

Executive summary

Introduction

This report is the second progress report on implementation of the *National Framework for Action to Promote Eye Health and Prevent Avoidable Blindness and Vision Loss* (the National Framework) and covers the period mid 2008 to mid 2011. The second progress report is based on the findings of the 2011 national stocktake of activity that contributes to implementation of the National Framework, facilitated by Vision 2020 Australia on behalf of the Australian Government Department of Health and Ageing. The objective of the stocktake was to capture information about eye health and vision care activity by the Commonwealth, state and territory governments, as it informed further progress on implementation of the National Framework.

In addition, to recognise the important and complementary activity of the non government sector, information about activity relevant to the National Framework was supplemented through consultations with a wide range of eye health and vision care organisations. A number of national low vision initiatives were also reported through the relevant activities of the Australian Government Department of Families, Housing, Community Services and Indigenous Affairs.

Background

Eye health in Australia

As noted during the establishment of the National Framework, by international standards, Australia fares well with good eye health services and highly qualified eye care specialists providing a full range of eye care interventions (Commonwealth of Australia 2005).

Half of the Australian adult population report eyesight problems (Australian Bureau of Statistics 2006) and common eye disorders are mostly related to ageing. Almost 575,000 Australians over the age of 40 years had vision loss in 2009, representing 5.8 per cent of the population in that age group. Of these people, around 66,500 were blind, with nearly 70 per cent aged over 70 (Access Economics 2010).

In addition to an ageing population and the potential impact on eye health and vision care, the challenges identified for Australia include the significant amount of eye disease that remains undetected and untreated especially for people living with diabetes. Other population groups known to be at higher risk of developing eye disease include marginalised and disadvantaged people, and Aboriginal and Torres Strait Islander people.

The National Eye Health Framework

The National Framework provides a focus for Australia's commitment to the global aims of promoting eye health and vision care and reducing the incidence of avoidable blindness. The National Framework was endorsed by the Australian Health Ministers' Conference in November 2005 as a blueprint for action and a framework for reporting on progress.

The National Framework identifies five Key Action Areas for coordinated action by government, non government and private sectors:

- reducing the risk of eye disease and injury;
- increasing early detection;
- improving access to eye health care services;
- improving the systems and quality of care; and
- improving the underlying evidence base.

The first progress report on implementation of the National Framework was submitted to Health Ministers in 2008.

2011 Progress Report: Main summary points

The 2011 national stocktake of eye health and vision care activity, which formed the basis of this progress report, found that:

- The large majority of the 99 priority actions for the five Key Action Areas of the National Framework received some attention when the primary and secondary focus of activities reported by the Commonwealth, state and territory governments were accounted for.
- With the total count of activity at 205, the primary focus of that activity spanned all five Key Action Areas of the National Framework with a greater number of activities focused on improving access to services (31 per cent) and improving the systems and quality of care (24 per cent).
- Raising public awareness of risks and participating in early detection were a focus of activity in other Key Action Areas along with working on research gaps and priorities in building the evidence base.
- Partnerships were a feature of many activities and involved all three levels of government, service and community support organisations as well as universities, colleges and research institutes.
- Half of the reported activity had a statewide geographical coverage while specific attention was also focused on national activity (18 per cent) and rural and remote communities (17 per cent).
- Local priorities were evident in the focus of activity for individual jurisdictions and included the health of Aboriginal and Torres Strait Islander people, access to clinical services and an emphasis on prevention.

Non government organisations work independently and collaboratively within the sector and with government to progress eye health and vision care. Consultation with non government organisations (NGOs) found:

- Specific actions most influenced by non government activity relevant to the National Framework related to raising public awareness through production of targeted communication materials and through activities to improve knowledge of services.
- Service integration was also an emphasis along with development of the specialist workforce in fostering an improved system and quality of care. Non government activity also supported a wide range of research related to risk reduction strategies and building the evidence base more broadly.

The 2011 stocktake of eye health and vision care activity showed that many areas of the National Framework were being implemented at some level with strong collaborative arrangements a feature of local implementation. This was in addition to the contribution to eye health prevention and promotion through broader health programs, the wider health system and the activities of other areas of government, such as workplace health and safety initiatives.

All jurisdictions were actively engaged in implementing and further developing eye health promotion and prevention initiatives.