The Queen Elizabeth Diamond Jubilee Trust’s avoidable blindness programme

Background
The Queen Elizabeth Diamond Jubilee Trust (The Trust) is a charitable foundation established in 2012 to mark and celebrate Her Majesty, The Queen’s 60-year contribution to the Commonwealth. The Trust was set up on the recommendation of the Commonwealth Heads of Government Meeting in Perth, Australia, in 2012. The mission of the Trust was to enrich the lives of people from all backgrounds within the Commonwealth by working with partners towards eliminating avoidable blindness and empowering a new generation of young leaders.

The Trust designed a 5-year programme to prevent avoidable blindness across the Commonwealth. Within this Avoidable Blindness Programme, four initiatives were set up with a timescale of 2014 to 2019. The Trust’s programmes have been completed as planned and the Trust will close at the beginning of 2020.

Avoidable Blindness Programme
The Trust’s four initiatives were as follows:
1. Blinding Trachoma Initiative
2. Diabetic Retinopathy Initiative
3. Retinopathy of Prematurity Initiative
4. Fellowships, Research and Technology.

A key requirement of the Trust’s work was that the initiatives should be designed to be government-owned, sustainable and scalable beyond the period of Trust support.

The Trust’s Trachoma Initiative supported implementing the SAFE (Surgery to correct in-turned eye-lashes; Antibiotic distribution to treat chlamydial infection; Facial cleanliness; and Environmental improvement) in 12 countries across two regions of the Commonwealth (Africa; Australia with Pacific Islands).

The Diabetic Retinopathy Initiative was implemented in 13 Commonwealth countries from the Caribbean to South Asia and the Pacific. Partners have piloted different methods of screening, treatment and awareness raising to find appropriate solutions in different countries and contexts. In South Asia, The Diabetic Retinopathy Initiative was implemented in Bangladesh, India and Pakistan.

The Retinopathy of Prematurity Initiative focused on India. The goal was to establish models of care to improve the quality of neonatal care to reduce the risk of retinopathy of prematurity, with screening and management embedded in the public health system.

A major input of the Trust has been the strengthening of eye health systems and the quality of eye care across the Commonwealth. Towards achieving this goal, the Trust established the Commonwealth Eye Health Consortium, which supported fellowships, research and technology throughout the Commonwealth. The International Centre for Eye Health at the London School of Hygiene and Tropical Medicine coordinated the Consortium.

Work in India
The Trust supported the Diabetic Retinopathy and Retinopathy of Prematurity initiatives in India. A grant of GBP 7.4 million was made for both initiatives. The Public Health Foundation of India was identified as the grant manager and lead implementation agency, and the London School of Hygiene & Tropical Medicine was the technical lead. As elaborated in the papers in this special supplement, the Diabetic Retinopathy initiative was implemented in 10 districts in 10 selected states, while the Retinopathy of Prematurity initiative was implemented in 4 states. The objective of these initiatives was to pilot integrated models of comprehensive, sustainable and replicable care embedded in the public health system. Premier academic leaders (All India Institute of Medical Sciences; Goa Medical College; Government Medical College, Chandigarh; Post Graduate Institute of Medical Education and Research; Mahatma Gandhi Institute of Medical Sciences Wardha), prominent non-governmental institutions (Aravind Eye Care System Tirunelveli; Global Hospital Institute of Ophthalmology Abu Road; HV Desai Eye Institute Pune; LV Prasad Eye Institute Hyderabad; Little Flower Eye Hospital Angamaly; Mohan’s Diabetes Specialities Centre Chennai; Pushpagiri Eye Institute Hyderabad; Tejas Eye Hospital Mandvi; Vittal International Institute of Ophthalmology Bengaluru; and Diabetes Research Society Tirunelveli) provided oversight through the establishment of the respective state governments joined hands in this unique pilot project. The Ministry of Health and Family Welfare, Government of India provided oversight through the establishment of National Task Forces. Both initiatives exceeded the original targets and are being scaled up within the original states and in additional states with the leadership and support of State Ministries of Health. The achievements in India are a major contribution to the lasting legacy created by the Trust across the Commonwealth.
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About the authors

Clare Gilbert
Clare Gilbert is an ophthalmologist who worked in the UK for 10 years. Since 1990 she has worked at the International Centre for Eye Health where her work includes addressing research questions of public health relevance to eye care in low and middle income countries, teaching, and giving technical advice to a range of organizations. She was Scientific Advisor to the Queen Elizabeth Diamond Jubilee Trust (2013-2019), and contributed to the design, development, implementation and monitoring of the Trust’s avoidable blindness programme in India.

GVS Murthy
G.V.S. Murthy is Professor of Public Health Eye Care and Disability at the London School of Hygiene and Tropical Medicine and the Director of the Indian Institute of Public Health and the South Asia Centre for Disability Inclusive Development, Hyderabad. He has worked as faculty at AIIMS, New Delhi and MGIMS, Sevagram prior to this. He has worked with WHO, Geneva and is Technical Advisor to CBM, India and Research Advisor to Mission for Vision, India. His work revolves around improving global health and fostering international partnerships to improve health of populations. He has published 225 peer reviewed papers and has contributed chapters to 15 books. He has supervised many PhD, MD and MSc students till date. He studied at Guntur Medical College, AIIMS and ICEH, London. He is an international expert on public health disability including eye care and has undertaken research projects in India, Bhutan, Bangladesh, Pakistan, Nigeria, Nepal, Indonesia and Sri Lanka. He was India PI of the Queen’s Trust supported initiative.