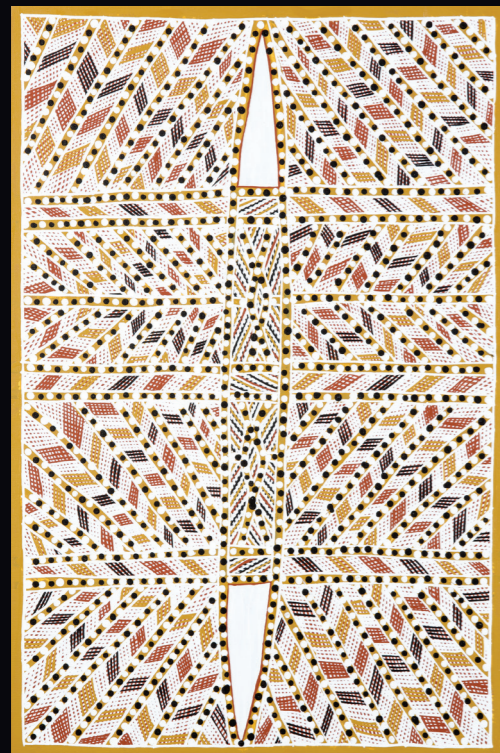




The Fred Hollows
Foundation

INDIGENOUS AUSTRALIA STRATEGY 2020-2024

OUR ARTWORK: GANINY AND FOG



"This picture is about my homeland, Birany Birany, and it's standing on the plain. This paper bark tree is on the plain. And they're making a big fire and after that fire comes the smoke. From the smoke make into a spider web – a fog. So all these colours are representative of a spider web. But the rivers, six of them, represent the clans of the people... of North East Arnhem Land. But the Ganiny it belongs to the Gumatj people only. It's my granddad. It represents me and my people, the Gumatj. Ganiny is our body, our power. When we die, our spirit returns to Birany Birany. Standing on the plain, we go back to ash, to fog."

Peter Datjing Burarrwanga, Elder, artist and teacher.

This is one of the first stories painted by Peter after having his sight restored.

INTRODUCTION

MR SHAUN TATIPATA



In the late 1970s, Professor Fred Hollows saw for himself the appalling disparities in eye health between Aboriginal and Torres Strait Islander Peoples and the rest of Australia.

Blinding trachoma – a disease he didn't even think existed in modern-day Australia – was devastating our communities.

Fred channelled his outrage into action and led the National Trachoma and Eye Health Program, bringing relief and good eyesight to thousands.

Much of the program's success was thanks to the direct involvement of Aboriginal and Torres Strait Islander Peoples and their communities in delivering these services and the unwavering support and goodwill of many.

Fred knew that the only way to deliver eye health services in Aboriginal communities was to have community members at the heart of that work. Equally, we know that to close the gap in eye health and achieve the lasting change we seek, Aboriginal and Torres Strait Islander Peoples must lead the design and delivery of services. It's in the DNA of The Fred Hollows Foundation and it's a key reason why our programming is delivering results in communities.

In Fred's day Aboriginal and Torres Strait Islander Peoples were 10 times more likely to be blind than other Australians. By working with our partners and their communities, and through the hard work of those who have dedicated their lives to ending avoidable blindness among Australia's First Peoples, we have seen this rate gradually reduce to three times that of the rest of the population.

That's real progress. But clearly, much more needs to be done. We seek to build on the efforts of those who came before us to finally close this gap in eye health. Through the 2020-2024 Indigenous Australia Strategy, The Fred Hollows Foundation will be making its biggest ever investment in Aboriginal and Torres Strait Islander eye health.

By working in collaboration with Aboriginal Community Controlled Health Services, governments and the eye health and vision care sector, The Foundation commits to ensuring that a world-class eye health system is in place and accessible to Aboriginal and Torres Strait Islander Peoples.

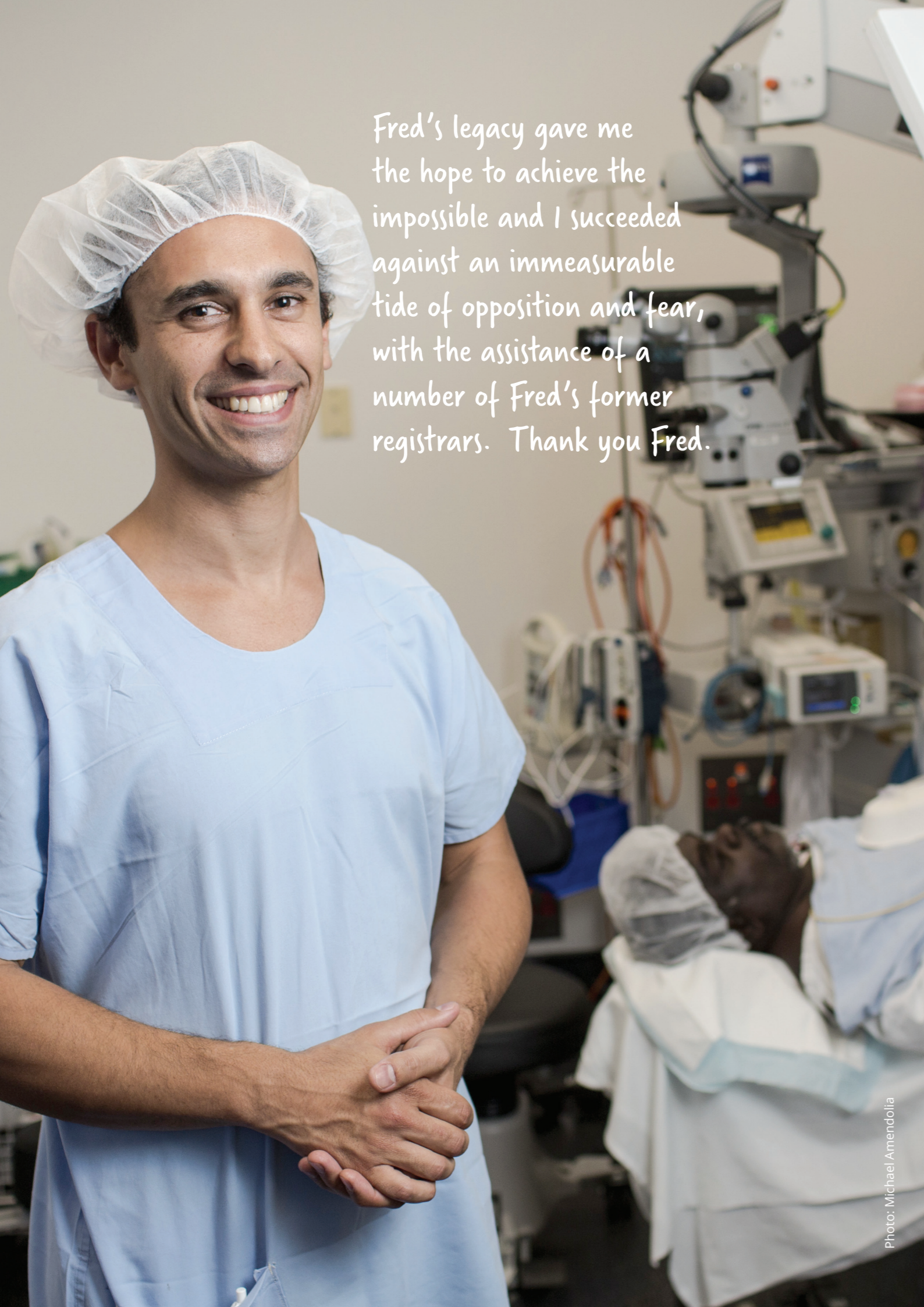
Together, we can and will finally close the eye health gap.

