Sharpening India’s Vision

The late Padmashree Dr G Venkataswamy (Dr V) was a known warrior who waged a war against needless blindness in India. He not only conceived a vision to eradicate needless blindness from India, but also a unique viable eye care delivery system, that today has won admiration from all over the world. Taking the concept of social marketing to new heights, Dr V instituted the Aravind Eye Hospital (Aravind) in 1976 at Madurai, after his retirement from the Government Medical College, as the HoD of Ophthalmology. Over the years, Aravind became synonymous with Dr V as well as cataract surgery, and made eye care accessible to all by rising above the barriers of poverty and distance. This self-sustaining eye care delivery system grew as a chain of hospitals, new hospitals came up at Tirunelveli, Coimbatore, Theni and Pondicherry and diversified in the fields of manufacturing, training and education, eye banking and social service, all converging under the banner of a holistic Aravind Eye Care System.

In terms of the volume of work done—number of patients examined and number of surgeries performed—Aravind is the world’s largest eye care provider. It boasts over 32 million outpatients served and four million surgeries performed, right from the inception till date. The famed institute is the ultimate choice for many international patients as well as researchers and faculty members. It houses many well equipped speciality clinics run by very efficient professionals, all sharing the same vision of Dr. V. There is tremendous amount of work done, both in terms of complicated surgeries and ground-breaking research. It is known for its unique community outreach programme and the self-sustainable strategy, balancing cost and efficiency as well as drawing surplus profits to feed its ambitious growth plans. Dr S R Krishnadas, Director, Human Resources, Aravind Eye Hospital, Madurai shares the group’s growth story with M Neelam Kachhap

Please tell us briefly about Aravind Eye Care System?

Aravind Eye Care System (AECS) is the largest and most productive eye care facility in the world. Founded in 1976 by Dr Govindappa Venkataswamy, today, AECS encompasses eye hospitals, a manufacturing centre for ophthalmic products, an
What is the rationale behind launching this company?

In the early 70’s, the prevalence of blindness in India was around 1.5 per cent and 80 per cent of India’s population was rural, while almost all of the country’s medical services were in the urban areas. There were several barriers for the rural population to access the services. Low awareness and limited affordability combined with a lack of human resources made it difficult to provide sustainable, quality services. In a developing country like India, the government alone cannot meet the health needs of all owing to a number of challenges like the growing population, inadequate infrastructure, low per capita income, aging population, diseases in epidemic proportions and illiteracy. Realising this, Dr Venkataswamy wished to establish an alternate healthcare model that could supplement the efforts of the government and also be self supporting. Following his retirement in 1976, he established the GOVEL Trust under which Aravind Eye Hospitals were founded.

What was the source of funding for the company?

Mortgaging the family properties provided the initial funding to set up the hospital. As the organisation developed, it became financially self-sustainable. Nearly 2/3rd of the patients are treated either free or at deeply subsidised rates. Revenue generated from the paying patients cross-subsidises for the free/subsidised treatment.

What are your primary goals?

The primary goal of AECS is the elimination of needless blindness by providing compassionate and high quality eye care for all. Lions Aravind Institute of Community Ophthalmology (LAICO), Aravind’s consulting wing aims to promote improved management practices in eye care worldwide through training and capacity building. Research activities at Aravind are committed to finding new ways to reduce the burden of blindness. The manufacturing arm of Aravind – Aurolab too contributes to the organisation’s mission by making high quality ophthalmic products affordable and accessible worldwide.
Please tell us about the company's growth over the years.

The evolution of Aravind Eye Care System can be roughly classified into three phases with the first one focussing on the setting up and development of hospitals and community outreach. Cataract services were of primary concern during this time. Internal refinement and scaling up constituted the second phase with the establishment of LAICO and Aurolab. Education and training programmes developed into a full-fledged scale by the time. During the third decade it scaled up, going outside the boundaries in a more proactive manner through the establishment of Aravind Managed Eye Care Services and Dr G Venkataswamy Eye Research Institute as well as the growth and development of speciality care services.

What is the present scale of the company?

Aravind Eye Care System today encompasses a network of eight eye hospitals, 40 vision centres in rural areas, seven community eye clinics, a PG Institute of Ophthalmology, a manufacturing centre for ophthalmic products (Aurolab), an international eye research institute (Dr G Venkataswamy Eye Research Institute), eye banks and a resource as well as a training centre (LAICO) that is revolutionising hundreds of eye care programmes across the developing world. In the year ending March 2011, Aravind’s eye care facilities handled over 2.6 million outpatient visits and performed over three lakh surgeries. During the same year its outreach department conducted over 2,600 camps through which over seven lakh patients were screened and over 76,000 patients underwent surgery. Over 6,500 candidates from 94 countries have undergone some form of training at Aravind. Aurolab’s cost-effective ophthalmic products are exported to 120 countries and accounts for a total of 7.8 per cent of global share of intraocular lenses. The research activities at Aravind reflect its commitment to finding new ways of reducing the burden of blindness. Aravind Eye Banks procured a total of more than 4,300 eyes of which more than 1,500 were utilised for corneal transplantations. LAICO works with over 280 eye hospitals in India and other developing countries through a structured process of consultancy and capacity building. It is conservatively estimated that this resulted in an additional 500,000 surgeries being done annually in these hospitals.
What are the challenges faced by you? How do you overcome the challenges?

