Eye health promotion by optometrists in rural Victoria

Lawrence Arnold, Ben Harris, Optometrists Association Victoria

The Optometrists Association Victoria has been helping optometrists in rural Victoria undertake eye health promotion activities with older Victorians—the See to the Future project. The Victorian Department of Human Services and the Optometrists Association Victoria funded this 18-month project from August 2001 through to February 2003, one of ten older persons health promotion projects funded by the Department of Human Services.

THE ORGANISATION

The Optometrists Association Australia (Victorian Division) is the peak professional association for optometrists in the State, representing 95 per cent of Victoria’s 800 optometrists. The association has an ongoing commitment to health promotion, which is a key element of the strategic plan. The association is uniquely placed to deliver vision health promotion to the Victorian community.

OPTOMETRY SERVICES IN REGIONAL VICTORIA

Optometrists are highly qualified to diagnose and treat vision conditions. Optometrists complete a four-year degree at the University of Melbourne, the University of New South Wales or the Queensland University of Technology. (From 2002 the University of Melbourne degree will be extended to five years so as to include therapeutic drug administration by optometrists, as provided for under the Optometrists Registration Act 1996.)

Over 120 optometrists deliver primary health care services to rural communities through small–medium sized private practices located in regional centres throughout Victoria. As regional Victoria is characterised by a number of larger centres of population, and many Victorian optometrists operate satellite practices or clinics in neighbouring smaller communities, few residents of the State live far from optometric services. Services to more distant communities are supported by the Commonwealth Government’s visiting optometrist scheme.

Optometric services are covered under the Commonwealth Government’s Medicare Benefits Schedule (MBS). A common form of undertaking signed by all optometrists limits the price that optometrists may charge for services covered under Medicare to the level of the MBS fee. More than 90 per cent of optometry services in regional Victoria are bulk billed; ensuring minimal financial barriers to accessing eye care services.

People living in regional Victoria who hold a pensioner concession card or have held a health care card for at least six months (and their dependent children) are eligible for support under the Victorian Eyecare Scheme. Optometrists bulk bill all patients.
eligible for the scheme, and the Victorian Government subsidises the cost of glasses and contact lenses for these people.

**EYE HEALTH IN THE COMMUNITY**

The See to the Future project was funded due to the demonstrated need for better access to eye care in rural Victoria. Data from the Centre for Eye Research Australia at the University of Melbourne demonstrates that over 100,000 Victorians have visual impairment (worse than driving vision) (Taylor 2001).

The Centre for Eye Research Australia further demonstrates that half of all visual impairment in the community is preventable and another fifth is treatable (Taylor 2001). More than 200,000 Australians are visually impaired due to refractive error problems (in effect, wearing the wrong glasses), which can be simply diagnosed by optometrists and corrected with glasses or contact lenses. Other conditions such as glaucoma, cataract and diabetic retinopathy in most cases can be successfully treated if detected early.

Early detection is the key to reduce harm caused by visual impairment and blindness. *Vision 2020: The Right to Sight Australia* (a collaboration of eye care sector organisations involved in research, eye care professions, education and low vision services, including the Optometrists Association) believes that this high level of visual impairment in the community is due to the community’s misperception that failing eyesight is a natural consequence of ageing (Vision 2020 2002). Vision 2020 and its partners are committed to promoting good eye care and encouraging regular eye examinations as essential for saving sight.

**SEE TO THE FUTURE AIMS**

The See to the Future project aims were:

- to improve vision care in rural areas
- to develop health care partnerships
- to develop resources for community use.

The target groups were rural elderly, their carers and health professionals. The core project message was to encourage people over 50 to have a regular eye examination every two years.

The project steering committee comprised members from organisations with an understanding of health promotion in rural areas and the community contacts to assist in project implementation—the Victorian Department of Human Services, the Country Women’s Association, the Victorian College of Optometry, the Optometrists Association Australia (our national office) and the Optometrists Association Victoria. The role of members was to advise on project strategies and help with contacts.
The project strategies included:

- undertaking a needs analysis through a survey of rural optometrists
- developing suitable workshop materials
- developing partnerships with like-minded organisations
- developing an educational model for presenting vision care workshops
- developing relationships with rural media.