Shaun Tatipata

Shaun Tatipata
Indigenous Australia Program – Manager



Aboriginal and Torres Strait Islander Peoples are warned photographs in this document may contain images of deceased persons which may cause distress.



Fred's legacy gave me the hope to achieve the impossible and I succeeded against an immeasurable tide of opposition and fear, with the assistance of a number of Fred's former registrars. Thank you Fred.

Photo: Michael Amendolia

FOREWORD

DR KRIS RALLAH-BAKER



Only the giants in life are remembered years after death. Professor Fred Hollows is one of those giants.

I recall the day when the passing of Professor Hollows was announced on the national evening news. I was 14 years old and as a schoolboy knew his name due to the work he had done, particularly in Aboriginal communities across Australia.

His work was genuine and tireless and occurred at a time in Australian history when Australia's First Peoples were increasingly being allowed a voice to speak and the freedom to express the hope of self-determination. Fred's work and respect for Indigenous Australia assisted in the struggle for social justice and in no small way contributed to the graduation of Australia's first Indigenous Ophthalmologist, just over 40 years after he first travelled to Bourke.

Fred's legacy gave me the hope to achieve the impossible and I succeeded against an immeasurable tide of opposition and fear, with the assistance of a number of Fred's former registrars. Thank you Fred.

Fred's legacy lives today in the work of the Fred Hollows Foundation and extends to its work both nationally and internationally. My great-grandmother, a traditional woman and a member of the Stolen Generation, died of pneumonia as a result of her fear of white doctors when my grandmother was only 12. She couldn't have imagined a Fred – a man who assisted the poor and destitute not for religious, social or financial gain but because it was the right thing to do. A doctor who gave sight to the blind because that's what an ophthalmologist should do, for neither mercantile nor social gain. To care because people are people. Those attributes define a giant in life - a lesson well learnt today.

In many ways Australia needs another Fred – a fearless individual willing to speak unequivocally and honestly to policy makers and politicians, without fear or favour. That is not to say we don't have many wonderful ophthalmologists who continue the work of Fred. It is simply to say that Fred was unique and effective in his approach. His approach and style bulldozed barriers and broke social norms to achieve what was right. It remains a challenge that many of the barriers that led to my great-grandmother's premature death, that Fred witnessed and rallied against, still exist for many Aboriginal and Torres Strait Islander people in Australia.

Rather than working from a deficit model, recalling negative health statistics and depressing failures in Government policy as a norm, I prefer to work from

a strengths base and refer to the successes achieved year on year. It is easy to forget, when surrounded by negative messaging, how much has been achieved in the short time since Australia's First Peoples were recognised in the Australian Constitution a mere 52 years ago. I prefer to focus on the significant positive intergenerational health impacts of Fred's work and the positive outcomes achieved by the Foundation in relation to eye care in Australia. I prefer to talk about the legacy of hope left by Fred, the increasing self-determination of Australia's First Peoples and the improvement and building of a significant Aboriginal and Torres Strait Islander workforce with the number of Aboriginal and Torres Strait Islander health professionals increasing across all fields year on year. I look forward to welcoming the second Indigenous ophthalmologist in Australia, yet to be recruited, and hope to live to see the day when we reach population parity within ophthalmology with the graduation of the 30th Indigenous ophthalmologist (based on current numbers). Imagine what Fred would say. That's Fred's legacy, the legacy of hope and practicality of action.

The gap will close through long-term investments in eye health and working in partnership with Australia's First Peoples to achieve true self-determination to drive the process to develop and implement solutions. Through the 2020-2024 IAP Country Strategy, The Fred Hollows Foundation is making its biggest ever investment in Aboriginal and Torres Strait Islander eye health. The Strategy sets out a clear commitment to self-determination by ensuring and allowing community control to drive the design and delivery of eye care to communities and ensuring that local capacity is strengthened to support the necessary scaling up of services.

This shift will require the ongoing support of the sector and the continued contribution of the many already contributing to the success in this space if we are to achieve a world-class eye health system that is accessible to all Aboriginal and Torres Strait Islander Peoples. The 2020-2024 IAP Country Strategy is a forward-thinking and practical plan that the Foundation can be proud of, leading the sector from the front. Although I never had the privilege of meeting Fred I'm certain he would be proud of this Strategy.

Thank you Fred for your vision and courage – this Strategy will continue your legacy.

Dr Kris Rallah-Baker
Consultant Ophthalmologist
Australia's first Indigenous Ophthalmologist

INDIGENOUS AUSTRALIA

2020-2024 STRATEGY

OUR VISION

IN AUSTRALIA, THE FOUNDATION IS FOCUSED ON ENSURING NO ABORIGINAL OR TORRES STRAIT ISLANDER PERSON IS NEEDLESSLY BLIND OR VISION IMPAIRED.

OUR PURPOSE

We are determined to deliver Fred Hollows' vision of preventing blindness and restoring sight. We work tirelessly to ensure that Aboriginal and Torres Strait Islander Peoples can always exercise their rights to sight, good health, and self-determination. We work in collaboration with our partners to close the gap in eye health outcomes between Aboriginal and Torres Strait Islander Peoples and other Australians and ensure world class eye health and vision care for Aboriginal and Torres Strait Islander Peoples. We are committed to ensuring social justice reform is accelerated and to ensuring the rights, needs and aspirations of Aboriginal and Torres Strait Islander Peoples are respected and upheld.

