The Fred Hollows Foundation NZ

Litmus

Briefing: Strengthening Pacific eye health systems

The value and achievements of the MFAT-Fred Hollows Foundation NZ five-year partnership

Briefing paper purpose

This briefing paper draws on the full independent evaluation report to summarise the value, achievements and sustainability challenges of the MFAT–FHFNZ five-year partnership, drawing on an independent evaluation commissioned by The Fred Hollows Foundation NZ (FHFNZ) and conducted by Litmus between April and August 2026. It is intended to inform decisions by MFAT, FHFNZ, MFAT Posts and Pacific partner governments about how to sustain gains and shape the next phase of investment.

The evaluation assessed contribution across the six WHO health-system building blocks and the OECD Development Assistance Committee (DAC) criteria, drawing on programme documents, monitoring data and interviews with 60 stakeholders.

The challenge

Avoidable blindness and vision impairment remain significant and inequitable challenges across the Pacific. Cataract and uncorrected refractive error are major causes. Diabetes, population ageing, limited specialist workforces, geographic dispersion and fragile health systems add pressure.

The successful partnership response

MFAT-FHFNZ'S five-year Outcomes Arrangement (2022-2027) supports Pacific governments to strengthen locally led eye-care systems. MFAT contributes NZD 7.5 million to this Pacific Programme. The Programme works directly in ten Pacific countries and provides training and support to five others.

Over the past four years, the partnership has strengthened workforce capability, expanded access to services, generated evidence for planning and investment, and supported stronger Pacific leadership. These gains demonstrate substantial system progress. Their long-term value now depends on stronger local ownership, recurrent financing and enabling systems.

108 graduates	318 outreaches	172,000+ consultations	14,000+ surgeries
Including 65 women	Activities supported	Eye-care consultations	Surgeries delivered

The partnership successfully combines MFAT's strategic backing, credibility and flexible long-term funding with FHFNZ's technical expertise, regional relationships and implementation capability.

"There was a shift from being a negotiated relationship... to one of accompaniment."
– FHFNZ stakeholder

What the Partnership has Achieved

Mutually reinforcing system change

The strongest results come from connecting investments across the health system. Workforce development supports local delivery and outreach. Research services generate evidence, which informs planning, advocacy and investment and reinforces further system improvement.



1. A stronger Pacific workforce

A sustainable regional training pipeline is established for eye care nurses and ophthalmologists thereby strengthening the capability, localisation and diversity of the Pacific eye health workforce.



2. More care delivered closer to people

Workforce development, outreach, stronger referral pathways and improved clinical governance have expanded access, improved quality and enabled more care to be delivered locally.



3. Better quality and continuity

Supervision, workplace-based assessment, mentoring and audit are strengthening competence, patient safety, referrals and follow-up.



4. A stronger evidence base

RAAB surveys, situational analyses and programme data increasingly inform planning, workforce decisions and investment.



5. Expanded clinical capability

Investments in equipment, diagnostic technologies, consumables and infrastructure have enabled service delivery and expanded specialist capability. Maintenance and reliable supply remain risks.



6. Stronger leadership and governance

National plans, coordination roles, Ministry engagement and PacEYES strengthen visibility and Pacific leadership. Financing remains a key risk, with many countries reliant on external funding for critical recurrent costs.

"When I first joined ... we had around 400-plus cataract backlog here. By 2023, we almost cleared up that backlog." – FHFNZ stakeholder



Overall Evaluative Judgements

Strong results, with sustainability still developing

Relevance | HIGH
Strong alignment with Pacific needs, national priorities, workforce shortages and remote access challenges.

Coherence | HIGH
Workforce, service delivery, evidence, equipment and governance investments are mutually reinforcing.

Effectiveness | HIGH
Substantial results across workforce capability, access, quality, leadership and evidence use.

Efficiency | MODERATE
Flexible integrated delivery adds value. Geography, logistics, small populations and outreach costs constrain efficiency.

Sustainability | MODERATE
Ownership and planning are strengthening. Recurrent financing, workforce absorption, procurement and maintenance remain uneven.

Impact | NOT YET ASSESSABLE
Evidence demonstrates system-level change. However, it does not yet show whether these gains have reduced avoidable blindness and vision impairment at population level.

