



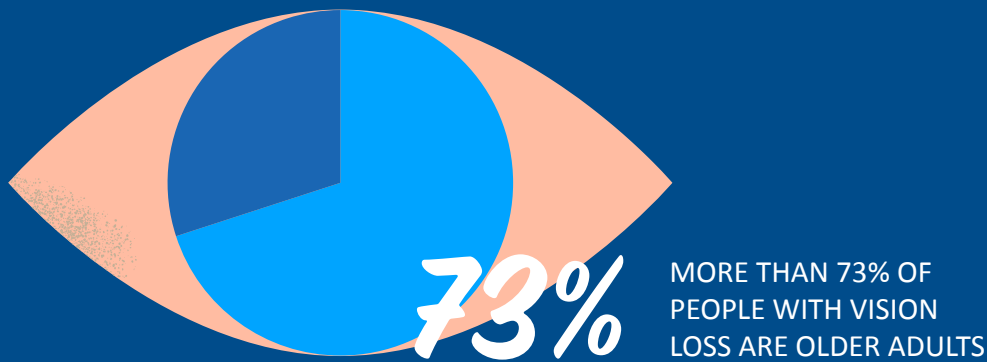
ADVOCACY BRIEF:

Achieving a Life Course of Healthy Vision





More than 2.2 billion people worldwide have a visual impairment or vision loss, and this number is poised to grow because the risk increases with age.¹ The majority of eye diseases are most prevalent in older adults and, if detected early, can be treated or their progression can be slowed significantly. In fact, more than 73% of people with vision loss are older adults.² Over 90% of vision impairment worldwide is avoidable.³ However, an estimated 802 million older people across the world are living with preventable vision loss but have no access to eye care.⁴



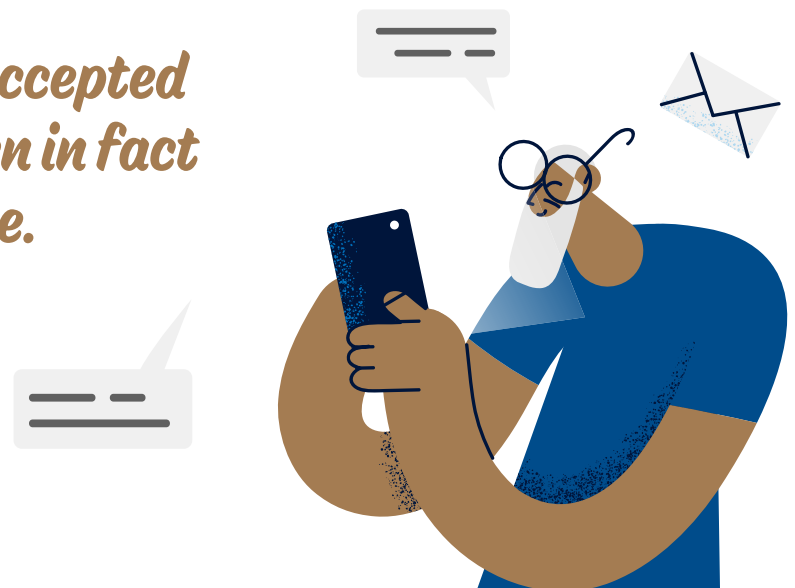
Improving access to high quality and affordable eye care is a key element to ensure that older adults can have a “positive impact on the labour market, employment rates and our social protection systems, and on the growth and productivity of the economy.”⁵ Without the ability to see, older adults may also struggle to engage socially and stay in paid and unpaid employment. Vision loss impacts a person’s functional ability and they are more likely to suffer depression,⁶ exclusion and die earlier. The importance of eye health is a fundamental precondition to quality of life that needs to be acknowledged in all relevant policies.

The importance of vision and eye health for healthy ageing

Eye conditions and visual impairment pose a significant personal and societal burden. Surveys have shown that people fear losing their vision more than any other sense, and the loss of vision and independence leads to a significant decrease in quality of life.⁷ Further, those with preventable vision loss become reliant on a care system, resulting in considerable and avoidable costs on health and social care and in lost productivity. Investment across a life course to ensure healthy vision represents only a fraction of those losses and would yield substantial economic and social returns.⁸

All too often, false assumptions are made about ageing: vision loss is accepted as normal when in fact it should not be. More needs to be done to improve understanding about the importance of vision and about eye health across a person's life course. This requires education and awareness-raising, not only among older adults, but also with carers and other health professionals in the field.