OUR VALUES

- INTEGRITY
- COLLABORATION
- EMPOWERMENT
- ACTION

OUR PRINCIPLES

- SELF-DETERMINATION
- STRONG PARTNERSHIPS
- PATIENT-CENTRED CARE
- EVIDENCE-BASED PRACTICE

AREAS OF EXPERTISE & EXCELLENCE

- DEMONSTRATING EXCELLENCE IN CULTURALLY-RESPONSIVE, PEOPLE-CENTRED EYE HEALTH CARE
- DEMONSTRATING EXCELLENCE IN COLLECTIVE AND PLACE-BASED APPROACHES

OUR GOALS

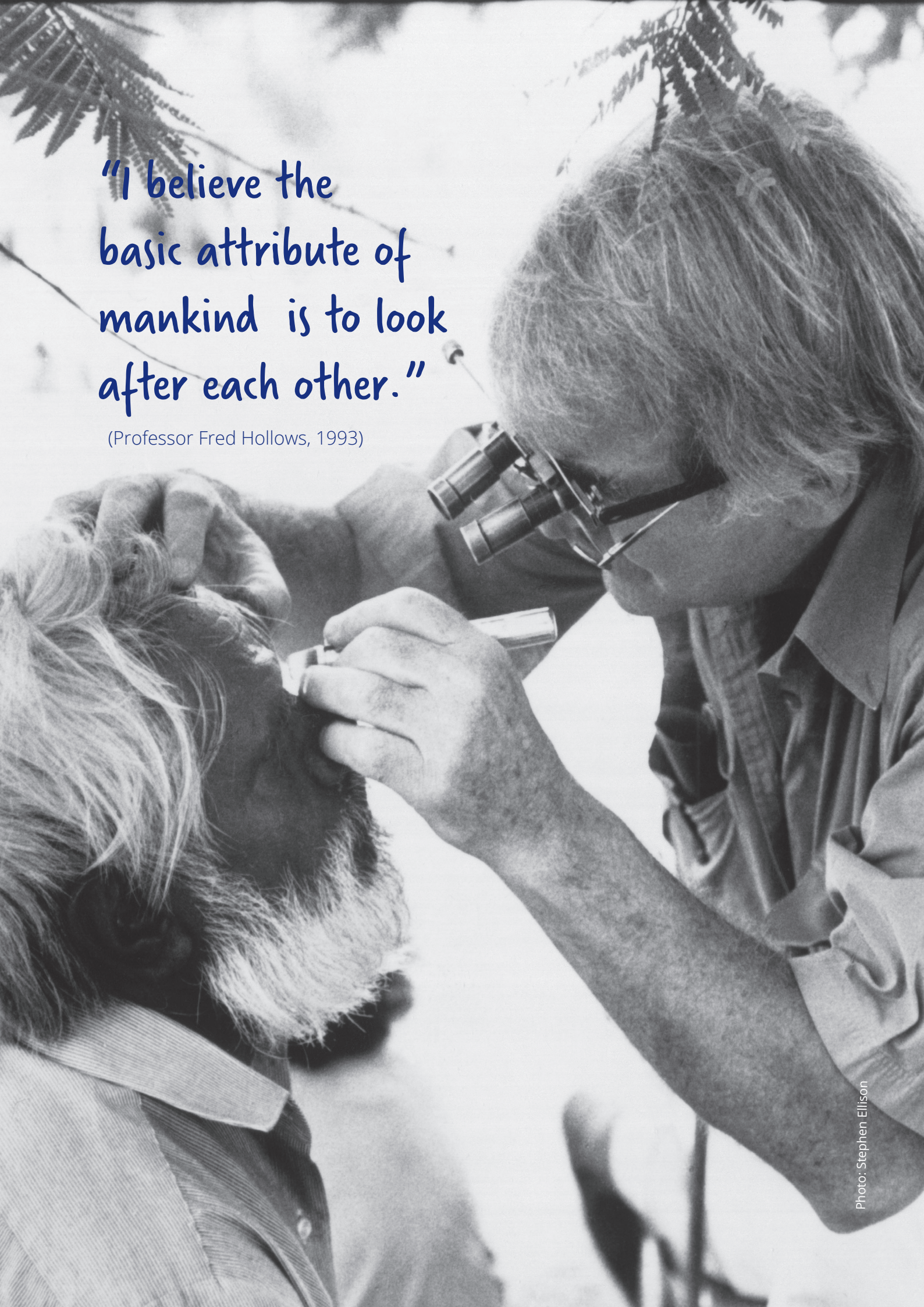
1. Effective cataract treatment is accessible to all Aboriginal and Torres Strait Islander Peoples
2. Trachoma is eliminated from Australia
3. Effective refractive error prevention and treatment is accessible to all Aboriginal and Torres Strait Islander Peoples
4. Effective and timely treatment for diabetic retinopathy and other eye conditions is accessible to all Aboriginal and Torres Strait Islander Peoples

OUR OBJECTIVES

- Strengthen regional eye health service delivery models
- Strengthen the capability and coverage of the eye health workforce
- Strengthen the provision of eye health care within ACCHSs
- Establish sustainable responses to trachoma elimination end game challenges
- The *Strong Eyes, Strong Communities* national plan is adopted by governments with strong leadership of Aboriginal and Torres Strait Islander Peoples in its implementation.

OUR INITIATIVES

- Regional Eye Care Coalitions
- Coordinated Community Eye Surgery Pathways
- Regional Eye Care Hubs
- Eye Care Workforce Development
- Eye health within Aboriginal Community Controlled Health Services
- Trachoma Elimination in Australia
- Strong Eyes, Strong Communities Advocacy



"I believe the basic attribute of mankind is to look after each other."

(Professor Fred Hollows, 1993)

BACKGROUND



HISTORY OF THE INDIGENOUS AUSTRALIA PROGRAM

Professor Fred Hollows campaigned for social justice. He was passionate about supporting Aboriginal Community Controlled Organisations and advocating for the rights of Aboriginal and Torres Strait Islander Peoples to good health and self-determination.

The Fred Hollows Foundation has been actively programming in Australia since 1999 and continues Fred's legacy through advocacy and initiatives to strengthen health systems. During the period of the previous strategic plan (2014-2018) we focused on expanding our geographic reach and supporting the development of regional eye health coalitions.

The Foundation is now well-positioned to make deeper inroads to Close the Gap in vision and promote self-determination as we continue our efforts to ensure no Aboriginal or Torres Strait Islander person is needlessly blind or vision impaired.

Our work complements the broader self-determination movement in Australia, aligns with the eye care sector's vision and approach and is supported by political leaders. The Foundation's strong presence and reputation in the Aboriginal and Torres Strait Islander eye care sector, together with our strong partnerships, will allow us to scale up activities and explore new and innovative solutions.

