ONESIGHT
EssilorLuxottica Foundation

ADVOCACY FACT SHEET

Poland Overview

1. **Prevalence of Visual Impairment**: In 2020, 13.4% of Poland's population experienced visual impairment, indicating a significant need for vision care services. There is also a need for further research to ascertain the prevalence of uncorrected refractive error.
2. **Challenges in Accessing Regular Eye Examinations**: Despite UHC, a substantial percentage of adults in Poland do not undergo regular eye examinations, with factors such as lack of awareness or access, and long waiting times, underscoring the importance of promoting eye health awareness and improving accessibility to eye care services. Ukrainian refugees, about 2.5% of the population, also face similar hurdles, in addition to barriers in language, and awareness of the availability and access to services.
3. **Disparities in Access to Vision Care:** Disparities exist in access to specialized eye care services between urban and rural areas in Poland, highlighting the need for policies aimed at addressing geographical, infrastructural and service-related barriers to ensure equitable access to vision care for all residents.

The Global State of Vision

The World Health Organization (WHO) recognizes uncorrected refractive error (URE) as **the primary cause of vision impairment** (VI), **the second cause of blindness**, and **the largest unaddressed disability worldwide**.[1]

Globally, 2.7 billion or 1 in 3 people live with poor vision caused by URE[2] (URE includes myopia, hyperopia, astigmatism and presbyopia. It results in reduced visual acuity, leading to blurred vision and, when severe, visual impairment).[3]

Vision impairment costs the global economy **US$411 billion** in yearly **productivity losses**.[4]

Without action, half the global population, roughly **4.8 billion,** is set to have a VI, primarily myopia, by **2050.**[4]

Over 90% of VI cases **are preventable**, and/or **treatable** with existing, cost-effective interventions.[4] Globally, only 36% of people with distance VI due to refractive error have access to the appropriate care they need.[5]

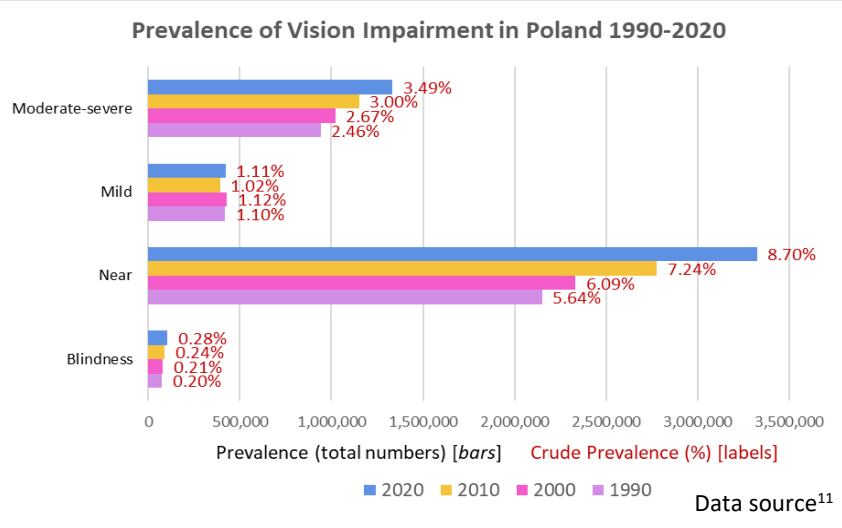
40% eREC

With this baseline (36%), the 74th World Health Assembly (WHA) endorsed a global target for a **40% increase in effective coverage of refractive errors (eREC)** by 2030.[6]

The **WHO SPECS 2030 Initiative**[7], building on WHA[8]/UNGA[9] resolutions and particularly the eREC target, assists countries and stakeholders in addressing the unmet need for spectacles while ensuring the delivery of quality eye care.

Vision Needs in Poland

- In 2020, among Poland's 37.9 million population[10], 13.4% (5,080,110 individuals) experienced visual impairment, including near-, mild-, and moderate-severe visual impairment.[11] URE-specific prevalence data is presently unavailable.



- In a 2015 study, among 1107 Polish adults (35 years and older), visual impairment and blindness was found in 27.5% of subjects in the worse-seeing eye. Appropriate refractive correction improved visual acuity in 75% of subjects with visual impairment.[12]
- A 2022 survey showed a significant percentage of adults in Poland do not have regular eye examinations. Only 31,6% of respondents had an eye examination in the last 12 months, 13.9% in the last 1–2 years, 24.1% more than 2 years ago but not more than 3 years ago, and **7.1% declared that they had never had an eye examination**. Wearing spectacles or lenses and self-reported knowledge of eye diseases were significantly associated with higher odds of eye examinations in the last 12 months or 2 years.[13]
- The estimated attendance of vision screening before the age of 7 years is 70%. The estimated percentage of compliance with referral after an abnormal screening test result is 95%. The vision screening program is not embedded into a general preventative child healthcare screening system. The programme started in 1980's and has not been changed since its implementation.[14]

