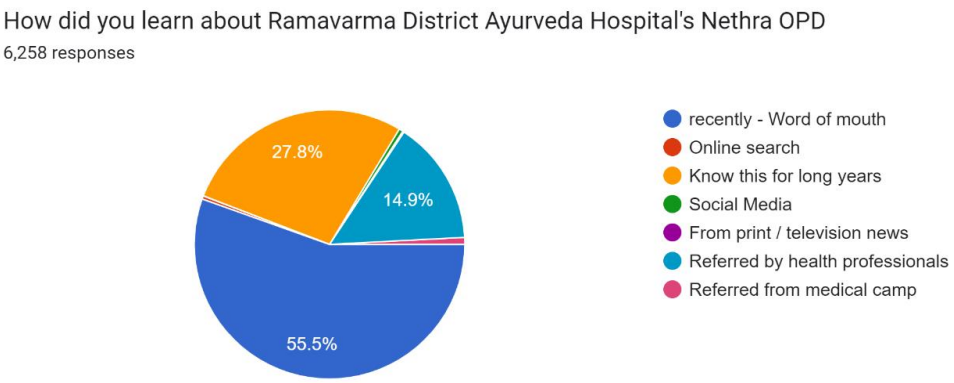

Figure:1

- Maximum publicity regarding Drishti project functions and appraisal to the community is through word of mouth which accounts for **55.5 %** and **27.8%** is through ones who knew about this project since long time.

Type of visit

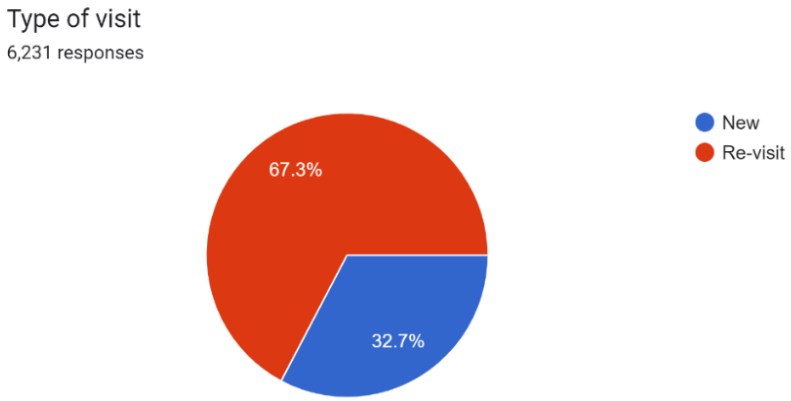

Figure:2

- From the graph it is evident that a maximum percentage of beneficiaries seeks periodic follow-ups after observing the remarkable changes in them which accounts for 67.3 %. And around 32.7% are the new ones approaching the centre.

Age wise distribution under Drishti project

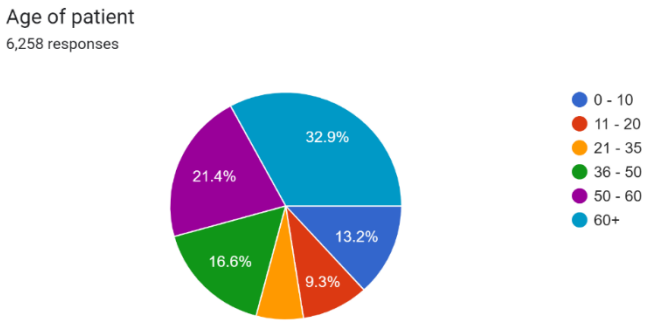

Figure:3

- About 22.5 % accounts for child population, 44.6 % adult population, and 32.9 % of geriatric population seeking the service under Drishti project

Gender wise distribution under Drishti project

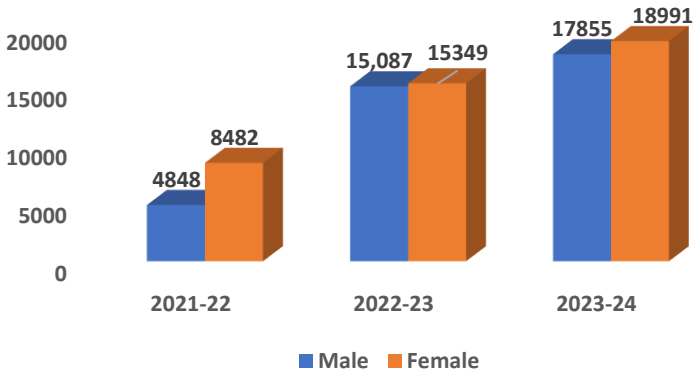

Figure:4

- The number of beneficiaries increased consistently over the three years, indicating a growing impact and reach of the Drishti project.
- Females consistently formed a larger portion of beneficiaries compared to males in each year, suggesting either a higher prevalence of eye-related issues among females or a higher utilization rate of eye care services by females.
- There was a significant increase in beneficiaries from 2021-22 to 2022-23, showcasing a substantial growth rate in the project's impact. The growth continued albeit at a slightly slower pace from 2022-23 to 2023-24, indicating a more stabilized outreach.
- While the overall growth is positive, identifying the reasons for the gender disparity in beneficiaries and addressing any barriers faced by males in accessing eye care services could be explored for a more equitable distribution of services.