HEALTH DISPARITIES EXPERIENCED BY ABORIGINAL AND TORRES STRAIT ISLANDER PEOPLES

Aboriginal and Torres Strait Islander Peoples are the custodians of the oldest living cultures in the world. Although Australia has one of the world's highest standards of living, there are clear disparities between Aboriginal and Torres Strait Islander Peoples and other Australians across all indicators of quality of life. Aboriginal and Torres Strait Islander Peoples generally experience lower standards of health, education, employment and housing, and are over-represented in the criminal justice system¹.

Many factors underlie the poor health and social outcomes experienced by Aboriginal and Torres Strait Islander Peoples. Generations of Aboriginal and Torres Strait Islander Peoples have experienced trauma in relation to dispossession of land and the disruption of culture, family and community. This trauma contributes to ongoing problems in the emotional, spiritual, cultural and social well-being of many Aboriginal and Torres Strait Islander Peoples². Ongoing inequities in access to quality housing, safe water and sewerage in many Aboriginal communities³, inadequate service provision⁴ and ongoing prejudice and discrimination negatively impact the health and well-being of Aboriginal and Torres Strait Islander Peoples⁵. Health services receive inadequate funding to support Aboriginal and Torres Strait Islander clients and health providers are not adequately trained in the provision of culturally-safe and responsive care⁶.

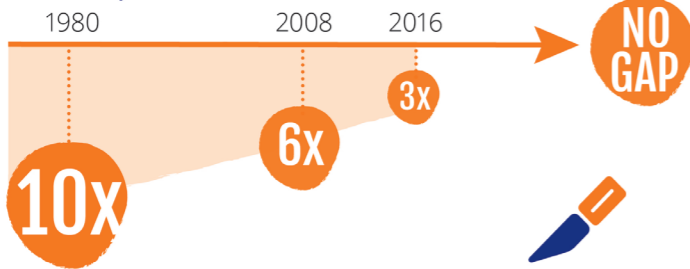
Photo: Stephen Ellison

THE VISION GAP



HERE'S OUR **PROGRESS:**

IN 1980 ABORIGINAL AND TORRES STRAIT ISLANDER PEOPLE WERE 10 TIMES MORE LIKELY TO BE BLIND THAN OTHER AUSTRALIANS. SINCE THEN, THE GAP HAS BEEN SIGNIFICANTLY REDUCED.



BUT STILL MORE NEEDS TO BE DONE AS ABORIGINAL AND TORRES STRAIT ISLANDER PEOPLES ARE STILL:

WAIT 40% LONGER FOR CATARACT SURGERY ⁽¹²⁾ **40%**

3x MORE LIKELY TO BE BLIND

12x  ARE TWELVE TIMES MORE LIKELY TO HAVE A BLINDING CATARACT

THE GOOD NEWS IS **90%** OF BLINDNESS AND VISION LOSS IS PREVENTABLE OR TREATABLE...

OUR VALUES



INTEGRITY

- We hold ourselves accountable to the highest standards
- We do what we say we will do
- We are honest and transparent in everything we do
- We strive for fairness, equity and opportunity



EMPOWERMENT

- We enable people to take actions themselves
- We speak up for those who are not heard
- We listen, learn and share information
- We make a positive difference



ACTION

- We focus on results
- We learn from our successes and mistakes
- We seek smarter ways to have greater impact
- We take bold, considered risks to achieve our vision faster



COLLABORATION

- We partner with others to achieve more
- We are stronger together
- We deeply respect the strengths of those with whom we work
- We embrace diversity and celebrate inclusion

A NATIONAL PLAN FOR ABORIGINAL AND TORRES STRAIT ISLANDER EYE HEALTH



Strong Eyes, Strong Communities is a five-year plan for Aboriginal and Torres Strait Islander eye health, developed by members of Vision 2020 Australia, the peak body representing Australia's eye and vision care sector⁷. The national plan charts a course to Close the Gap for vision and create a world-class system of eye health and vision for Aboriginal and Torres Strait Islander Peoples.

Four key strategic areas are set out in the national plan:

1. Enhance service delivery by expanding current eye health and vision care services
2. Strengthen regional partnerships and local supports to ensure local and regional systems work effectively for Aboriginal and Torres Strait Islander Peoples
3. Embed eye health in Aboriginal Community Controlled Health Services (ACCHSs) and other primary care services through a combination of workforce and system development and awareness-raising activities
4. Eliminate trachoma, with a sustained focus on full implementation of the Surgery, Antibiotic, Facial Cleanliness and Environmental Health (SAFE) strategy, including targeted efforts to enhance environmental health and embed ongoing screening in primary health care.^{10, 11}



OUR GOALS

FROM 2020 UNTIL 2024, THE FOUNDATION WILL FOCUS ITS WORK IN AUSTRALIA AROUND FOUR LONG-TERM GOALS.



GOAL 1

EFFECTIVE CATARACT TREATMENT IS ACCESSIBLE TO ALL ABORIGINAL AND TORRES STRAIT ISLANDER PEOPLES

Cataract is the leading cause of blindness for Aboriginal and Torres Strait Islander adults. Aboriginal and Torres Strait Islander Peoples who need cataract surgery face challenges in accessing treatment and typically wait longer than other Australians. Those living in underserved locations across Australia face particular challenges accessing cataract surgery. The Foundation is committed to addressing the structural barriers to accessing cataract surgery experienced by Aboriginal and Torres Strait Islander Peoples.

In collaboration with our partners, The Foundation will work to:

- Close the gap* in the rates of blindness and vision loss from cataract
- Close the gap in cataract surgery rates and coverage*
- Close the gap in wait times for cataract surgery

CATARACT FACTS FOR ABORIGINAL AND TORRES STRAIT ISLANDER PEOPLES:

- Blinding cataract is 12 times more common than in other Australians⁷
- The wait for cataract surgery is almost 40% longer than in other Australians¹²
- Only 59% get cataract surgery, compared to 88 percent of other Australians⁷
- Almost 70% with a cataract have not received a diagnosis⁷
- More than 34% experience a poor or very poor cataract surgical outcome¹³

GOAL 2

TRACHOMA IS ELIMINATED FROM AUSTRALIA

Australia remains the only developed country with endemic trachoma, which is found predominantly in very remote Aboriginal communities. Rates of trachoma are falling, but there are many communities still at risk. The Foundation is committed to eliminating trachoma and to ensuring effective and sustainable mechanisms are established to reduce the risk of trachoma re-emerging.