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Increased risk of mortality and health conditions

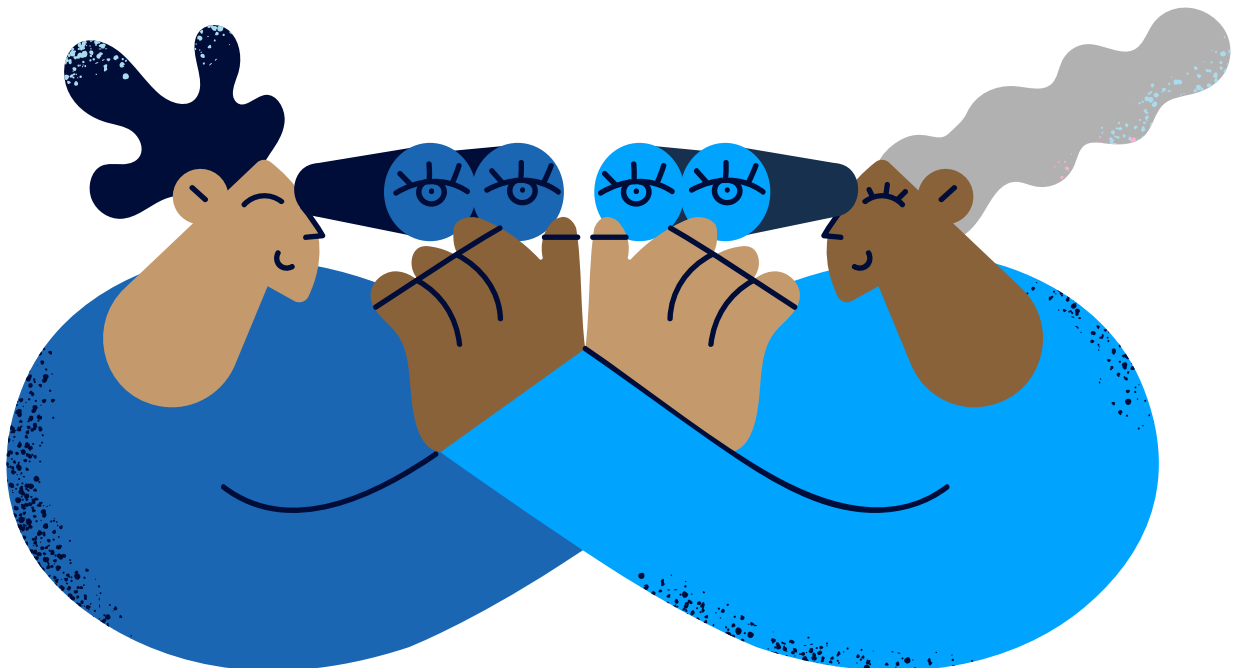
It is often assumed that while affecting quality of life, visual impairment and blindness do not affect lifespan. However, the recently published Lancet Global Health Commission on Global Eye Health found that those with poor eye health have a 2.6 times increased risk of mortality.⁹ Vision impairment causes or exacerbates other conditions, either directly, for example with injuries from falls or road traffic accidents, or indirectly, through reduced access to healthcare, limitations in physical activity or increased social isolation.

People with impaired vision are also at increased risk of other health conditions such as dementia. According to the WHO, there are 50 million dementia cases worldwide with 10 million new cases every year.¹⁰ Studies have shown that maintaining good vision can help dementia patients to stay connected with the world around them, stay stimulated and independent for longer.¹¹



Vision impairment is also a predictor of falls common in older adults, leading to admission to acute care settings and then premature entry into long-term care facilities.¹² While falls in older adults are multifactorial, there is clear evidence that they are associated with well-defined intrinsic and/or extrinsic factors, some of which can be minimised through targeted interventions to reduce the risk of falls. The European Council of Optometry and Optics (ECOO) has published guidelines for the special management of older adults in optical and optometric practices to help minimise the risk of falls.¹³

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An eye check is more than just a vision check