**NEEDS ANALYSIS**

The Optometrists Association Victoria wrote to 139 rural-based members in late 2001 with a needs analysis survey. This survey asked about the main conditions treated by rural optometrists, how visual conditions were explained to patients, and sought practitioners’ views and experiences with health promotion.

The survey’s results indicated that the main conditions that rural optometrists see in their practices were focusing errors, cataract, macular degeneration, diabetic retinopathy, glaucoma (the five major causes of visual impairment), pterygium and dry eyes. These results were not surprising. However, the way that optometrists explain various conditions to their patients raised some interesting ideas that were useful in developing health promotion messages. For example, one optometrist used spaghetti in a jar to explain focusing errors to their patients.

The survey also demonstrated that most rural optometrists in Victoria want to do more health promotion, but lack the time, the tools and the experience.

The survey also identified a group of optometrists interested in health promotion and indicated the main vision conditions to be covered in project interaction with rural communities. It also identified the key barriers—time and confidence.

To overcome these barriers, the association developed resources that optometrists can use in health promotion, including a speech template and PowerPoint presentation. The speaking notes and PowerPoint presentation covered the major conditions using the best available explanations of common visual conditions. The hypothesis was that with proper tools pre-prepared, optometrists would have more confidence to present. The PowerPoint presentation provides visual aids and prompts for the optometrists to use their own skills and knowledge to talk about eye care. Further, by preparing materials, a major time consuming task had already been completed for the presenting optometrist.

**VISION CARE SEMINARS**

A key output for the project was to present vision care seminars to older Victorians in rural areas. Relationships with like-minded organisations were developed from the beginning of the project as the association needed to access audiences in rural communities to present the vision care message. These networks were essential to ensure the project got into the smaller, often bypassed communities.
Further, working with partner organisations ensured that the association did not have to build its own audiences for the seminars. We also wanted a wider audience more representative of older Victorians in regional areas of the State, rather than people specifically interested in eye care.

Between June and November 2002 the association and its partners delivered thirteen “caring for the older eye” seminars. These seminars tested the resources developed by the association and developed the practitioners’ skills in health promotion. Audiences for the seminars were provided by partner organisations such as the Country Women’s Association and community health services. The project officer introduced each workshop, with local optometrists providing the vision care content of the talk and taking questions, using the resources developed by the Optometrists Association Victoria.

The workshops were successful in reaching the target audiences in smaller rural communities, with more than 350 people attending the seminars, and more than a dozen optometrists providing content (see Table 1).