In collaboration with our partners, The Foundation will work to:

- Eliminate trachoma from Australia
- Establish effective trachoma post-elimination surveillance and response systems across all at-risk regions
- Establish effective environmental health programs across all at-risk regions
- Establish effective healthy living practices promotion programs across all at-risk regions

TRACHOMA FACTS

- Australia is the only developed country to still have endemic trachoma
- 130 Aboriginal communities remaining at risk¹⁴
- 20,123 people live in areas considered at risk of trachoma¹⁴
- Almost 3% of children under nine years living in remote communities have trachoma¹⁴

GOAL 3

EFFECTIVE REFRACTIVE ERROR PREVENTION AND TREATMENT IS ACCESSIBLE TO ALL ABORIGINAL AND TORRES STRAIT ISLANDER PEOPLES

Uncorrected refractive error is the leading cause of vision loss for Aboriginal and Torres Strait Islander adults. Aboriginal and Torres Strait Islander Peoples are not accessing eye care at rates high enough to address this growing problem. The Foundation is committed to ensuring Aboriginal and Torres Strait Islander Peoples have access to regular eye examinations and glasses when they need them.

In collaboration with our partners, The Foundation will work to:

- Close the gap in the rates of vision loss due to uncorrected refractive error
- Close the gap in the rates and coverage of eye examinations
- Close the gap in the coverage of glasses

REFRACTIVE ERROR FACTS FOR ABORIGINAL AND TORRES STRAIT ISLANDER PEOPLES:

- Uncorrected refractive error is 1.6 times more common than in other Australians, and the risks are higher for those living in regional and remote areas¹⁵
- Over 1/3 have never had an eye examination¹⁶

GOAL 4

EFFECTIVE AND TIMELY TREATMENT FOR DIABETIC RETINOPATHY AND OTHER EYE CONDITIONS IS ACCESSIBLE TO ALL ABORIGINAL AND TORRES STRAIT ISLANDER PEOPLES

Diabetes is a significant health problem for Aboriginal and Torres Strait Islander Peoples. It is recommended that people with diabetes receive an eye examination every year so diabetic retinopathy (DR) can be detected and treated before it causes permanent vision loss or blindness. Almost half of Aboriginal and Torres Strait Islander Peoples with diabetes are not currently having the recommended annual diabetes eye examinations and only one-third of those requiring treatment have received it. The Foundation is committed to ensuring Aboriginal and Torres Strait Islander Peoples have access to culturally-safe and high-quality eye examinations and treatment for diabetic retinopathy.

In collaboration with our partners, The Foundation will work to:

- Close the gap in the rates and coverage of eye examinations
- Close the gap in rates and coverage of treatment for diabetic retinopathy

DIABETIC RETINOPATHY FACTS FOR ABORIGINAL AND TORRES STRAIT ISLANDER PEOPLES:

- One in 10 are at risk of diabetic retinopathy, and the risks are higher for those living in remote and very remote areas¹⁷
- Around 10% have diabetes and one in 3 has diabetic retinopathy¹⁶
- Screening for diabetic retinopathy is significantly more common among other Australians¹⁶

OUR APPROACH



The Foundation adopts a number of key approaches to achieve outcomes. We treat patients, train eye health staff and equip facilities; we strengthen health systems; we engage and empower communities; we advocate for change; and we research and innovate to accelerate change. The Foundation focuses on ensuring eye care is efficient and high-quality, is effectively integrated into the health system and is accessible to all people who need it. We honour Fred Hollows' pioneering spirit by identifying and testing better ways to address eye health care challenges. We seek and are guided by the wisdom and knowledge of Aboriginal and Torres Strait Islander Peoples.

Over the next five years we will undertake seven key strategic initiatives in collaboration with our partners. Our initiatives align with the *Strong Eyes, Strong Communities* plan¹⁸ for Aboriginal and Torres Strait Islander eye health, developed by members of Vision 2020 Australia.

OUR OBJECTIVES



OBJECTIVE 1: STRENGTHEN REGIONAL EYE HEALTH SERVICE DELIVERY MODELS

The health system is not meeting the eye health and vision care needs of Aboriginal and Torres Strait Islander Peoples. To ensure sustained access to high quality, culturally-safe, patient-centred eye care for Aboriginal and Torres Strait Islander Peoples there must be expanded services and pathways to treatment. Working together, government and non-government eye health stakeholders can strengthen local service delivery and integration. Regional planning is key to ensure resources are allocated and there is continuous quality improvement in eye health. The Foundation expects that by strengthening regional eye health service delivery models, more Aboriginal and Torres Strait Islander Peoples will receive high-quality, culturally-safe eye care.

Regional Eye Care Coalitions Initiative. Strong regional eye health coalitions are expected to deliver important improvements in local service coordination and integration. To strengthen regional coalitions of eye health and primary care providers, The Foundation will provide technical advice and help establish a secretariat to coordinate the planning and the delivery of continuous quality

improvement activities. We will support a national network of regional eye health coordinators to ensure information-sharing and joint advocacy on issues that require a national policy solution. These coalitions will focus on establishing effective pathways between ACCHSs, primary health care services and other parts of the health care system.

By 2024 we aim to see:

- 100 percent of regional eye health coalitions with ACCHS representation
- 100 percent of regional eye health coalitions with strong, resourced, data-driven annual plans to strengthen regional and local systems for the provision of eye care
- 100 percent of regions with strong eye care referral pathways between organisations
- 100 percent of regional eye health coalitions sharing data against local performance indicators, including patient-reported outcomes, eye examination rates and coverage, cataract surgery rates, coverage and wait times, glasses coverage and rates and coverage of DR treatment
- Annual dissemination of at least two new insights relating to the impacts, costs, or effectiveness of new tools or approaches to regional eye health service delivery .

Coordinated Community Eye Surgery Model Initiative

The scale up of the coordinated community eye surgery model is expected to result in more Aboriginal and Torres Strait Islander Peoples in underserved locations receiving culturally-safe eye surgery and a reduction in the costs associated with providing surgical care to these patients. We will work with regional eye health coalitions and health services in other regions to establish this new and complementary model of service delivery that involves arranging for groups of Aboriginal and Torres Strait Islander patients to attend surgery together. We will provide technical advice and help establish a coordination function to manage logistical arrangements and ensure clinical, administrative and community liaison staff roles are effectively supported.

By 2024 we aim to see:

- 100 percent of regional eye health coalitions using locally-tailored, coordinated community eye surgery models
- An annual improvement in cataract surgery rates, coverage and wait times, and rates and coverage of DR treatment in those regions adopting the coordinated community eye surgery model
- 80 percent of surgical patients reporting their service was culturally-responsive, easy to access and navigate, and that their experience of care met their expectations
- Annual dissemination of at least two new insights relating to the impacts, costs, or effectiveness of new tools or models for delivery of coordinated community eye surgery model.