Occupation

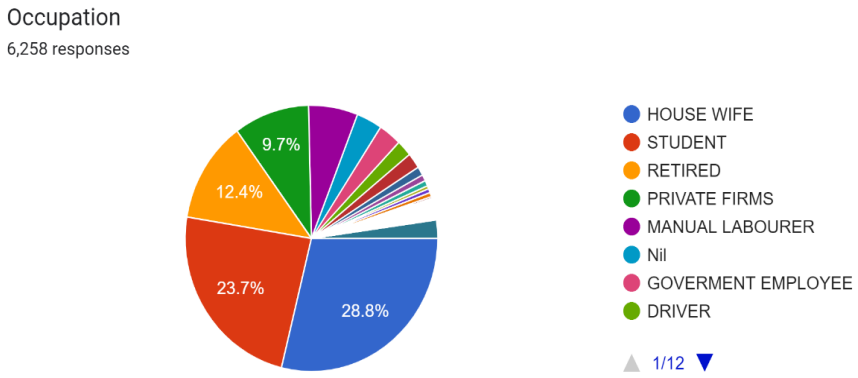

Figure:5

- About 28.8% of populations falls under the category of home makers, students with 23.7% and retired community with 12.4 % seeking services under the project.

Total patients covered under Drishti project

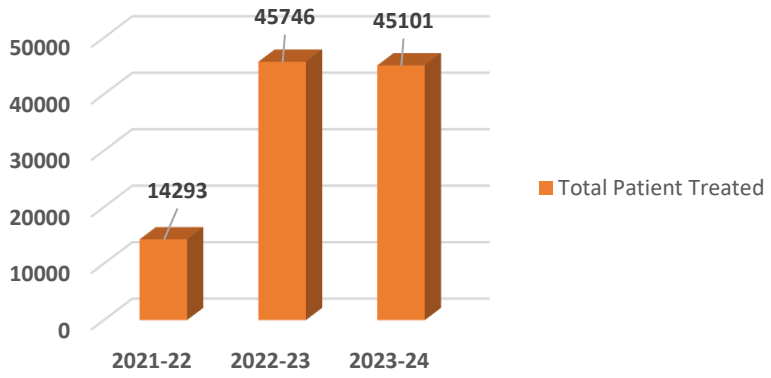

Figure:6

- The total number of patients treated under the Drishti project increased significantly from 2021-22 to 2022-23 and remained relatively stable in 2023-24, indicating sustained outreach and impact of the project.
- There was a substantial increase in patients treated from 2021-22 to 2022-23, showcasing a significant growth rate in the project's reach and services provided. The slight decrease in patients treated from 2022-23 to 2023-24 could be attributed to factors such as saturation of immediate demand or variations in outreach efforts.
- The increase in patients treated reflects the project's effectiveness in addressing vision-related issues and providing essential eye care services to a growing population.
- Maintaining the high level of patients treated in 2022-23 and sustaining it in subsequent years demonstrates the project's ability to consistently deliver eye care services to those in need.