The overall judgement is positive and qualified. The partnership has built substantial capability and strengthened eye health systems. Long-term value depends on whether Pacific governments and regional institutions can progressively lead, finance and account for these gains.

Looking ahead: From building capability to embedding it

1. Sustainable Pacific ownership
Agree country transition pathways that clarify governance, implementation, accountability and financing responsibilities. Tailor milestones to system maturity.

2. Sustain and strengthen workforce
Continue training and scholarships, with stronger attention to funded positions, retention, deployment, supervision, succession and advanced capability.

3. Better quality and continuity
Invest in procurement, supply chains, maintenance, infrastructure planning, clinical governance, information systems and recurrent service costs.

4. Demonstrate long-term outcomes
Strengthen routine outcome and equity monitoring to determine whether system gains reduce avoidable blindness and vision impairment, for whom, and in which settings.

"FHFNZ's greatest strength is its commitment to working through local systems and communities, ensuring that capacity, leadership, and services remain in-country long after external funding ends." – Pacific clinician



Country Level Feedback

Pacific countries are at different stages in developing sustainable eye health systems. Progress is shaped by local leadership, governance, workforce capability and system maturity. Recurrent financing, workforce absorption, infrastructure and access in remote settings remain the main constraints. Future support needs to continue to use country-specific transition pathways.



Fiji

Regional centre of excellence requiring stronger institutional ownership

Fiji is the regional workforce hub through Pacific Eye Institute. Training, mentoring, research and specialist capability are strong. The priority is to clarify how Pacific Eye Institute and regional functions will be governed, owned and financed for the long term.

Next focus: Formalise governance and financing. Sustain specialist training. Expand quality-assured satellite training.

Vanuatu

Growing government ownership

National planning and a government-funded coordination role signal stronger Ministry leadership. Surgical services, backlog reduction, outreach, workforce and evidence use have strengthened.

Next focus: Embed eye health in routine plans and budgets. Maintain workforce support and equitable outreach.

Samoa

Moving towards institutionalised and locally led

A National Eye Plan, coordination, district services and a growing workforce embed eye health in government systems. Infrastructure, equipment and referrals have not kept pace with these gains.

Next focus: Invest in district facilities, equipment and referrals. Strengthen prevention, succession and financing.



Papua New Guinea

Building the foundations of a national eye health system

Papua New Guinea has moved towards system building through institutionalised training, leadership, outreach, governance and university-government partnerships. Realising the value of the Centre for Eye Health now depends on sustained staffing, equipment, consumables and recurrent finance.

Next focus: Match infrastructure with funded operations. Strengthen provincial services. Embed supplies in government systems. Expand quality-assured satellite training.

Solomon Islands

A mature system moving towards greater self-reliance

National planning and a government-funded coordination role signal stronger Ministry leadership. Surgical services, backlog reduction, outreach, workforce and evidence use have strengthened.

Next focus: Embed eye health in routine plans and budgets. Maintain workforce support and equitable outreach.

Tonga

Strengthening local capability and integration

A stronger workforce, systematic outreach and a National Eye Care Plan extend services to outer islands. Dependence on a single practising ophthalmologist leaves service continuity and succession vulnerable.

Next focus: Prioritise succession, workforce resilience and infrastructure. Implement the national plan.

"Everyone's at a slightly different stage of that journey. The pace of change is very dependent on countries' tools." – FHFNZ stakeholder



A regional model is essential for small island states

Full national self-sufficiency may not be realistic or cost-effective in every setting. In smaller Pacific countries, sustainable eye care is likely to combine stronger national ownership with shared regional training, referral networks, outreach, visiting specialist support and targeted external assistance.

GEDSI

Growing commitment to equitable access and inclusion

The Programme has increasingly integrated GEDSI considerations through outreach, workforce development and efforts to reach underserved populations. Stronger data and monitoring are now needed to better understand outcomes for women, disabled people, remote communities, and other underserved groups, and to inform future action.

Next focus: Strengthen GEDSI data and monitoring. Deepen understanding of barriers to access. Continue targeting underserved populations.

Partnership Proposition

The next phase should sustain proven approaches, strengthen system capability and resilience, and support Pacific governments and institutions to progressively lead, finance and account for quality eye care. Continued partnership is most valuable where it enables locally led systems and targeted regional support.