Regional Eye Care Hubs Initiative. Regional eye care hubs will deliver excellence in eye care for Aboriginal and Torres Strait Islander Peoples living in regional, remote and very remote areas. They will promote eye health across the region, provide static and outreach services, facilitate patient access to specialist care, and offer a variety of eye health training placements that will contribute to building an eye health workforce into the future. To establish eye care hubs in key regional centres, we will support regional eye health coalitions to establish new partnerships, conduct due diligence, develop plans, secure funding and establish approaches to workforce development, deliver services and undertake continuous quality improvement.

By 2024 we aim to see:

- 80 percent of Aboriginal and Torres Strait Islander Peoples requiring eye care in target regions accessing high quality basic eye care within 500km of where they live
- 80 percent of Aboriginal and Torres Strait Islander Peoples in target regions are aware of local eye care services and how to access them when they need to
- 80 percent of Aboriginal and Torres Strait Islander clients of regional eye care hubs report the service was culturally-responsive, easy to access and navigate and that their experience met their expectations
- Annual dissemination of at least two new insights relating to the impacts, costs, or effectiveness of new tools or models for delivery of eye health care through regional eye care hubs.

OBJECTIVE 2: STRENGTHEN THE CAPABILITY AND COVERAGE OF THE EYE HEALTH WORKFORCE

There is a shortage of Aboriginal and Torres Strait Islander Peoples employed in eye health roles. Greater investment is needed to ensure more trained and culturally-competent eye health professionals are available to ensure Aboriginal and Torres Strait Islander Peoples receive high-quality, culturally-safe eye care, as close to home as possible.

Eye Care Workforce Development Initiative.

To strengthen the capability and coverage of the eye health workforce, we will provide learning experiences within our partner ACCHSs for optometry students and rural and remote clinical placements for ophthalmology fellows. To bolster the numbers of Aboriginal and Torres Strait Islander Peoples entering optometry, ophthalmology and other allied health and eye health training programs, we will identify and test new ways to promote eye health careers and explore novel training pathways. To develop the cultural competence of eye health professionals, we will invest in strengthening the cultural competency component of optometry and ophthalmology training programs and develop and implement high-quality cultural competency professional development programs for established eye health professionals.

By 2024 we aim to see:

- 50 additional Aboriginal or Torres Strait Islander health professionals trained in eye health
- 30 additional service delivery coordinators employed to increase uptake of eye health services
- Two additional Aboriginal or Torres Strait Islander doctors enrolled in ophthalmology
- Five additional Aboriginal or Torres Strait Islander people training to be optometrists
- 50 ophthalmologists and optometrists with enhanced skills in the provision of culturally-responsive services to Aboriginal and Torres Strait Islander Peoples
- 100 percent of target regions are resourced with the staff required to deliver effective eye health care
- Annual dissemination of at least two new insights.

OBJECTIVE 3: STRENGTHEN THE PROVISION OF EYE HEALTH CARE WITHIN ACCHSS

ACCHSs are best-placed to provide localised, culturally-responsive primary eye care to Aboriginal and Torres Strait Islander Peoples. ACCHSs need greater support to embed eye care within primary health care and to address widespread equipment shortages. The Foundation expects that by strengthening the provision of eye health care within ACCHSs, more Aboriginal and Torres Strait Islander Peoples will receive eye examinations, gain access to glasses when they need them and be actively supported to access cataract surgery and treatment for diabetic retinopathy.

Eye health within ACCHSs Initiative. To strengthen the provision of eye health care services we will work with each partner ACCHS to understand and address the specific challenges they experience. We will support ACCHSs to strengthen their partnerships for eye care and identify, test and showcase innovative solutions to their workforce, service delivery, financing and equipment challenges.

By 2024 we aim to see:

- 100 percent of our partner ACCHSs adequately equipped and staffed to offer basic eye care
- 100 percent of our partner ACCHSs routinely delivering high-quality basic eye care
- 80 percent of adult clients of partner ACCHSs aware of available eye care services and how to access them when they need to
- 80 percent of adult eye service clients of partner ACCHSs reporting their service was culturally-responsive, easy to access and navigate, and that their experience of care met their expectations
- Annual dissemination of at least two new insights relating to the impacts, costs, or effectiveness of new tools or models for the provision of eye health and vision care within ACCHSs.

OBJECTIVE 4: ESTABLISH SUSTAINABLE RESPONSES TO TRACHOMA ELIMINATION END GAME CHALLENGES

Australia has almost eliminated trachoma. Effective post-elimination trachoma surveillance and response systems and strong environmental health and hygiene promotion programs within remote and very remote communities are needed to achieve and sustain elimination efforts. The Foundation expects that investments in these strategies will ensure trachoma is finally eliminated from Australia.

Trachoma Elimination in Australia Initiative. To ensure trachoma is eliminated from remote corners of the country, we will work with health and housing departments, non-government organisations and the Aboriginal community-controlled sector to identify and test local solutions to address the determinants of trachoma transmission. We will work nationally to strengthen knowledge exchange, workforce capacity and the monitoring and evaluation of environmental health and hygiene promotion programs. We will contribute to the development of post-elimination trachoma surveillance and control strategies, and advocate for government investment in evidence-based environmental health and hygiene promotion programs.

By 2024 we aim to see:

- Trachoma eliminated from all at-risk communities
- Effective post-elimination trachoma surveillance and response systems operating across all at-risk regions
- Annual dissemination of at least two new insights relating to the impacts, costs, or effectiveness of new tools or models for delivery of environmental health and healthy living practices promotion programs.

OBJECTIVE 5: THE STRONG EYES, STRONG COMMUNITIES NATIONAL PLAN IS ADOPTED BY GOVERNMENTS WITH STRONG LEADERSHIP OF ABORIGINAL AND TORRES STRAIT ISLANDER PEOPLES IN ITS IMPLEMENTATION.

The gap in eye health for Aboriginal and Torres Strait Islander Peoples has been halved over the past decade as a result of the collective efforts of many individuals, organisations and governments. Despite these investments, only 60 percent of the need is being met and access to culturally-safe treatment is still lacking¹⁸. If funded by governments, the *Strong Eyes, Strong Communities* plan will enable the necessary scale-up of the clinical and non-clinical services required to meet population need and support Aboriginal Community Controlled Health Services to play a greater role in designing and delivering culturally-responsive models of eye health care.

