

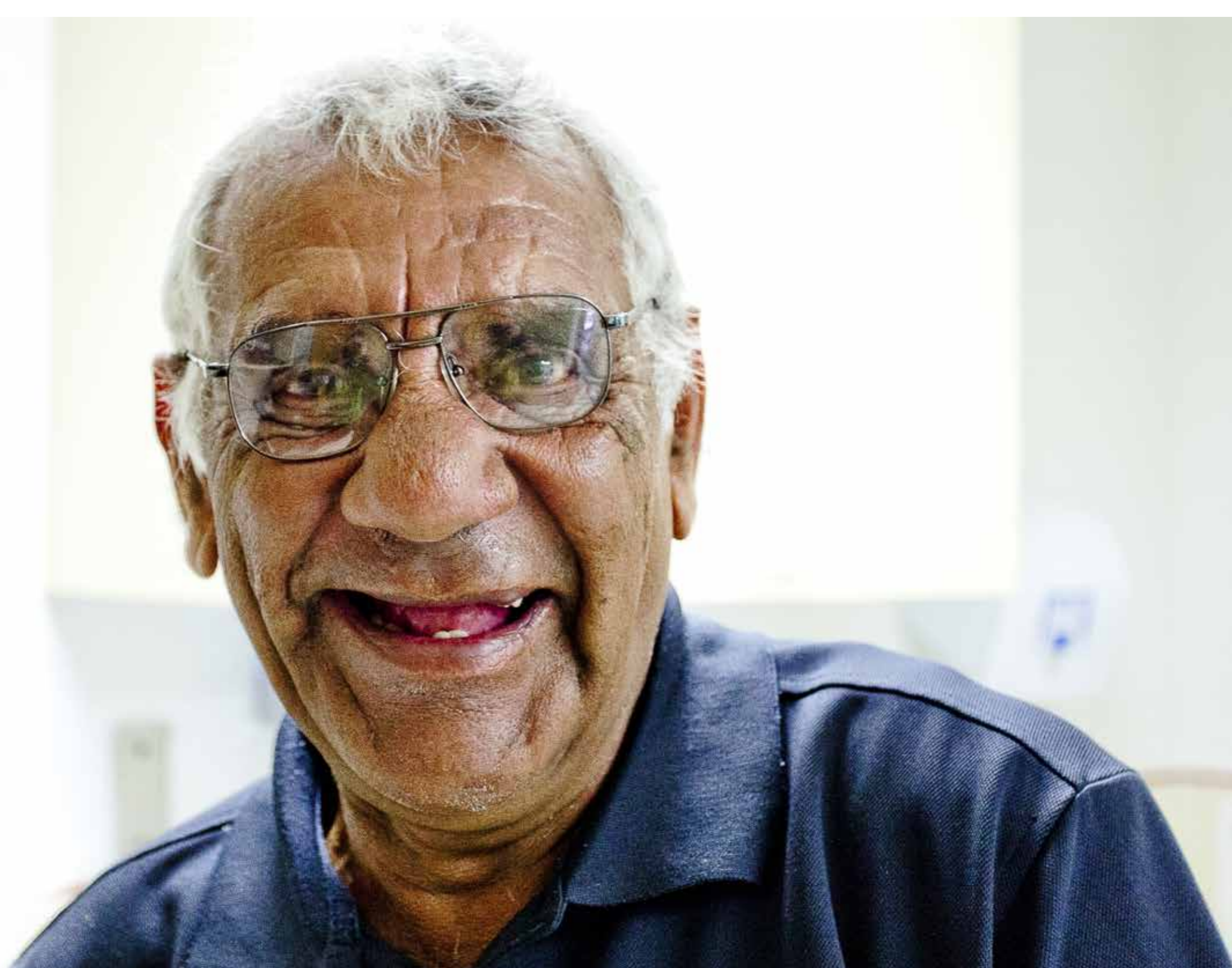
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## INTRODUCTION

- There are significantly higher rates of vision impairment and blindness among Aboriginal and Torres Strait Islander (Indigenous) Australians; half of this vision loss is due to uncorrected refractive error (URE).<sup>1</sup>
- State and Territory government subsidised spectacle schemes are available to Indigenous Australians meeting pensioner/concessioner criteria. Yet, higher rates of URE in the Indigenous population suggest that such schemes are either underutilised or inadequately designed to enable equitable access to vision correction.
- One potential solution to overcome barriers to correction of refractive error is a National Spectacle Scheme (NSS)<sup>2,3</sup>