Type of cases

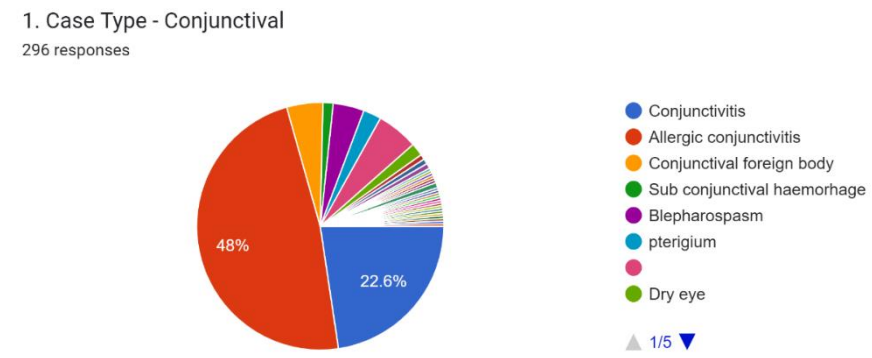

Figure:7

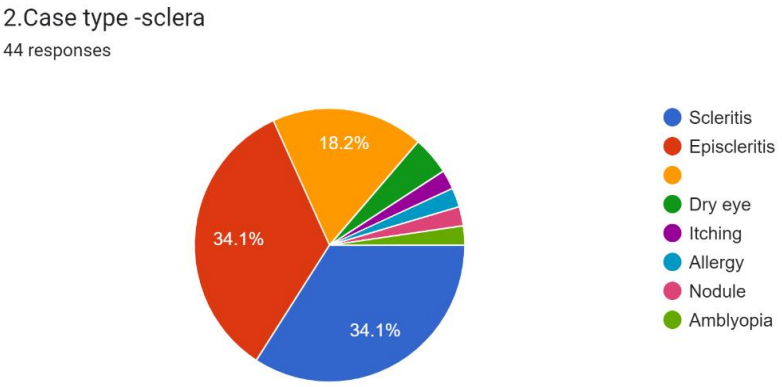

Figure:8

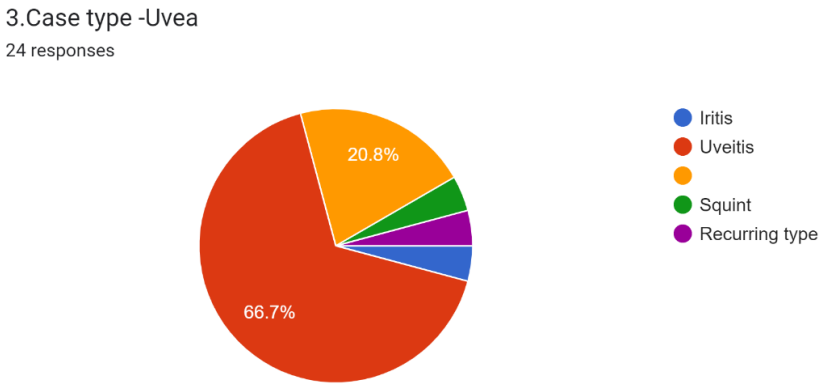

Figure:9

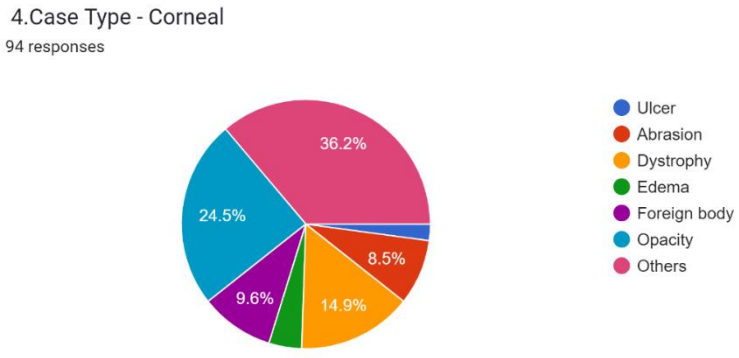

Figure:10

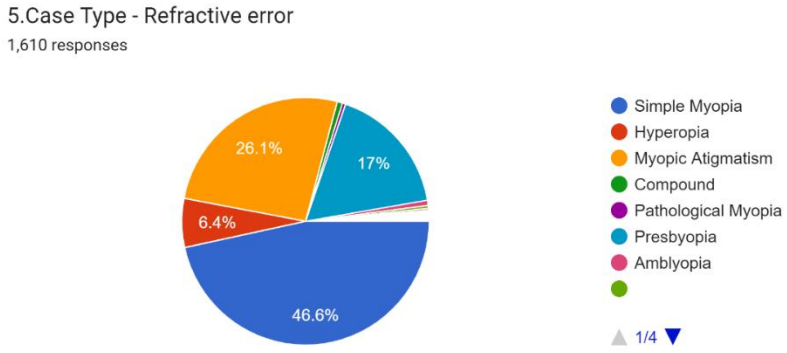

Figure:11

- Main factors responsible for the case of refractive error is due to simple myopia (46.6%), myopic astigmatism (26.1%), presbyopia (17 %).

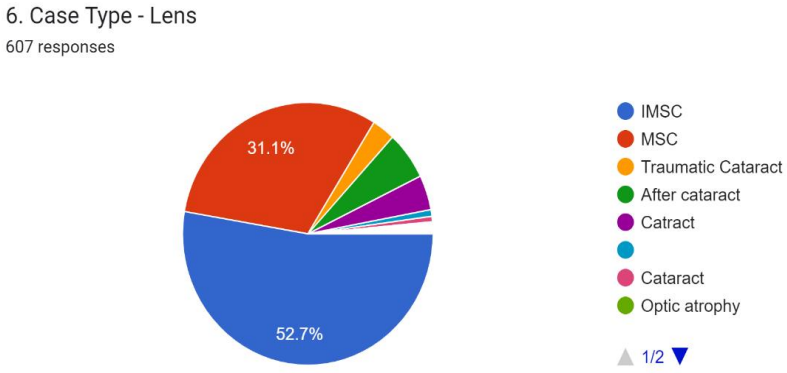

Figure:12

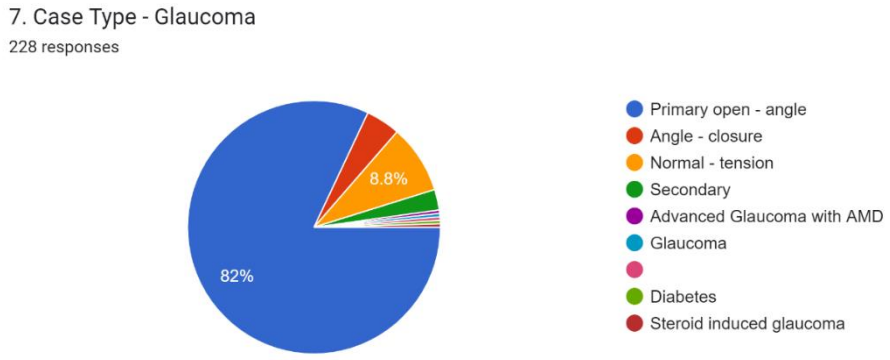

Figure:13

- Total of 825 cases are primary open angle glaucoma which is also referred as Silent killers because if these cases are left unidentified then it can lead to blindness in the near future.