Strong Eyes, Strong Communities Advocacy Initiative. The Foundation will work in collaboration with Vision 2020 Australia and members of its Aboriginal and Torres Strait Islander Committee to push for governments to adopt the recommendations set out in the *Strong Eyes, Strong Communities* plan. We will champion greater Aboriginal and Torres Strait Islander leadership and control in the eye health sector and ensure that there is meaningful and substantive engagement with and participation of Aboriginal and Torres Strait Islander leaders, organisations and community members in implementing the plan.

By 2024 we aim to see:

- 100 percent of the Strong Eyes, Strong Communities plan funded by the Federal Government
- A Federal Government commitment to sustained funding for outreach eye services to better meet population need
- A sustained investment by governments in the repair and maintenance of health hardware as part of all remote housing programs and a long-term investment in remote housing
- 100 percent of national and state and territory eye health governance groups have active representation by Aboriginal and Torres Strait Islander Peoples.

AN INSPIRING CHALLENGE TO AMPLIFY OUR IMPACT – CLOSING THE CATARACT GAP



Cataract is the leading cause of blindness for Aboriginal and Torres Strait Islander adults. More than 40 percent of Aboriginal and Torres Strait Islander Peoples who need cataract surgery have not been able to access treatment. Aboriginal and Torres Strait Islander Peoples are twice as likely to wait more than a year for cataract surgery than other Australians.

To Close the Gap in avoidable blindness and vision impairment, The Foundation will bring together Aboriginal and Torres Strait Islander health leaders and the sector with donors, corporations and governments. The Foundation will take a collaborative approach to solving this complex issue. Collectively we will accelerate action to address the cataract need of Aboriginal and Torres Strait Islander Peoples and Close the Gap in surgical wait times, and the rates, quality and coverage of surgery.

We will achieve this by fast-tracking the scale up of four key initiatives:

1. Regional Eye Care Hubs Initiative;
2. Coordinated Community Eye Surgery Model Initiative;
3. Eye health within ACCHSs Initiative; and
4. Eye Care Workforce Development Initiative.

Combined, these initiatives aim to address the short-term needs of Aboriginal and Torres Strait Islander Peoples currently waiting for cataract surgery, and the longer-term objectives of strengthening eye health services and care pathways to manage ongoing cataract care needs. The initiatives will leverage regional coalitions to achieve these outcomes.



AREAS OF EXCELLENCE AND EXPERTISE



THE AREAS OF EXPERTISE THAT WILL BE FURTHER DEVELOPED BY THE FOUNDATION DURING THIS STRATEGIC TERM INCLUDE:

DEMONSTRATING EXCELLENCE IN CULTURALLY-RESPONSIVE, PEOPLE-CENTRED EYE HEALTH CARE

To provide accessible and culturally-safe eye health care to the world's Indigenous peoples, key barriers need to be addressed. Indigenous peoples face specific and additional barriers to accessing quality eye health care that go beyond remoteness and poverty. We have a demonstrated track record of understanding what is required to ensure eye health care is responsive to the needs of Aboriginal and Torres Strait Islander Peoples. This understanding is informed by the work we undertake in partnership with communities, service providers and Aboriginal Community Controlled Health Services. Over the next five years we will consolidate our skills, experience and relationships in the provision of culturally-responsive and people-centred eye care. We will actively share the evidence we generate and the lessons we learn through our work and we will support our partners to embed best-practice approaches.

DEMONSTRATING EXCELLENCE IN COLLECTIVE AND PLACE-BASED APPROACHES

We understand that we cannot achieve any of our goals alone and that success will only be achieved through strong, transparent and mutually-beneficial partnerships. Over the next five years we will deepen and expand our experience as participants in collaborative projects. We will share our skills and experiences in establishing and implementing collective initiatives and place-based solutions to eye health care challenges within the Australian context.



OUR PRINCIPLES



OUR PRINCIPLES ARE INFORMED BY THE UNITED NATIONS DECLARATION ON THE RIGHTS OF INDIGENOUS PEOPLES¹⁹, THE NATIONAL ABORIGINAL AND TORRES STRAIT ISLANDER HEALTH PLAN²⁰, AND THE ABORIGINAL PEAK ORGANISATIONS NORTHERN TERRITORY PRINCIPLES²¹. TAKING A RIGHTS-BASED APPROACH TO HEALTH, WE ARE COMMITTED TO WORKING WITH COMMUNITIES, NON-GOVERNMENT ORGANISATIONS AND GOVERNMENTS, TO ENSURE EQUITY IN THE ACCESSIBILITY AND RESPONSIVENESS OF EYE HEALTH SERVICES.

ABORIGINAL AND TORRES STRAIT ISLANDER CONTROL AND SELF-DETERMINATION

We believe Aboriginal and Torres Strait islander Peoples and organisations are best-placed to deliver services to their own communities. We seek to strengthen Aboriginal Community Controlled Health Services and promote the active engagement of Aboriginal and Torres Strait Islander Peoples in decisions that affect their lives.

- **PRINCIPLE 1:** We uphold the right of Aboriginal and Torres Strait islander Peoples to self-determination and free, prior and informed consent
- **PRINCIPLE 2:** We work alongside and respect the leadership and priorities of the Aboriginal and Torres Strait Islander community-controlled sector
- **PRINCIPLE 3:** We actively support efforts of Aboriginal and Torres Strait Islander organisations and Peoples to achieve equity in social and health outcomes for Aboriginal and Torres Strait Islander Peoples
- **PRINCIPLE 4:** We support and actively encourage other non-Aboriginal and Torres Strait Islander organisations to support the development of the Aboriginal Community Controlled Health Services sector
- **PRINCIPLE 5:** We do not operate in direct competition with Aboriginal and Torres Strait Islander organisations

STRONG PARTNERSHIPS

In Australia, we deliver through partnerships. We establish collaborative relationships with other organisations who are willing to work with us in transparent and mutually-beneficial ways. We work towards common goals, co-create solutions and share resources, risks and rewards.

- **PRINCIPLE 6:** We work sensitively and with respect for our partners' political, social, economic and cultural situations and for their priorities, principles, and preferences
- **PRINCIPLE 7:** We operate with transparency and are accountable to those we work for and with

PATIENT-CENTRED, EVIDENCE-BASED CARE

We take a patient-centred approach and seek to ensure eye care is delivered at the right time, in the right way, by the right team, in the right place. We seek to understand and improve the patient experience of care and journey through the health system. To ensure our work is evidence-based and has a sustained positive impact, we actively engage all key stakeholders, use best-practice approaches and engage in continuous quality improvement. We use a rigorous internal review process and data to make decisions about where resources should be allocated and where improvements can be made.

