

# Indigenous Eye Health Unit

## *Minum Barreng*

Indigenous Eye Health Unit  
Melbourne School of Population Health

Our overall goal is to Close the Gap for Vision.

We first defined the scope of the problem through a national survey, then evaluated the current service models and explored the barriers to successful care. We have now after extensive consultation developed sector-supported recommendations for sustainable, cost-effective eye care services. Our trachoma work has been fast tracked and commenced earlier as the solutions have been known.

The National Indigenous Eye Health Survey showed that blindness is six times more common in Aboriginal and Torres Strait Islander people. Overall 94% of vision impairment is avoidable, but 35% of Indigenous Aboriginal adults have never had an eye exam.

## Why eye care is important

- Vision loss is common
- Vision loss has a big impact (it causes 11% of the health gap)
- Vision loss is discrete and fixable, often sight can be restored overnight
- Vision loss significantly affects individuals, families and communities



## We have developed the Roadmap to Close the Gap for Vision. It includes 42 linked recommendations that fall into nine domains

### 1 Primary Eye Care as Part of Comprehensive Primary Health Care

To improve identification and referral for eye care needs from primary health care

### 2 Indigenous Access to Eye Health Services

To enhance access to Aboriginal and mainstream eye services

### 3 Co-ordination

To improve co-ordination of eye care services and the successful navigation of referral pathway

### 4 Eye Health Workforce

To increase availability and improve distribution of eye health workforce

### 5 Elimination of Trachoma

To eliminate blinding Trachoma from Australia

### 6 Monitoring and Evaluation

To capture and report information about progress and improvement of services and outcomes in Indigenous eye health

### 7 Governance

To ensure that there is national delivery of 'Close the Gap for Vision'

### 8 Health Promotion and Awareness

To improve awareness and knowledge of eye health in communities to support self empowerment

### 9 Health Financing

To ensure adequate funding is allocated to 'Close the Gap for Vision'

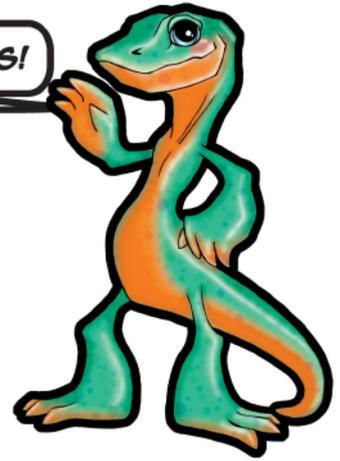


The Roadmap to Close the Gap for Vision: Full report was launched by the Hon Minister Warren Snowdon in Adelaide 23 February 2012



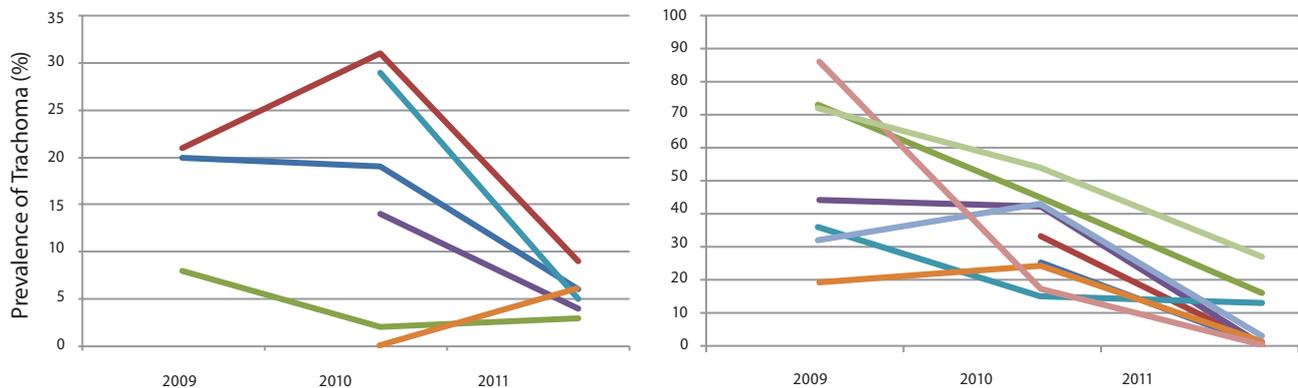
# Trachoma

CLEAN FACES, STRONG EYES!



- > Trachoma is a major blinding infectious eye disease
- > It occurs in areas with poor hygiene and living conditions
- > Australia is the only developed country in the world to still have Trachoma
- > Trachoma was eliminated from mainstream Australia over 100 years ago
- > Blinding endemic Trachoma occurs in 60% of outback communities
- > Late scarring and in-turned eyelashes (trichiasis) affects 1.4% of older Indigenous people across the country
- > Trachoma is still the fourth leading cause of Indigenous blindness

Community prevalence of active trachoma in two regions in the Northern Territory (de-identified data; each coloured line represents a separate community)



The IEHU has supported the trachoma elimination programs in the Northern Territory since 2009 and the prevalence of trachoma is reducing as the SAFE strategy is being fully implemented.

Our partners in NT include the Katherine West Health Board and Centre for Disease Control and we provide technical advice and hands on health promotion and social marketing support. NT wide media and promotion has been developed to feature the 'clean faces, strong eyes' message. The successful Trachoma Story Kits, Milpa the Trachoma Goanna, Imparja TV and CAAMA radio advertisements and work with other community organisations like the Jimmy Little Foundation, Fred Hollows Foundation and Menzies School of Health Research is having real impact.

The challenge of eliminating trachoma and preventing avoidable blindness has been front and centre as an important Indigenous health issue since Hugh Taylor worked with Fred Hollows in the 1970s. The IEHU is proud now to be supporting real community action on trachoma and Indigenous eye health. Not surprisingly when the work is done properly, real improvements can be made.

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