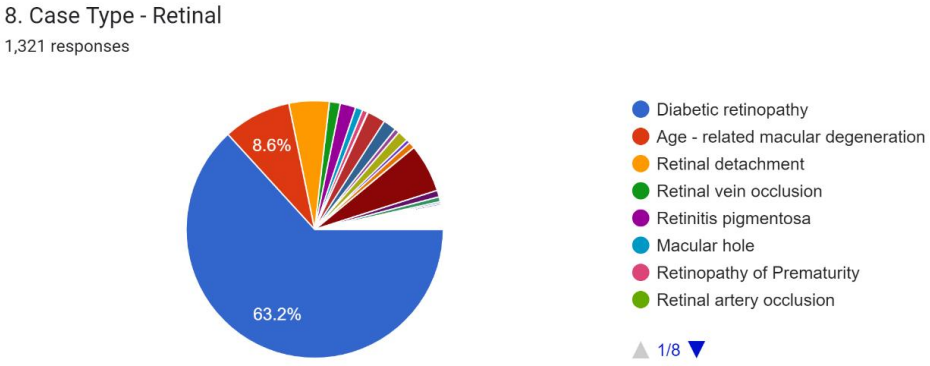

Figure:14

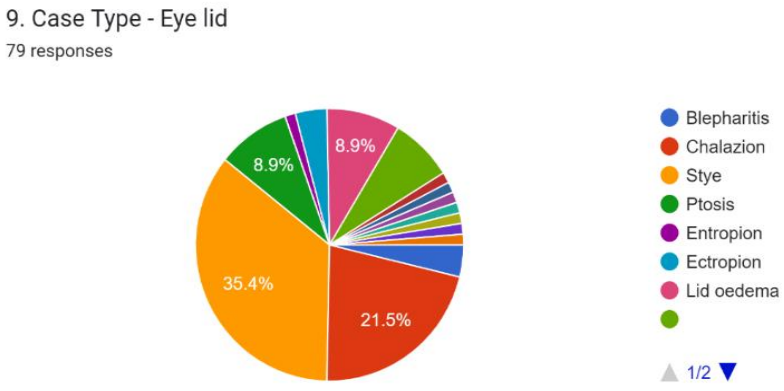

Figure:15

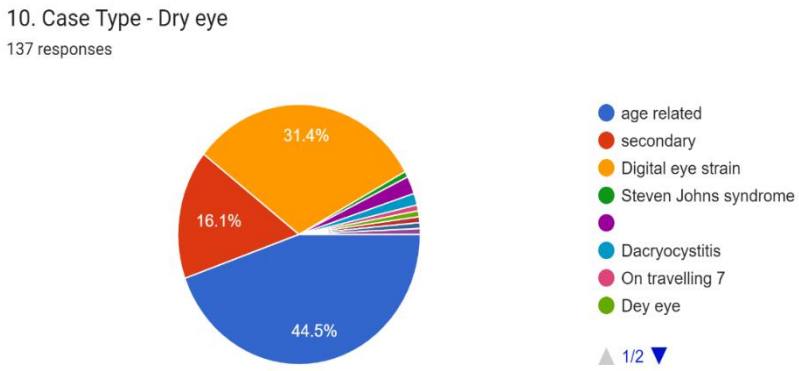

Figure:16

- Age related factors contributes about 44.5 % to the dry eye and 31.4% due to digital eye strain.

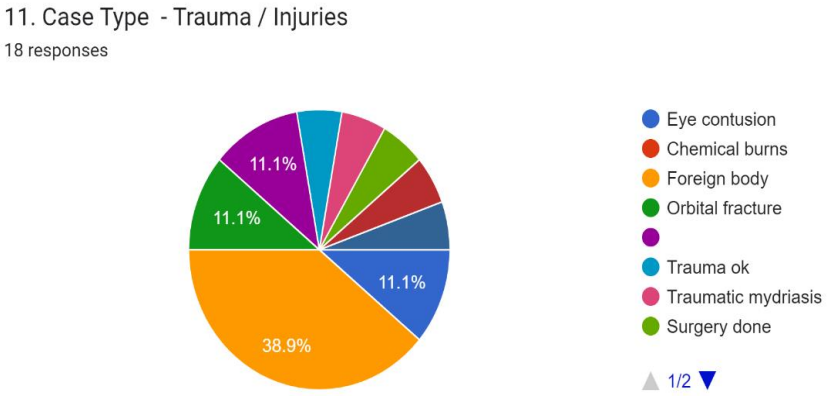

Figure:17

Major reason for the trauma / injuries to the eye is due to foreign body particles which is about 38.9 %, 11.1 % each for eye contusion and orbital fracture.