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Vision Care in Poland

- The health system in Poland comprises both public and private healthcare providers. Nearly **94% of Poland's population has public health coverage**[15], covered by the Ministry of Health and National Health Fund (NFZ), by way of mandatory health insurance contributions deducted from salaries and employer contributions. Citizens contributing have **universal health coverage**, including medical consultations, hospital treatment, diagnostic tests, and medications. [16]
- 72% of spending is covered by mandatory prepayment though, with 20% out-of-pocket health spending. However, **only 51%** of people were **satisfied** with the availability of quality healthcare.[15] Patients are referred to specialists for further care, covered individually or via private health insurance.
- The government's health expenditure was an average of USD 1643 per capita. Citizens bore their own medical expenses at the level of USD 646 per year. The **high level of the citizens' own health expenditure** may result from the lack of financing of some services.[17] Poland also has a lower density of doctors (3.4 doctors per 1000) and nurses (5.7 per 1000) than most EU countries.[15] Despite efforts to shift to community care, spending on curative care is one of the highest in the EU, as compared to health promotion and preventative care,. National publicly-financed health policy initiatives have been implemented to reduce differences in these areas,[18] implemented by the District Sanitary and Epidemiological Station in Świnoujściu.[19]
- Eye care services are not provided by primary care physicians[20], but patients can be provided with **referrals** to public or private **optometrists or ophthalmologists**, who offer specialized eye care services, including eye examinations, refractive series, surgeries and treatments, in public hospitals and private practices and clinics[21]. Vision specialists are usually **not located in rural areas**, where 40% of Poles live.[11] Spectacles may be **partially or fully reimbursed** by NFZ for **children** and for those with **certain eye conditions** only, and would require out-of-pocket payment or private health insurance coverage for others, such as those with URE conditions.[22]
- No. of **optometrists**: 1,500, Optometrists per million: 39.6, Ranked 61 of 159 globally (as of 2020)[11]
- No. of **ophthalmologists**: 4,565, Ophthalmologists per million: 118.2, Ranked 7 of 191 globally (as of 2015)[11]
- In Poland, ensuring the visual health of children is a priority. The Polish government, through the Ministry of Health, allocates resources and support for initiatives aimed at improving **children's vision health**. This includes funding for school vision screening programs, training for healthcare professionals involved in pediatric eye care, and subsidies for families to access vision care services for their children.[23,24]
- **Refugees** and asylum seekers, including those from Ukraine, have **access to all public health services**, covered by the NFZ.[25,26] Vision needs would be met in the same manner as they are for Polish citizens. [21] There are nearly **1** million Ukrainian refugees in Poland, making up about **2.5% of the Polish resident population**.[27] A stateless person or a refugee can apply for an EHIC (European Health Insurance Card).[28] Attention was given from the optometry sector for refugees' health needs, as of 2022.[29] An IOM survey however showed that many refugees incurred expenses from health or medical expenses.[30] There are **hurdles in refugees accessing care** including language barriers, long wait times, and lack of knowledge on access to services.[31] Efforts have been underway to expand services to ensure access.[32]
- **Access to healthcare** in Poland is influenced by factors like geography and socioeconomic status, with disparities existing between urban and rural areas in access to specialized healthcare services, but even primary care in some areas. Despite improvements, challenges remain such as long wait times for specialist care and elective procedures, and unmet increasing demand for care.

Action and Policy

- The Ministry of Health in Poland oversees healthcare policy and regulation, including those related to eye health, and operates the National Programme for the Prevention of Blindness and Visual Impairment[33]. Professional bodies governing eye care include Polish Optometric Association – PTOO (engages in educational initiatives and campaigns, advances optometry practice)[34], The Polish Ophthalmological Society - PTO (sets standards of practice, promotes research and education in ophthalmology, advocates for policies in eye health)[35], and the National Consultant in Ophthalmology (a medical expert appointed by the Ministry of Health to provide guidance on matters related to eye health at the national level)[36].
- NGOs such as Polish Association of the Blind[37] and the Poland arm of The International Council for Education and Rehabilitation of People with Visual Impairment[38] promote eye health awareness, provide support services to individuals with vision impairment, and advocate for policies to improve access to vision care. Research and academic organizations conduct studies to monitor prevalence.
- Poland's national Recovery and Resilience Plan targets significant investment for the health system, focusing on hospital reform and restructuring, digital health expansion, and health workforce strengthening.[16] The national strategy of the National Health Fund is also developing a model of appointment registration to manage queues, and allocating funds to services where the wait is longest.[39]
- The OneSight EssilorLuxottica Foundation aims to eliminate uncorrected poor vision in a generation, and strives to establish eye clinics and vision care services in underserved and in-need communities, while leveraging the expertise of eye care professionals and partnerships with local organizations.
- **Focus areas going forward must include: (1) Integration of screening programs for children into school health programs, recommended by experts from the Polish Ophthalmic and Pediatric Society, (2) Ensuring access to vision in underserved areas via public health access and policy reform, (3) Public education and awareness on the importance of vision care, (4) improving issues of waiting time and high demand.** Poland can thus enhance the provision of heath and vision care, and improve quality of life for its population.

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