## METHODS

- A scoping analysis of existing spectacle schemes in each state/territory of Australia was conducted, to understand their benefits, barriers, and access by Indigenous Australians.
- Ethics approval was granted and a survey questionnaire was distributed via email to Australian optometrists and dispensing personnel. Survey topics included:
  - Involvement in delivery of eye care to Indigenous Australians
  - Awareness and use of existing spectacle schemes
  - Rating of several aspects of spectacle schemes from 1 (very poor) to 5 (very good)
  - Perceived barriers for Indigenous patients obtaining spectacles
  - Support for the concept of a NSS for Indigenous people



## RESULTS

- 3706 survey emails were sent, 1725 opened the email, and of this group, 286 (17%) people responded to the survey.
- 173 (60%) indicated that they were involved in providing eye care services to Indigenous Australians, through various methods (Fig. 1).
- The various methods for prescribing or dispensing spectacles to Indigenous patients are shown (Fig. 2).

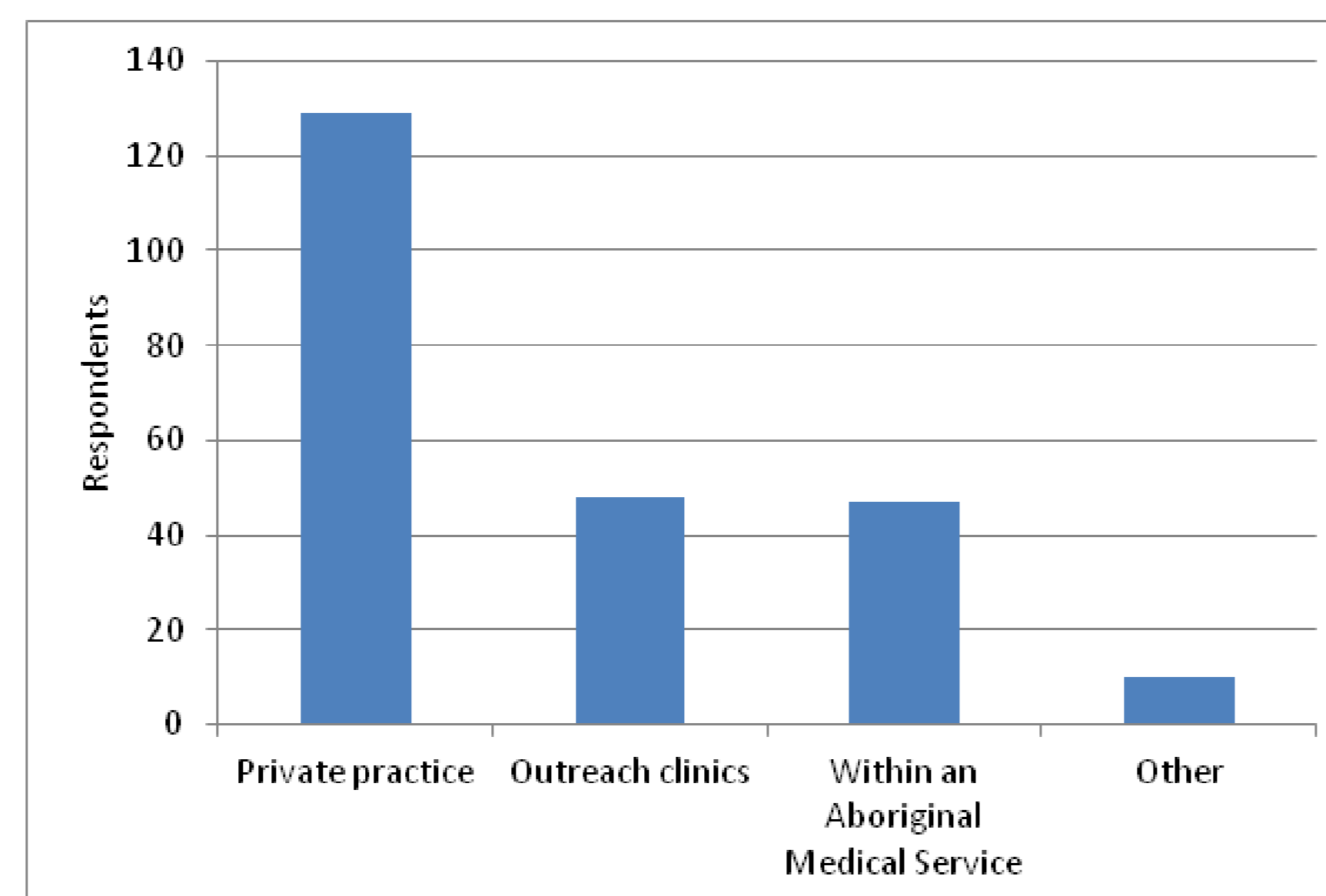


Figure 1: Methods of eye care service provision for Indigenous patients

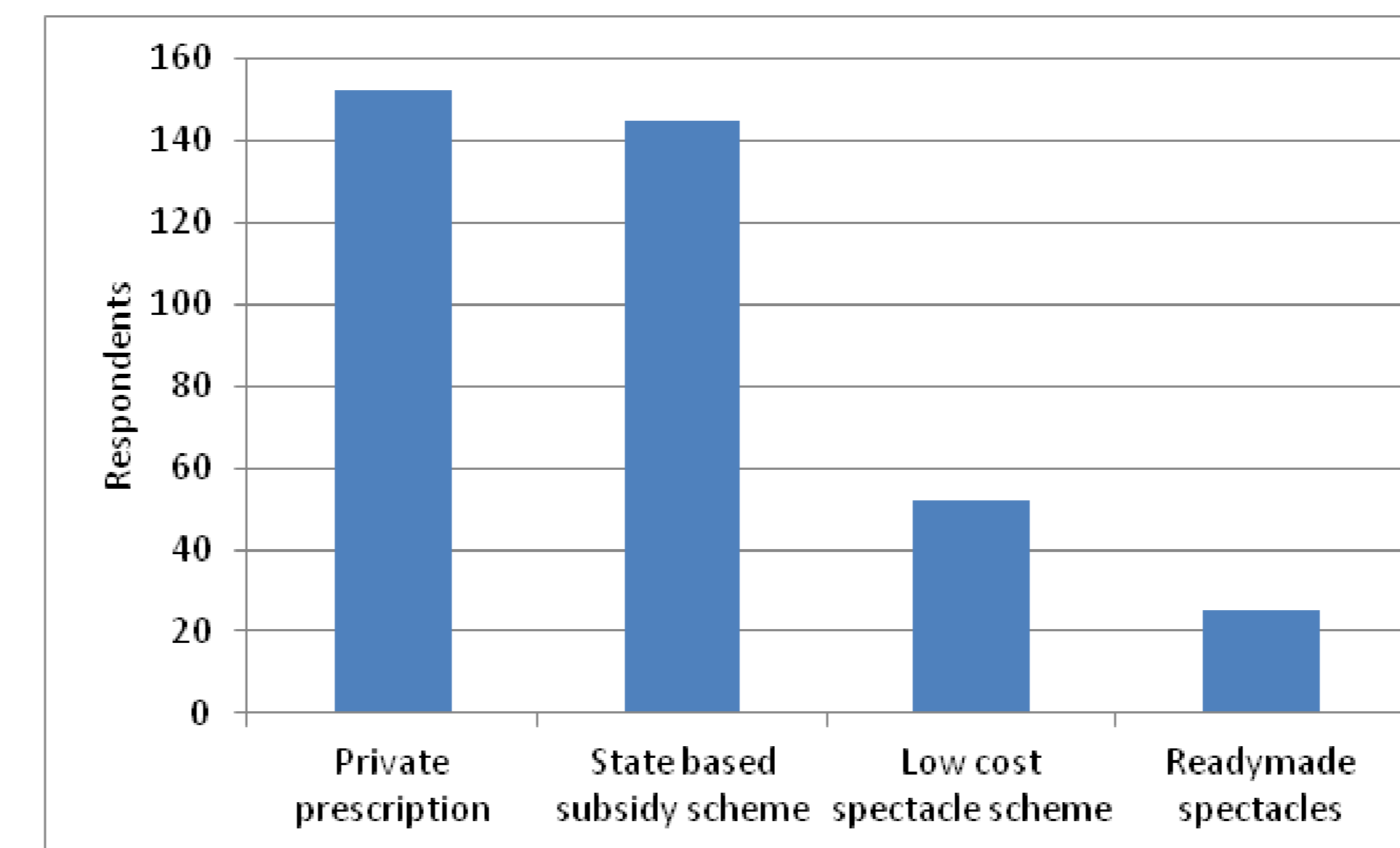


Figure 2: Methods of spectacle provision for Indigenous patients.