Part of eye where most affected

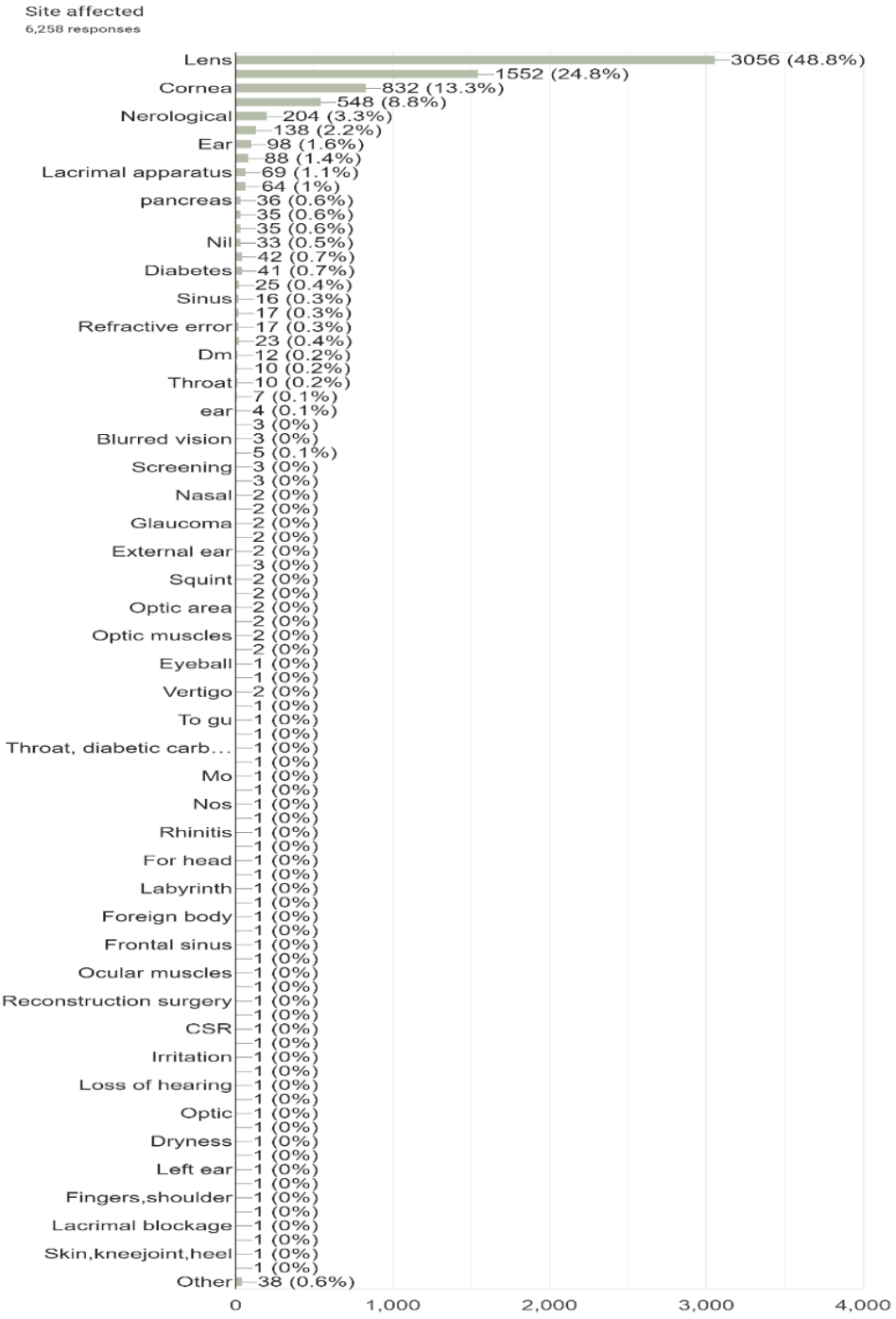

Figure:18

Other treatment opted among patients

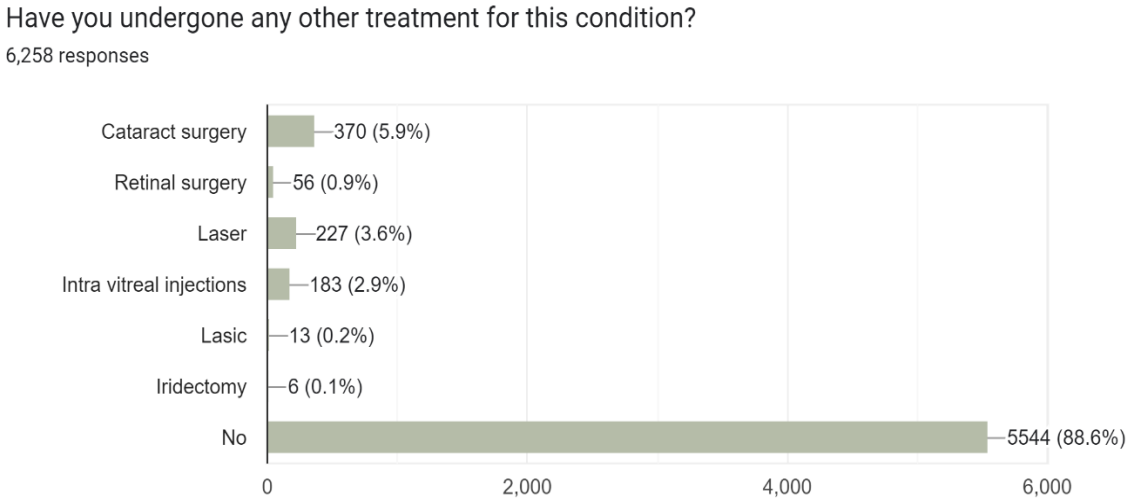

Figure:19

- A significant portion of participants, 5544 individuals (88.6%), did not undergo any treatment
- The data indicates a diverse range of treatment preferences among participants, with cataract surgery being the most common procedure.
- The high percentage of participants (88.6%) opting not to take any treatment raises concerns about barriers to accessing eye care services, awareness about available treatments, and individual preferences.
- It is crucial to conduct awareness campaigns and educational programs to inform participants about the importance of timely eye care, available treatment options, and potential benefits of treatments.
- Efforts should be made to improve accessibility to eye care services, especially in rural or underserved areas, to ensure that participants can easily access needed treatments.

