

# Vision Atlas

The Value of Vision

The case for investing in eye health in  Malaysia



# The Value of Vision: The case for investing in eye health in Malaysia

Investing **\$69.3 million USD** in eye health in  Malaysia over 2026-2030 will deliver **\$3.30 billion USD** in economic benefits, as well as:

 <b>54,807 learning years</b>	 <b>48 traffic deaths averted</b>	 <b>1,247 traffic injuries averted</b>
 <b>8,854 cases of depression averted</b>	 <b>42 deaths averted</b>	 <b>335 years of life gained</b>

## The benefits of investment

Good vision is foundational to economic and societal participation. Investment in eye care in Malaysia will lead to higher employment, improved productivity, better educational outcomes, reduced traffic accidents, and improved mental health and longevity.

### Total economic benefit by 2030

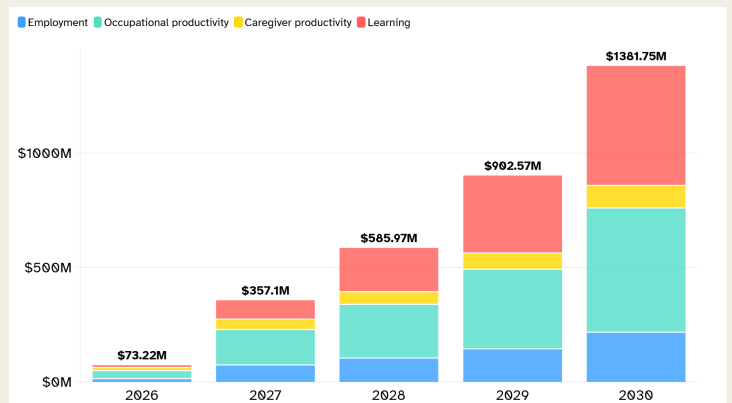
Employment Benefits <b>\$556 million</b>	Occupational Productivity <b>\$1.32 billion</b>	Caregiver Productivity <b>\$284 million</b>	Learning Benefits <b>\$1.15 billion</b>
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### Total other benefits by 2030

Traffic deaths averted <b>48</b>	Longevity (mortality averted) <b>42</b>	Learning (equivalent years of schooling) <b>54,807</b>
Traffic injuries averted <b>1,247</b>	Longevity (years of life gained) <b>335</b>	Cases of depression averted (visually impaired) <b>8,854</b>

### Economic benefits:

- **Employment** gains for individuals previously limited by sight loss and blindness
- Increased **occupational productivity** for those with mild or near sight loss actively employed
- Enhanced **caregiver productivity** freeing family members from caregiving responsibilities related to sight loss and blindness
- Improved **educational outcomes** for children whose vision is corrected, resulting in long-term increases in lifetime earnings

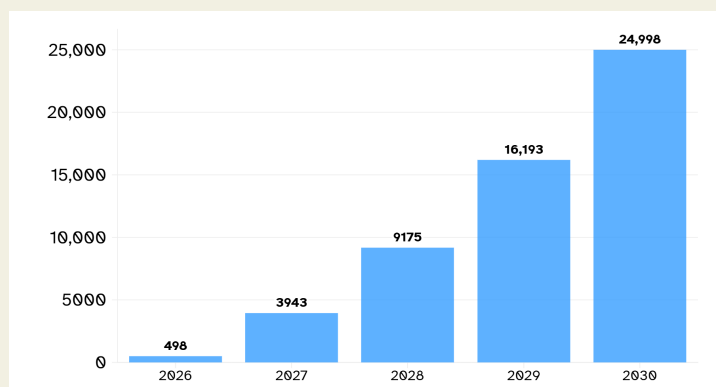


## Social benefits over time

- **Better learning for children** by addressing vision impairment in school settings, allowing them to engage more effectively in class and achieve greater learning gains.
- **Fewer road crashes** by reducing the risk of traffic accidents linked to poor vision, saving lives and preventing injuries
- Improved **mental health outcomes** for individuals with sight loss and their caregivers, reducing cases of depression
- Increased **longevity** and healthier ageing by reducing mortality risks associated with vision impairment

### Selected filters

Social benefit: Learning (years of schooling)



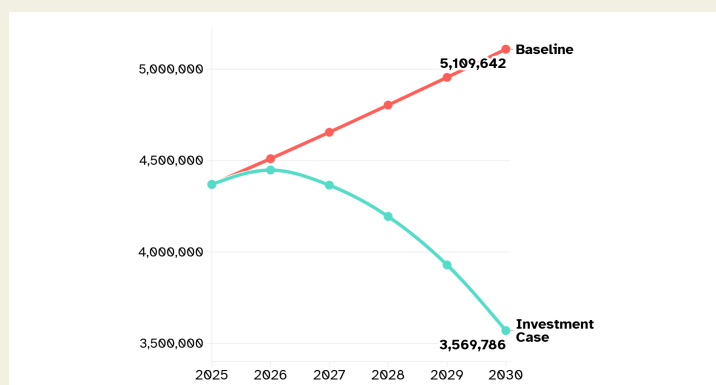
## Sight loss averted by 2030

This investment in eye health would dramatically reduce the number of people with sight loss in Malaysia by 2030 and set the path for further declines by 2050.

The biggest early gains come from addressing presbyopia through cost-effective screening and ready-made near glasses, while reductions in distance vision loss will become increasingly important beyond 2030.

### Selected filters

Category: Total



# Accelerators in eye care needed in Malaysia

Our research has identified six key accelerator interventions which can help fight against sight loss and deliver huge productivity benefits back to countries by 2030



## Early detection through screenings in the community

Many people—especially in rural and vulnerable areas—miss out on eye care because no one checks their vision. Screening is simple, low-cost, and can be done by trained community members.