Raising awareness of eye health and the promotion of regular eye checks must be driven by public policy. An eye examination does not just check vision, it is also a healthcare check. The back of the eye is the only part of the body where blood vessels can be assessed through visual inspection and without an invasive procedure. Diabetes, hypertension, and neurological conditions such as dementia and multiple sclerosis can be detected through an eye exam.¹⁴



Extending access to care and bolstering provider capacity

The barriers to access eye care services are many, but poor awareness about the availability of services and cost of services and devices rank high. Older adults tend to use eye care services less frequently, often considering a reduction in vision as part of normal ageing and being unaware that many conditions can be treated or that rehabilitation may improve their functioning. Cost varies in both the setting and the nature of the treatment, for example treating cataracts or diabetic retinopathy, the costs combined with the lack of sufficient information about the benefits may result in lack of willingness to pay.

Provider capacity also poses a barrier to care. There is inequitable distribution and a significant shortfall in the current and projected number of ophthalmologists globally. Critical human resource shortages have also been identified for optometrists and other allied personnel, such as opticians, refractionists, orthoptists, ophthalmic assistants and ophthalmic nurses. Several of these are the key professional groups involved in the management of refractive error worldwide. Due to this serious shortage of specialists, allied ophthalmic personnel play a major role in the provision of a broad range of eye care services, particularly in low- and middle-income countries, and at primary healthcare (PHC) level. In Sub-Saharan Africa, for instance, there are between 1.1 and 4.4 ophthalmologists per million population compared to 80 ophthalmologists per million in higher income countries.¹⁵

Further, the WHO World Report on Vision¹⁶ states that the optometric profession is still not recognised in many countries, notwithstanding the progress made on the training standards for optometrists, optometric technicians and optical technicians. Indeed, even in many developed countries there can be delays and rationing of essential eye care, due to personnel shortages, and these delays have been exacerbated by the COVID-19 pandemic.

The report points out that the lack of accredited professionals to carry out independent eye care services could lead to decreased productivity. This will have an obvious effect on the access to quality eye care and should be actively addressed in guidance and promotion activities by the WHO. Developing and deploying new technologies, using those already widely available such as smart-phones, and empowering and engaging an array of healthcare professionals to provide needed eye care offer important and accessible solutions. The WHO should also support and encourage health professions to work collaboratively in the best interests of patients.