Presenting complaints among patients

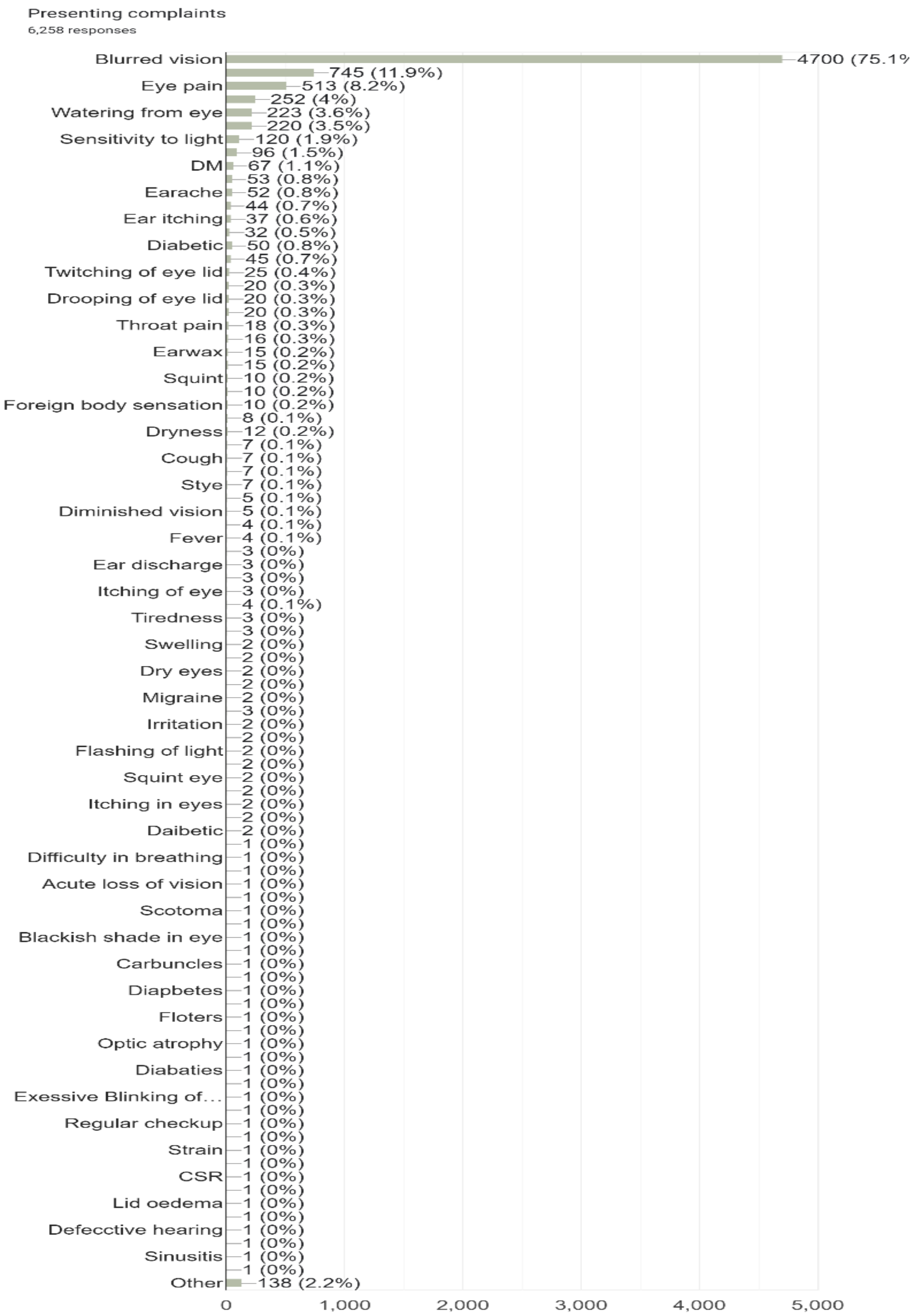

Figure:20

Detailed report based on the Drishti Project's impact assessment in Trivandrum over the last three years:

- The Drishti Project in Trivandrum has made significant strides in addressing vision-related issues among different age groups over the past three years. Among children aged 5 to 17 years, a total of 3,834 outpatient cases were recorded. The majority of these cases (2,740) were related to refractive errors, followed by 469 cases of eye allergies, and 625 cases encompassing various other conditions such as conjunctivitis, styes, blepharitis, strabismus, blepharospasm, chalazion, and foreign body-related issues. The project screened a total of 9,428 individuals in this age group, with 3,342 individuals selected for further intervention.
- For adults, there were 3,726 outpatient cases, including 67 cases of glaucoma suspect, 249 cases of posterior segment disorders, and 3,410 cases of other conditions like refractive errors and eyelid-related issues. The screening covered 4,894 individuals, with 1,426 individuals selected for treatment.
- In the old age group, comprising 4,589 outpatient cases, cataracts were the predominant issue, accounting for 3,670 cases, while 919 cases were classified under other conditions. A total of 1,346 individuals were screened, with 1,282 individuals selected for treatment due to vision impairment.
- Across all age groups, the project conducted a total of 78 camps, 34 awareness classes, and organized various awareness programs, including quizzes and exhibition stalls. However, specific details about the number of awareness programs conducted were not provided in the data. Social media activities were also undertaken to increase outreach and awareness, although the exact number of activities is unspecified.
- The data reflects varying percentages of vision impairment noted, treatment provided, recovery rates, and documentation levels across different age groups. Notably, vision impairment percentages ranged from 44% to 100%, treatment provided ranged from 38% to 76%, recovery rates ranged from 9% to 44%, and documentation levels ranged from 18% to 52% across the three age groups.
- Overall, the Drishti Project's efforts in Trivandrum have been substantial in addressing vision-related issues, conducting numerous camps and awareness programs, and leveraging social media for outreach. Continued focus on improving documentation and enhancing recovery rates could further enhance the project's impact in the coming years.

Detailed report based on the Drishti Project's impact assessment in Idukki over the last three years:

- The Drishti Project in Idukki has been impactful, focusing on eye care for different age groups. For children aged 5 to 17 years, a total of 3,106 operations were conducted, primarily addressing refractive errors (1,235 cases), eye allergies (1,550 cases), and other conditions like squint and stye (321 cases). The screening covered 6,125 individuals, with 950 selected for treatment, noting a 16% vision impairment rate. Remarkably, all treated cases showed improvement, with a recovery rate of 55%, although documentation remains at 6%.
- In the adult population segment, comprising 4,650 operations, the focus shifted to conditions like glaucoma (755 cases), posterior segment disorders (360 cases), and miscellaneous issues including refractive errors and external ocular foreign bodies (3,535 cases). Screening targeted 4,337 individuals, with 1,550 selected for treatment. Vision impairment was noted in 36% of cases, with a treatment provision rate of 70% and a recovery rate of 20%. However, documentation remains a challenge with no recorded data.
- For the elderly, with 5,039 operations conducted, cataracts were the predominant issue (3,954 cases), alongside other conditions like diabetic retinopathy and age-related macular degeneration (1,085 cases). Screening encompassed 1,450 individuals, with 925 selected for treatment. Notably, 64% of cases exhibited vision impairment, and while treatment was provided to half of them, the recovery rate was modest at 7%, again with no documented data.
- Over these three years, 48 camps and an equal number of awareness classes were conducted, reaching out effectively to the community. However, social media activities were absent during this period, suggesting a potential area for outreach improvement. The data underscores the project's significant impact in addressing diverse eye health challenges, although documentation and follow-up could be enhanced for a more comprehensive assessment and continuous improvement.