### Table 1 See to the Future vision care workshops June – November 2002

<table>
<thead>
<tr>
<th>Date</th>
<th>Location</th>
<th>Optometrists</th>
<th>Rural elderly</th>
<th>Health staff</th>
<th>Partner organisations</th>
</tr>
</thead>
<tbody>
<tr>
<td>20 June</td>
<td>Yarragon</td>
<td>2</td>
<td>53</td>
<td></td>
<td>Country Women's Association</td>
</tr>
<tr>
<td>2 July</td>
<td>Camperdown</td>
<td>1</td>
<td>25</td>
<td></td>
<td>Camperdown Association of Retired Persons</td>
</tr>
<tr>
<td>3 July</td>
<td>Heywood</td>
<td>1</td>
<td>26</td>
<td>3</td>
<td>Glenelg Outreach Primary Health Services</td>
</tr>
<tr>
<td>30 July</td>
<td>Wodonga</td>
<td>3</td>
<td>20</td>
<td></td>
<td>Upper Hume Primary Care Partnership</td>
</tr>
<tr>
<td>20 August</td>
<td>Camperdown</td>
<td>1</td>
<td>10</td>
<td></td>
<td>South West Access Network Carers Victoria</td>
</tr>
<tr>
<td>21 August</td>
<td>Warrnambool</td>
<td>1</td>
<td>14</td>
<td></td>
<td>South West Access Network Carers Victoria</td>
</tr>
<tr>
<td>22 August</td>
<td>Terang</td>
<td>1</td>
<td>49</td>
<td>3</td>
<td>Terang Health Service</td>
</tr>
<tr>
<td>4 September</td>
<td>Cowes</td>
<td>2</td>
<td>17</td>
<td></td>
<td>Country Women's Association</td>
</tr>
<tr>
<td>14 October</td>
<td>Callignee</td>
<td>3</td>
<td>17</td>
<td></td>
<td>Country Women's Association</td>
</tr>
<tr>
<td>9 November</td>
<td>Rawson</td>
<td>1</td>
<td>60</td>
<td></td>
<td>Country Women's Association</td>
</tr>
<tr>
<td>17–18 November</td>
<td>Wodonga, Tallangatta, Chiltern</td>
<td>2</td>
<td>52</td>
<td></td>
<td>Upper Hume Primary Care Partnership</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>18</td>
<td>271</td>
<td>78</td>
<td>367</td>
</tr>
</tbody>
</table>

Originally ten workshops were planned but Upper Hume Primary Care Partnership requested an additional three to cater for additional staff demand. See to the Future sought to concentrate its efforts in the smaller, more isolated communities attracting less outreach from mainstream services.

The seminars were supported by a modest media strategy. Local newspapers and radio were contacted prior to the workshops to present the project message to the widest possible audience. Rural radio stations in particular were generally quick to see the newsworthiness of the story and focused on the proficiency of local optometrists in diagnosing and treating the major vision conditions.
EVALUATION

Ongoing evaluation is the key to the project’s success. The Department of Human Services contracted the Melbourne University Centre for Health Program Evaluation to undertake an evaluation of each of the ten older persons health promotion projects at the beginning of the process. Each project was responsible for its own evaluation within the overall context and had a Centre staff member assigned to support its individual evaluation plan. The Centre co-ordinated regular evaluation forums for project staff and collated information from self-assessment evaluation forms. This promoted a group evaluation culture whilst allowing flexibility for each project to evaluate data within its own context. The ongoing consultancy role of Centre staff enabled each project to obtain timely information and advice to make changes to its project plan as appropriate and to register those changes clearly.

The advantage of this process was to ensure that evaluation became a channel of information, expertise and support to each project rather than a burdensome reporting requirement.

See to the Future sought evaluation data from each of the three target groups—rural elderly, community organisations and health professionals, including optometrists.

The rural elderly who participated in workshops were asked to complete a short evaluation form on the clarity of the presentation. They were uniformly positive and suggestions for improving workshop materials were later implemented. A small number of participants were later contacted in a phone survey. The aim of the follow up telephone interviews was to see if participants could remember the project message and had acted on it. Four respondents were chosen randomly from those who had volunteered their telephone numbers on their evaluation sheet. All had found the workshop information useful and reported taking some action as a result of their workshop.

All respondents reported that they had talked to friends and family members about the workshop and had read the workshop information. Two had been to see a health professional and two felt there was no need to do so presently. All were able to express the project message in some form:

- I get my eyes checked every couple of years.
- Keep an eye on the little problems so they don’t turn into big ones.
- Many don’t know they have an eye problem so have them checked regularly
- Lots of messages—glaucoma, watery eyes.

One participant had obtained more written information. The other three were very clear in stating they had not, indicating that the information in the workshop and the kit was sufficient for them to make a health decision.

Participant evaluation showed no significant difference between large and small audiences, indicating that the PowerPoint presentation used by a knowledgeable eye care professional is appropriate to a wide range of audiences and will be a major transferable resource for the community.
The project evaluation shows ongoing interaction of the participants with their families and community in extending the project message beyond the workshops.