Our plan follows successful global programs by rapidly expanding screening to reach underserved groups and strengthen the eyecare system’s sustainability.

Total five-year investment needed for this accelerator

**\$9.20 million**



## Give out reading glasses on the spot

Presbyopia is the leading cause of uncorrected vision loss and is easy to fix. Ready-made glasses often cost less than \$3 and can, in some cases, be fitted on the spot by trained screeners.

We support enabling community workers to screen and dispense ready-made near vision spectacles, as seen in some successful global programs. To scale this intervention effectively, policy support is essential. Specific legislation is required in some countries to authorise non-clinical personnel to provide this service.

Total five-year investment needed for this accelerator

**\$1.09 million**



## Increase workforce capacity for eye exams and dispensing glasses

As screening expands, more people will need refraction and cataract checks—but workforce shortages are a barrier. We propose:

- Rapid mid-level personnel training & deployment – Train vision technicians in ~12 months to provide basic exams and refraction.
- Mobile eye exams – Bring exams and glasses to communities for easier access.
- Tele-refraction – Use remote optometrists to increase reach.
- Train more optometrists – Start now to meet future demand for complex care.

Total five-year investment needed for this accelerator

**\$40.8 million**



## Boost surgical productivity and teams

Eye surgeons are few but essential to the eye health system. Their productivity can rise 40–50% through task-shifting of suitable functions to allied health personnel, optimizing surgical workflows to promote specialization, and ensuring optimal level of equipment and consumables.

Training allied health workers is key to support these changes. Additionally, more surgeons must also be trained now to meet future needs.

Total five-year investment needed for this accelerator

**\$13.6 million**



## Remove barriers to access

Cost, distance, and stigma stop many from accessing eye care. Uptake improves with free or subsidised surgery and glasses, and when care is brought closer to communities.

Support like transport, telehealth, and culturally appropriate counselling helps overcome barriers and improve access. Hence, our investment case envisages the effectiveness of financial and transport support alongside culturally appropriate counselling to expand access to eye care.

Total five-year investment needed for this accelerator

**\$3.69 million**



## Make cataract surgery even better

Some patients still have poor vision after cataract surgery, often due to uncorrected refractive error. A basic pair of glasses can address this.

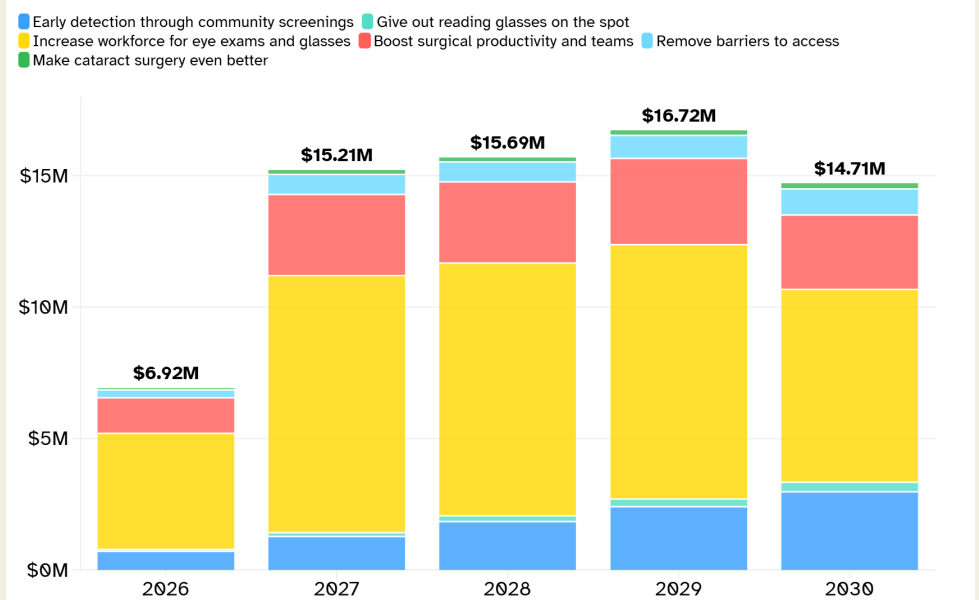
More broadly, visual outcomes after surgery can be improved through strategies implemented across the full-cycle of surgery including better training and pre-operative biometry.

Total five-year investment needed for this accelerator

**\$812,310**

## Total investment required

Delivering the benefits outlined in this investment case will require an additional \$69.3 million USD over the next five years – beginning at \$6.92 million USD in 2026 and scaling up to \$14.7 million USD by 2030.



# What leaders need to do

Here are the key actions for leaders worldwide to translate this investment case into reality.

## 1 Act

- Leadership and commitment from the highest levels of Government.
- Activate nationally owned plans to deliver change and an integrated approach.
- Implement policy changes to address vision, recognising it as a whole-of-life issue that needs a holistic, whole-of-government approach.

## 2 Allocate

- Increase resources, recognising the return of investment that is possible both nationally and internationally.
- Explore innovative funding mechanisms and new ways to fund eye health.
- Foster partnerships with the private sector.

## 3 Accelerate

- Collaborate across the public and private sector and wider society to harness the educational and societal benefits of addressing poor vision.
- Implement the 6 accelerator interventions quickly and as a minimum and scale these up as progress is made.
- Harness technology and fast-track research and development in this area.

# The Value of Vision: The case for investing in eye health is available online.



We also provide detailed data and visualisations at both global and country levels, which can be explored on the IAPB Vision Atlas. Offering comprehensive insights to support evidence-based investment in eye health.

[visionatlas.iapb.org](http://visionatlas.iapb.org)



A report by