Detailed report based on the Drishti Project's impact assessment in Thrissur district over the last three years:

- The Drishti Project in Thrissur district has made significant strides in vision care and eye health over the past three years. Among children aged 5 to 17 years, a total of 12,716 individuals were screened. The most common condition observed was refractive error, affecting 9,677 children, followed by eye allergies in 2,053 cases, and other conditions like congenital optic atrophy, RP, squint, iris coloboma, colour blindness, and congenital cataract in 986 cases. This screening effort resulted in the identification and selection of 3,200 individuals for treatment, representing 25% of the screened population. Notably, 100% of those selected received treatment, with a commendable recovery rate of 72%. However, documentation of these interventions stands at 10%.
- For adult populations, comprising 38,642 individuals, the focus shifted to more complex eye conditions. Glaucoma was detected in 326 cases, while posterior segment disorders affected 21,382 individuals. Additionally, refractive errors and other eye disorders accounted for 16,934 cases. Of these, 25,701 individuals were selected for treatment, indicating a high prevalence of vision impairment at 88%. Similar to the paediatric group, all selected individuals received treatment, with an impressive recovery rate of 80%. Documentation efforts improved slightly to 20%.
- Among the elderly, with a population of 16,332, cataracts were the primary concern, affecting 9,158 individuals, while other eye conditions were observed in 7,174 cases. From this group, 14,210 individuals were selected for treatment, reflecting a high prevalence of vision impairment at 92%. Despite 100% treatment provision, the recovery rate for this group was comparatively lower at 40%, possibly due to the complexity of age-related eye conditions. Documentation efforts remained consistent at 10%.
- The project's outreach activities were extensive, with 75 camps conducted, 72 awareness classes held, and 64 awareness programs organized, including quizzes, flash mobs, rallies, exhibition stalls, and paper presentations. Additionally, social media played a role, with 27 activities aimed at raising awareness about eye health.
- Overall, the Drishti Project's impact in Thrissur district showcases a dedicated effort to address a wide range of eye conditions across different age groups, with notable success in treatment provision and recovery rates, albeit with room for improvement in documentation efforts.

Detailed report based on the Drishti Project's impact assessment in Kannur district over the last three years:

- The Drishti Project in Kannur district has shown significant progress in addressing eye health issues across different age groups. Among children aged 5 to 17 years, a total of 6,308 individuals were screened, with the most common condition being refractive errors in 3,350 cases, followed by eye allergies in 637 cases, and other conditions including squint, iris coloboma, congenital optic atrophy, RP, color blindness, and congenital cataracts in 216 cases. From this screening effort, 1,261 individuals were selected for treatment, representing 20% of the screened population. All selected individuals received treatment, with a notable recovery rate of 60%. However, documentation efforts stood at 7%.
- For adult populations, comprising 810 individuals, the focus was on detecting and treating various eye conditions. Glaucoma suspect cases numbered 21, while posterior segment disorders were observed in 648 individuals, and other conditions such as refractive errors and external ocular foreign bodies (EOFB) were noted in 141 cases. Among the screened population of 1,577, 630 individuals were selected for treatment, accounting for 40% of those screened. Despite a vision impairment rate of 20%, all selected individuals received treatment, although the recovery rate was 20% with no documentation recorded.
- In the elderly population, with a total of 203 individuals, cataracts were the primary concern affecting 162 individuals, while other conditions like optic atrophy, absolute eye issues, RP, and retinal diseases were observed in 41 cases. Out of 79 screened individuals, 45 were selected for treatment, reflecting a vision impairment rate of 57%.
- Although all selected individuals received treatment, the recovery rate was lower at 8%, with no documentation recorded.
- Overall, the Drishti Project's efforts in Kannur district highlight a proactive approach to addressing a range of eye conditions, especially among children and the elderly. While treatment provision is commendable, there is a need to improve documentation practices to ensure comprehensive tracking of interventions and outcomes.

Outreach activities

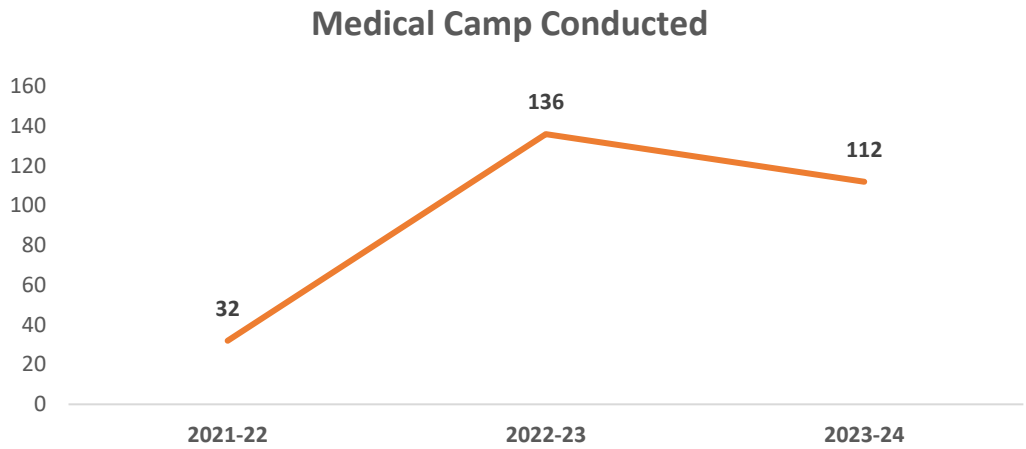

Figure:21

- In the year 2021-2022, the Drishti project organized a total of 32 eye care camps across targeted areas in Idukki and Thrissur districts. These camps aimed to provide essential eye care services and treatments to individuals of all age groups, including children, adults, and the elderly.
- The year 2022-2023 witnessed a significant increase in the outreach efforts of the Drishti project, with a total of 136 eye care camps conducted in targeted areas. This expansion allowed for a broader reach to communities in need of eye care services
- In the most recent year, 2023-2024, the Drishti project sustained its momentum with 112 eye care camps organized across the designated districts. These camps maintained the project's commitment to providing accessible and quality eye care to individuals across different age groups.
- Overall, the Drishti project's consistent efforts in organizing eye care camps have significantly contributed to improving vision health outcomes and enhancing access to eye care services in Idukki and Thrissur districts over the past three years.