The main challenges that Aravind faced were—serving a large population with poor or zero paying capacity and delivering it in a manner that is accessible, acceptable, affordable and yet efficient and sustainable. To a major extent, our outreach services addressed the problem of reaching out to a vast majority of poor people and taking eye care service to the doorstep of the community free of cost. Aravind’s unique model of combining high volume with the highest quality standards enables it to provide affordable treatment to all—rich and poor. Aravind follows the principle that large volume, high quality services result in lower costs and sustainability by applying market fee structures for wealthier patients, and subsidised charges for the poor. In the early 90s when the IOL (Intraocular lens) were introduced, the lenses were very expensive for the common man to afford. To address this challenge, Aravind started Aurolab adopting technology from the west and could manufacture IOLs which cost only a fraction of the market price at that point of time.

Company At a Glance

<table>
<thead>
<tr>
<th>Name of the company</th>
<th>Aravind Eye Care System</th>
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<tbody>
<tr>
<td>Segment</td>
<td>Healthcare Delivery</td>
</tr>
<tr>
<td>Known for</td>
<td>Innovative operational process</td>
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<tr>
<td>Legal status</td>
<td>Private (Trust)</td>
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<tr>
<td>Year of launch</td>
<td>1976</td>
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<tr>
<td>Target population to a Kerala</td>
<td>Direct patient care extends to a total population of about 100 million - essentially from the States of Tamilnadu and Kerala and adjoining districts of Andhra Pradesh and Karnataka.</td>
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<tr>
<td>Funding raise for research</td>
<td>The organisation is self – sustainable and we do not raise resources in any way except for the funding that we receive for specific projects and research studies.</td>
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<tr>
<td>No. of employees</td>
<td>3716 (including the employees of LAICO, Research institute and</td>
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</table>
Aurolab)

No. of customers served: Over 32 million outpatients served and 4 million surgeries performed right from the inception till date

No. of facilities/network: 8 hospitals, 40 vision centres and 7 community eye clinics

Please tell us about your future plans.

Aravind has set a target of performing one million surgeries annually by the year 2015 and is gearing up to achieve this target by establishing new hospitals. With the increase in awareness about cataract, Aravind has begun to shift its focus to more comprehensive outreach services, such as Diabetic Retinopathy camps, eye camps for children and refraction camps. Aravind plans to extend its outreach services to include all speciality areas of eye care. An initiative has begun to set up permanent primary eye care facilities, so the community does not have to wait for a camp. So far 40 such vision centres and seven community centres (outpatient clinics) have been set up in rural communities. This will be scaled up further to cover the entire service area as an alternate strategy to eye camps to reach the community. Dr G Venkataswamy Eye Research Institute will give significant thrust in research of basic sciences like genetics, biochemistry and immunology; drug development; clinical trials for assessing efficiency of intervention options; population based studies and health systems research for designing an effective delivery system. Looking ahead, product development and manufacturing to address other conditions like Glaucoma, Diabetic Retinopathy, etc., will take place. A low cost Green Laser to treat Diabetic Retinopathy has just been launched at half the current prices. This will be refined further to bring down the costs. Similarly, efforts are on to produce an affordable retinal imaging system. On the education front, Aravind is in the process of obtaining deemed university status. Aravind is beginning to expand its capacity building process to include speciality areas such as Paediatric Ophthalmology and Diabetic Retinopathy. LAICO has also started helping other institutes to build their capacity in research. It has also begun an initiative to help set up Centres for Community Ophthalmology across the developing world which will cater to the training and capacity building needs in their geographic areas. LAICO is also looking at ways to partner with the public sector in order to increase the resource utilisation of the government eye hospitals.
Where do you see the company in the next five years?

Aravind plans to sustain the growth and double the service delivery capacity in the next 10 years by expanding to new locations and expanding the telemedicine technology-based primary eye care model for universal coverage and follow up of patients with chronic eye diseases. Better systems for the diagnosis and management of chronic diseases like Glaucoma, Diabetic Retinopathy and age related Muscular Degeneration would be created. There will be different centres of excellence in speciality eye care services through pioneering clinical and basic science research. Aravind is to become the premier institute for ophthalmic residency education and fellowship training. In the face of changing technology, the organisation continues to develop cost effective solutions to keep the eye care affordable for all.