- **PRINCIPLE 8:** Our work is focused on creating sustained positive change for Aboriginal and Torres Strait Islander Peoples, is informed by evidence, considered from the patient perspective, and based on need

THE FOUNDATION'S COMMITMENT TO SOCIAL JUSTICE



The Foundation works tirelessly to ensure that Aboriginal and Torres Strait Islander Peoples can always exercise their rights to sight, good health and self-determination. We are committed to ensuring social justice reform is accelerated and to ensuring the rights, needs and aspirations of Aboriginal and Torres Strait Islander Peoples are respected and upheld. We recognise that in order to achieve this, there must be broad social change at the local, regional and national level.

We will continue to leverage our position as a leading Australian non-government organisation to promote Aboriginal and Torres Strait Islander Peoples' right to self-determination and to push for the social and environmental changes required to ensure Aboriginal and Torres Strait Islander Peoples have equal opportunities to experience good health and well-being.

The Foundation is not an Aboriginal and Torres Strait organisation and as such we must be guided by the views and positions of peak Aboriginal and Torres Strait Islander organisations and health leaders on broader social justice issues and reforms. The Foundation will be guided by the leadership of the Close the Gap Campaign, the National Indigenous Health Leadership Forum, and other governance structures such as the Coalition of Indigenous Peaks, in determining if and when it should speak out publicly on social justice issues and reforms.

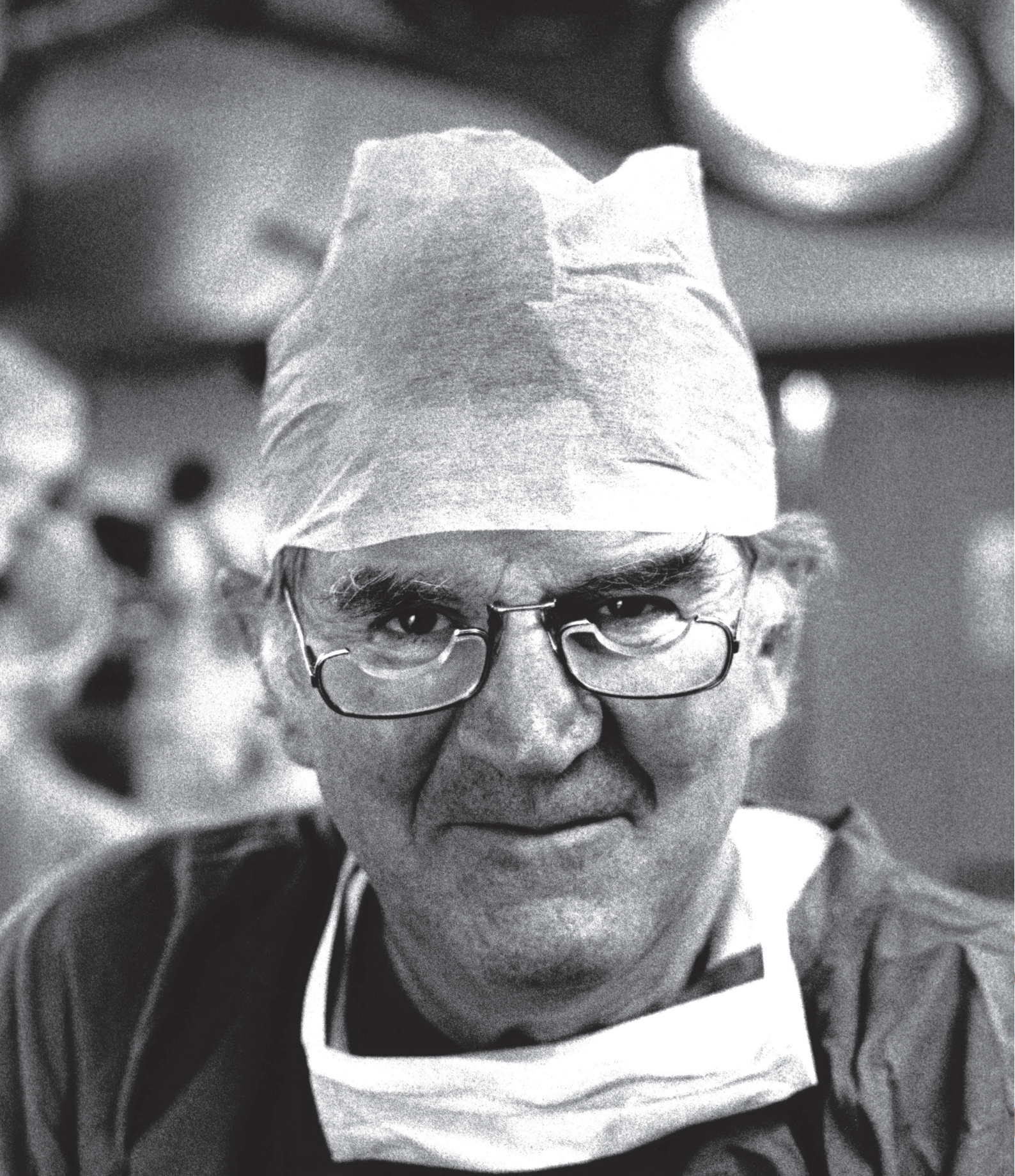
To demonstrate our commitment to achieving the social justice reforms needed in Australia, The Foundation will:

- Commit to implementing our Reconciliation Action Plan (RAP)
- Support the calls of the Uluru Statement from the Heart, a document that sets out the desires of Aboriginal and Torres Strait Islander Peoples for a First Nations Voice to parliament and a Makarrata Commission to oversee a process of Truth-Telling and Agreement Making (Treaty). The Foundation believes that the Federal Government can and should do more to implement its recommendations.
- Support meaningful and substantive engagement and co-decision making between all levels of government and Aboriginal and Torres Strait Islander organisations, such as (but not limited to) the Joint Partnership between the Coalition of Aboriginal and Torres Strait Islander Peak Bodies and the Council of Australian Governments (COAG).
- Continue to be an active participant in the Close the Gap Campaign and a supporter of the Coalition of Indigenous Peaks and non-Aboriginal and Torres Strait Islander health and human rights organisations working together to achieve equality in health and life expectancy for Aboriginal and Torres Strait Islander Peoples. The Foundation is a founding member of the Campaign, and in line with the principle of self-determination, as a non-Aboriginal and Torres Strait Islander organisation our role is to listen to, support and amplify the voices of Aboriginal and Torres Strait Islander leaders and organisations.






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