Workshops with health staff were evaluated more rigorously, asking how the information would change their professional practice. The evaluation tool used by Upper Hume Primary Care Partnership health professionals demonstrated an extremely positive reaction, with many participants reporting a better understanding of eye care and the role of optometrists in health care. In their evaluations many indicated a desire to increase appropriate client referral to optometrists.

Table 2 shows the increase in health professional staff knowledge of vision conditions based on formal evaluation of the Caring for eyes workshop presented for Upper Hume Primary Care Partnership. The evaluation shows that the whole group (64 respondents) moved up scale from a range of different knowledge and practice starting points as a result of the workshop. The prior knowledge evaluation indicated 18 respondents with good to very good knowledge of how vision conditions affect elderly clients compared with 58 respondents reporting good/very good knowledge after the workshop.

<table>
<thead>
<tr>
<th></th>
<th>Very poor</th>
<th>Poor</th>
<th>Reasonable</th>
<th>Good</th>
<th>Very good</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prior knowledge</td>
<td>2</td>
<td>12</td>
<td>30</td>
<td>14</td>
<td>4</td>
</tr>
<tr>
<td>Post knowledge</td>
<td>0</td>
<td>1</td>
<td>5</td>
<td>33</td>
<td>25</td>
</tr>
</tbody>
</table>

In written comments as part of the evaluation, 21 respondents stated an intention to refer clients to optometrists more frequently. Typical comments included:

- Advise clients particularly those with diabetes to have regular eye checks.
- Suggest everyone over the age of forty should have an eye test every two years.
- Be very aware of vision issues re production of written info and promote regular eye checks.

The workshop evaluation by the health professionals was very positive and suggests this target group is highly responsive to the project message and is likely to change their referring patterns to ensure the best possible care for their patients. Health professionals were quick to note the importance of vision to healthy ageing and to recognise that good eye care would provide benefits to their own work and to the welfare of their patients. Health professionals were particularly able to appreciate the accessibility of optometry in the community, both physically (with 500 practices across Victoria) and financially (as optometric consultations are covered by Medicare).

A short community partners survey was developed in conjunction with the Centre for Health Program Evaluation investigating benefits in presenting joint activities with the project. The partner organisations were instrumental in convening audiences at a distance and contributed greatly to the success of the project. These organisations now have direct links with local optometrists as result of the project and evidence indicates they are using these links to improve their services to their communities. As an example, Glenelg Outreach Primary Health reported local optometrist participation in their Koori health screening initiatives as a result of the project contact.
A formal evaluation was conducted through the community partners survey form sent towards the end of the project. Returns showed that both the organisation and its clients had benefited from the vision care workshops and that there was an expectation of future benefits in the relationship with the association.

Optometrists who had participated in workshops were also surveyed to obtain their perspectives on improving project materials. A number of changes were made to the resources to improve utility and take advantage of members’ experience.

These multiple perspectives were integrated into the final project evaluation report and were used in refining the project’s resources for ongoing use by optometrists.

**SUSTAINABILITY**

See to the Future has enabled optometrists throughout Victoria to become skilled in presenting health promotion workshops.

Through the project activity these optometrists have been put in touch with local partner organisations that have indicated the desire to establish ongoing relationships.

The PowerPoint presentation *Caring for eyes* is available on CD-ROM from the association. It is available on the association web site (at [www.vicoptom.asn.au](http://www.vicoptom.asn.au)) and will also form part of the CD-ROM distributed at the Southern Regional Congress 2003. *Caring for eyes* is useful for a wide range of audiences and is a major transferable resource now available to all health professionals and community groups.

**RESULTS**

The project had three main target audiences—optometrists and other health professionals, partner organisations and older people living in rural Victoria. Optometrist interest in the project remained high throughout, with many optometrists taking the opportunity to promote eye health in their communities in a supported environment. We have worked well with a number of partner organisations, increasing awareness of good eye health and attracting audiences for health promotion work. Older Victorians, to whom the presentations were directed, have been responsive and inquisitive. Maintaining some strategies beyond the life of the project will ensure that information on vision care is delivered to more people throughout Victoria.