OTHER ACTIVITIES

- **Madhu Drishti** – A diabetic retinopathy screening program conducted for 100 patients on the account of World Diabetes Day 2023.
- **Ayush Mithayi**: - 6-month Diabetes orientation program solely aimed at preventive care for Diabetes and associated complications in Ayurveda. Four sessions were conducted in four consecutive years
- Several camps were associated with world sight day 2021, 2022, 2023 in collectorate, hospital and outside
- A workshop was conducted as Part of that, Being the most equipped hospital with good patient strength Thrissur district NAM and ISM Department has organized a standardization workshop for the same by inviting all Nethra specialists working under NAM and ISM.
- Drishti project in association with world sight day 2022 conducted different competitions, awareness classes and screening camps for the public. Screening camps and awareness classes were conducted at aakashavani and press club.
- Drishti project in association with world sight day 2021-2022 conducted painting competitions for school going children.
- WEBINAR was conducted on the topic ocular health in children and Prevention of blindness through Ayurveda in association with Ayush Gram Irinjalakkuda block.
- A hand book on preventive Ophthalmology was published by honorable agriculture minister Sri.V.S.Sunil Kumar.
- WEBINAR was conducted on the topic –To avoid spectacles with Ayurveda.
- Conducted Glaucoma camp at R.V.D.A.H, THRISSUR on World Glaucoma Day-beneficiaries-65.
- Special cases study in IP Patients.
- Information Booklets for public
- A souvenir was published by respected minister K. Radhakrishnan on the occasion of world sight day 2022.

Research Activities

A study on Smartphone usage and its effect on Neuro Ophthalmology conducted in op patents revealed that continuous usage of electronic media for at least 2 hours per day is causing extra ocular muscle fatigue in elderly and squinting in children. RNFL changes are seen widely in long time mobile users which may long run can result in reduced peripheral vision. Increased refractive power in children and early presbyopia are the other findings associated with this study which needs more statistical evaluation including a large group of patients.

CO-VISION – A study on post covid 19 patients from OP revealed that post covid issues are resulting mostly in near vision problems and retinal issues.

CASE STUDIES

- Optic atrophy post CRAO
- Double vision
- Case study on Diabetic retinopathy vitreous haemorrhage
- Case report on proliferative diabetic retinopathy

CASE SERIES

- A comprehensive ayurvedic management of Ocular Ethambutol toxicity insights from a clinical case series.

- Role of Ayurveda treatment in the management of Refractive errors
- Madhu-Drishti – a clinical insight

Research Papers

Publication

- Ayurvedic management of retinopathy combined with central serous macular edema A case report
  https//www.ayucare.org/article.asp?issn=2667-0593;year=2022;volume=5;issue=1;spage=10;epage=16;aulast=Pathiyil;type=0

Challenges

- **Limited Resources:** The project may face challenges related to limited financial resources, equipment availability, and staffing, especially in remote areas.
- **Sustainability:** Ensuring the long-term sustainability of the Drishti Project's initiatives requires continuous funding, community support, and strategic planning.
- **Data Integration:** Integrating data from different sources and ensuring data accuracy and completeness can be a challenge, requiring dedicated efforts in data management and analysis.
- **Access Barriers:** Overcoming barriers to access, such as transportation issues, awareness gaps, and cultural beliefs, remains a persistent challenge in reaching all segments of the target population.
- Addressing these challenges while implementing the recommended strategies can further strengthen the impact and effectiveness of the Drishti Project in improving vision health outcomes across Kerala

Recommendations

- **Capacity Building**: Conduct regular training programs for medical staff to enhance their skills in diagnosing and treating a wide range of eye conditions effectively.
- **Stakeholder Engagement**: Foster stronger engagement with beneficiaries, community leaders, and local healthcare providers to ensure ongoing support and collaboration for sustainable eye care initiatives.
- **Resource Allocation:** Optimize resource allocation for equipment, medications, and outreach activities based on demand and geographic distribution of beneficiaries.
- **Data Management**: Implement robust data management systems to streamline patient records, treatment plans, and follow-up protocols for better continuity of care.
- **Quality Assurance**: Establish quality assurance mechanisms to monitor and improve the quality of eye care services delivered under the Drishti Project, ensuring adherence to best practices and standards.
- **Community Outreach**: Strengthen community outreach efforts through awareness campaigns, mobile clinics, and partnerships with local organizations to reach more underserved populations with eye care services.

Conclusion

The impact assessment of the Drishti Project has revealed significant progress in improving vision health outcomes and increasing access to eye care services across various districts in Kerala. Through a comprehensive analysis of patient demographics, treatment outcomes, stakeholder perspectives, and challenges faced, several key recommendations have been identified to enhance the project's impact and sustainability. Key areas of focus include capacity building for medical staff, stakeholder engagement for ongoing support, optimal resource allocation based on demand, robust data management systems for continuity of care, quality assurance mechanisms for service excellence, and strengthened community outreach efforts to reach underserved populations. The Drishti Project has made significant strides in preventing preventable blindness, improving eye health outcomes, and enhancing community awareness and engagement across Trivandrum, Idukki, Thrissur, and Kannur districts.

Despite facing challenges such as limited resources, sustainability concerns, data integration issues, and access barriers, the Drishti Project remains committed to its mission of improving vision health for all. By addressing these challenges proactively and implementing the recommended strategies, the project can continue to make a meaningful difference in the lives of beneficiaries and contribute positively to eye care initiatives in Kerala.