- **82%** (195 of 239) indicated their *support for the general proposed concept of a national spectacle supply scheme for Indigenous Australians.*
- **88%** (175 of 199) indicated they *would make use of such a scheme for their Indigenous patients.*
- **Cost/affordability** was the most commonly perceived *barrier to Indigenous patients obtaining spectacles* (68%, 156 of 230)
- Participants reported on 14 spectacle schemes, receiving average overall ratings ranging from 2.9 to 5.0 (on a 1 - 5 scale).
- Rating of the various spectacle schemes indicated that the three lowest scored aspects of existing schemes were the administrative/ paperwork burdens they impose, limited range of frames to offer patients, and the frame quality.
- The three top-rated aspects overall were lens quality, patient satisfaction, and range of lenses available.

### Thematic Analysis:

Table 1: Common themes for consideration in establishing a NSS for Indigenous Australians

Theme & sample quote	Description
<b>Eligibility criteria</b> "Any Scheme should be the same for all Australians"	<ul style="list-style-type: none"> <li>• Broader eligibility (all economically disadvantaged groups)</li> <li>• Race-neutral</li> <li>• Ability to identify patients as Indigenous</li> </ul>
<b>Means testing</b> "It needs to be means tested"	<ul style="list-style-type: none"> <li>• Means testing should be a requirement to ensure eligibility relates to economic disadvantage</li> </ul>
<b>National scheme versus local administration</b> "I feel we have more control when I can order & follow up the dispensing, and organise the delivery of the specs."	<ul style="list-style-type: none"> <li>• Centralised / national schemes may be administratively ineffective, compromise choice and quality, and damage credibility of participating optometrists.</li> <li>• Local control and flexibility can better meet patient needs</li> </ul>
<b>Adequacy of existing schemes</b> "A national scheme should not replace a state based scheme unless it offers the same or better service."	<ul style="list-style-type: none"> <li>• Existing schemes are fine [some states / territories]</li> <li>• Avoid duplication of schemes</li> </ul>
<b>Practitioner concerns (financial and ease of use)</b> "Must not cost the practice and be easy to administer"	<ul style="list-style-type: none"> <li>• Cost-effective: appropriate remuneration for practitioners/practices</li> <li>• Keep administration simple</li> <li>• Carefully consider implementation issues</li> </ul>
<b>Need for promotion of scheme amongst target population</b> "Need to improve awareness in the Aboriginal communities that specs can be obtained for free, and that customised specs are better than ready-mades."	<ul style="list-style-type: none"> <li>• Need for improved awareness of schemes to ensure they are accessed by eligible Indigenous people</li> </ul>
<b>Co-payment by patients (for and against)</b>	<ul style="list-style-type: none"> <li>• A way to ensure financial viability of the scheme, and designate 'value' to the product</li> <li>• Conversely, a co-payment system could be expensive to administer and become a disincentive for patients</li> </ul>

## DISCUSSION & CONCLUSION

- This survey indicated general support for improved schemes for the provision of affordable spectacles and supported the concept of a NSS for Indigenous Australians.
- The decision about whether to advocate for a NSS should be made in knowledge of the significant disparities in visual health for Indigenous Australians, particularly due to URE. Reducing the cost of spectacles for this population has potential to contribute to the Australian Government's 'Close the Gap' initiative, by 'closing the gap' in vision.
- Practitioner perspectives are likely to influence their involvement in spectacle schemes. These considerations should inform and guide recommendations for a NSS for Indigenous Australians.



## REFERENCES

1. Taylor HR, Keeffe JE, et al. (2009). National Indigenous Eye Health Survey, Minum Barreng (Tracking Eyes). Melbourne, Australia, Indigenous Eye Health Unit, Melbourne School of Population Health, The University of Melbourne.
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3. OAA (2010). Proposed Spectacle Scheme for Aboriginal and Torres Strait Islander Australians. Canberra, Australia, Optometrists Association Australia (OAA).

Photos courtesy of Brien Holden Vision Institute: Photographer - Dean Saffron.

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