The project has been quite successful given the modest cost to government. There has been direct education in vision care for around 350 elderly Victorians. There are more health professionals now referring clients to optometrists more frequently, taking advantage of the services already available in the community. The tried and tested powerpoint presentation on vision conditions is now available through the association web site [www.vicoptom.asn.au](http://www.vicoptom.asn.au). The Optometrists Association Victoria has built its capacity to deliver health promotion programs effectively.
SUCCESS FACTORS

The particular features of the project that were keys to success were the role of partnerships and the extent of organisational support from the Optometrists Association Victoria.

Partnerships enabled the association to leverage some modest resources into successful presentations to significant and influential audiences. The local expertise of organisations such as the Country Women’s Association and the Upper Hume Primary Care Partnership delivered much more than the association could have done on its own.

The Optometrists Association Victoria has determined there is a strong latent demand from elderly people and health care professionals for vision care information delivered by optometrists. With the support provided by the association, members are able to deliver effective health promotion in vision care throughout Victoria.

See to the Future demonstrates that quality health promotion is valuable to a range of audiences. Further, the Optometrists Association Victoria has used See to the Future as an example of organisational change directed at increasing the profession’s focus on public health, ensuring that the health promotion messages are delivered as part of a broader health promotion strategy. Integrating See to the Future with the aims and objectives of the organisation has been a key success factor.

CONCLUSIONS

Health promotion to rural elderly is effectively achieved by local optometrists delivering vision care workshops, enhanced by:

- Optometrists Association Victoria support
- working in association with local community and health provider organisations.

RECOMMENDATIONS

The See to the Future project demonstrated some clear lessons applicable to public health delivery in regional Victoria. Many of these lessons are likely to have wider utility across rural, regional and remote Australia. Further, the project demonstrated a specific need for eye health education in regional Victoria. The authors recommend that:

- the National Rural Health Alliance recognise the importance of visual health to the communities it represents, and seeks greater emphasis on visual health awareness from its members, communities and governments
- public health campaigns be planned to take fullest advantage of local knowledge and local services
- all health care workers, community advocates and other friends of the National Rural Health Alliance consider the role of partnerships in successful health promotion.
**PRESENTER**

**Ben Harris** is an economist by training, with a long history in health policy including rural health, health promotion, legislation and workforce.

Ben has been Executive Director of the Optometrists Association Victoria since October 2001. Ben’s key achievements include collaborations with Vision 2020 Australia and its partners to attract funding for the *Victorian Vision Initiative*, public health initiatives such as See to the Future (a program promoting eye care to older people living in rural and regional Victoria) and the association’s Children’s Vision campaign. Further, Ben has been heavily involved in continuing education, managing Australia’s largest ever gathering of optometrists, the *Southern Regional Congress*, in May 2002.

Prior to working with the Optometrists Association Victoria, Ben spent 20 months with the National Competition Council examining health practitioner legislation and insurance issues.

Ben was adviser to the Hon Dr Michael Wooldridge, Minister for Health and Ageing, from July 1997 to December 1999. Ben’s key achievements include the “Let’s Work Together To Beat Measles” campaign, the Regional Health Services program, working with the states to utilise overseas trained doctors in rural Australia and working with the (then) Department of Health and Aged Care to ensure rural health was recognised as a key priority area for the Federal Government Budget.

Prior to working with the Federal Minister, Ben worked for the Commonwealth Department of Health from May 1994, working in information services, general practice and Medicare.

Ben is well respected in rural health circles, having promoted rural health heavily with the Commonwealth Government, travelled widely across rural and regional Australia and maintained support once leaving Commonwealth employment. Ben is a member of the Friends of the National Rural Health Alliance.

In addition to his employment at the Optometrists Association Victoria, Ben is vice-president of the Australian Federation of AIDS Organisations and a director of Andrology Australia, the Australian Centre of Excellence in Male Reproductive Health.