

From: [REDACTED]

To: jeevacation@gmail.com

Subject: Re: OptiOpia - introduction, documents

Date: Sun, 03 Apr 2011 05:47:44 +0000

Thank you for sending this information along. I have seen at least five similar proposals in almost as many years. Note that right one of these gentleman are MDs and neither have experience in implementing programs in the developing world. Their business model is based on a billion people being willing to pay \$5 each and I am not sure that would be realistic.

We supported a similar program a few years ago, since the strong argument can be made that if people can see better (either near/far sighted correction) they can be more productive. There were a few lessons:

1. Standalone technologies and items (cookstoves, toilets, etc) - with cel phones being the big exception - do not typically catch on in the developing world. Even if they improve quality of life. In my evaluations, it seems that the marketing just didn't reach the poorest, the financing packages were not available to make the items affordable (even if there was demand), there were no places to get repairs, and small things (like glasses, bikes, etc) were frequently lost or stolen and unreplaceable (parents didn't see value in product for their children if it could be easily lost).

2. Here are some of the now defunct similar efforts - some have even been presented at TED:

-Scojo Foundation <http://www.fastcompany.com/social/2008/profiles/scojo-foundation.html>;

-AdSpecs (Centre for Vision in the Developing World) <http://www.vdw.ox.ac.uk/2minuteintro.htm>

-Focus on Vision (really cool and for \$4, check out how they do it...no machines needed) http://www.focus-on-vision.org/index_en.php

-Adaptive eyewear (uses water!) <http://www.visionforanation.org/> and <http://adaptive-eyewear.org/>

There are many more - just google "low cost eyeglasses" AND "developing world"

Where there was a short term bump, was when a program like this was imbedded into a larger organization that could not only utilize this as an entry point, but also had the reach and ability to market and finance the glasses. BRAC (www.brac.net) is the world's largest NGO and they tried to bring cheap glasses (under \$3) to the poor (<http://www.changemakers.com/node/1249/images>) a few years ago. It worked for a few months. I think what happened was that the middle classes and "richer" poor bought glasses but the truly poor weren't biting.

While ideas like this could in theory put developed world glasses makers out of business, rich people don't mind paying more for stylish lenses and somehow are comforted by all the big machines used to assess refractive error.

In the developing world, these guys are unlikely to succeed unless they link up with a large organization already implementing health/vision programs or can find a way to work directly with governments to include their products into national health care planning. For ideas on groups that are active in the developing world, a good place to start might be above. If they want to take a national government approach, I would suggest countries where public health reaches the poor effectively, like Peru - Mexico, Thailand, Turkey or even Botswana. The latter seems like the most viable option for scale since there is also the possibility of cross-subsidy from those who can afford to pay (payor mix).

I think the future of this type of thing in the developing world would probably be closer to some of the ideas above. A box full of fully self-programmable (though low tech) spectacles that can be readjusted as needed and requiring only you and your own brain to make them work.

I hope this is helpful.

Not a game changer.

-----Original Message-----

From: jeffrey.einstein <[REDACTED]>

To: [REDACTED]

Sent: Sat, Apr 2, 2011 12:44 am

Subject: Fwd: OptiOpia - introduction, documents

Sorry for all the typos .Sent from my iPhone

EFTA00654430

Begin forwarded message:

From: David Grosf <[REDACTED]>
Date: April 2, 2011 2:24:35 AM GMT+02:00
To: jeevacation@gmail.com
Subject: OptiOpia - introduction, documents

Dear Jeffrey,

Thank you for offering to review OptiOpia.

A two-page flyer introduces the company.

A slide deck in the form of a PDF file serves as an introduction to OptiOpia's technology and products, and especially why our autorefractor product features are well-suited for both screening for the need for glasses (or other corrective lenses) and for measuring the refractive error in order to prepare a prescription.

A business plan (that is in some respects out of date) follows, as a PDF file. Unfortunately, I've been re-doing the financial plan and did not complete the revision. I apologize. I will work on it tomorrow (Saturday). Tomorrow's work might also surface defects of the updating I have been doing, whose corrections I will bring to your attention.

The fundamental proposition is that OptiOpia as a lean, virtual company with great contractors can get to break-even and modest profit without a lot of risk by building and selling its auto-refractor through traditional channels to traditional and growing markets in developing and developed regions. The major upside is achieved by doing something no one's done before -- sell devices and support new dispensing systems to help get eyecare and glasses to urban and town populations that lack them severely.

Because eyeglasses are sold *at a profit* even by the "noblest" of charities, and because there are superb, *highly efficient* NGOs delivering eyecare in South Asia, OptiOpia has available to it distribution and development partners that are truly business-operations-oriented and scale-minded (their glasses ops are positive cash flow). With smart, efficient and large partners such as those (e.g., Aravind), OptiOpia can learn to capture value from a very large expansion of the market by developing and supporting kiosks for eyecare and mobile dispensing systems, at scale.

Insofar as we have not communicated about business matters this formally before, I am not sure whether these presentation materials are going to be as informative and useful to you as they could be. Please let me know, frankly, what can be improved and redesigned so that your time is spent thinking rather than managing an awkward array of information, unfamiliar terminology, too much or too little detail, etc.

Sincerely,
David

David Grosf
[REDACTED]

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