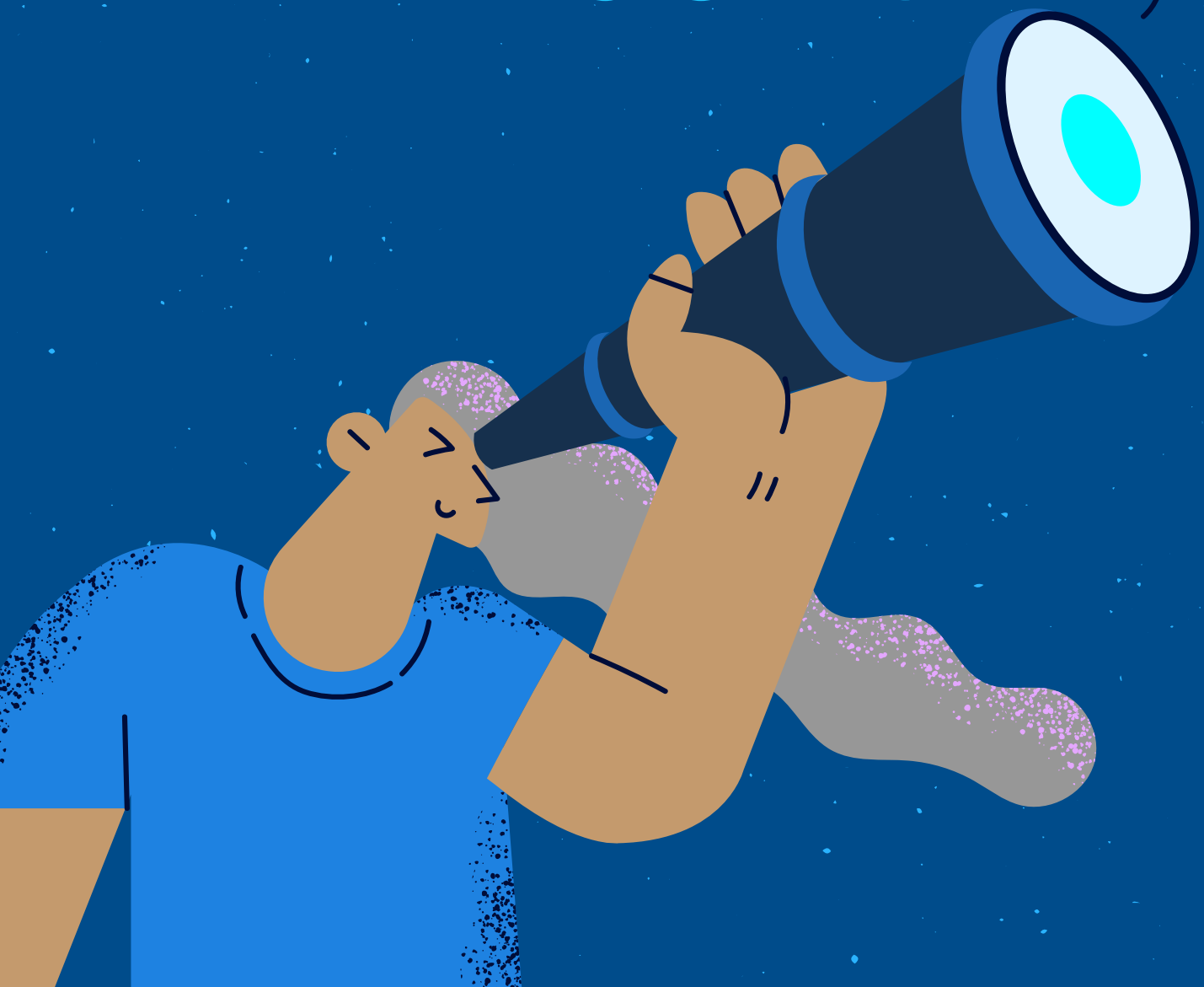


Call for action

As part of the agenda for healthy ageing, advocates and stakeholders across the vision and ageing communities must collaborate and communicate to policymakers and the public the importance of good vision and eye health to healthy ageing. Advocates and stakeholders must call upon governments across the world to consistently incorporate vision and eye health across all ages, including older adults, into relevant policy initiatives and commit to implementation.



Policy windows



01. United Nations resolution 73/310 Vision for Everyone: accelerating action to achieve the Sustainable Development Goals

The recent United Nations resolution on Vision for Everyone: accelerating action to achieve the Sustainable Development Goals, 2021 offers a remarkable opportunity to intensify work towards eye care for the ageing population. The resolution recognises the contribution of good eye health to the achievement of the Sustainable Development Goals, particularly the goals on poverty reduction, decent work and reducing inequalities. It also recognises the importance of the United Nations Decade of Healthy Ageing (2021–2030) and stresses the need to ensure that issues of relevance to older persons, including an increased risk of vision loss, are taken into account in the implementation of the 2030 Agenda.

The resolution calls on every member country to ensure access to eye care services for their population. It also encourages countries to adopt a whole of government approach to eye care, and the importance of building synergies with other development priorities and strengthening their collaboration with academia, research institutions, the scientific community, civil society and the private sector.

02. World Health Organization World Report on Vision 2019

The WHO World Report on Vision launched in 2019 provides the strategic framework for the integration of eye care in health systems. The report stresses the need for eye health to be a core element of Universal Health Coverage. Its key proposal is for all countries to provide integrated people-centred eye care services (IPEC). The IPEC approach seeks to ensure that people receive a continuum of eye care based on their individual needs throughout the lifecourse.

The report recommends the coordination of eye care services in all relevant programs such as diabetes, ageing and across all sectors of community, including older adults.

03. World Health Assembly resolution 73.4 Integrated People-centred Eye Care, including preventable vision impairment and blindness

The World Health Assembly (WHA) resolution 73.4 adopted in 2020 provided a global commitment to the World Report on Vision agenda. Integrated People-centred Eye Care is delivering services and ensuring that people can receive eye care services that address full spectrum of eye conditions according to people's need throughout their life course.

The resolution recognised that global eye care needs are expected to rise substantially in coming decades due to population ageing. The resolution calls on countries to take action on age related eye conditions such as cataract, glaucoma, diabetic retinopathy, uncorrected refractive error and age-related macular degeneration in the coming decade.

04. UN Decade of Healthy Ageing

The United Nations (UN) declared the years 2021 to 2030 to be the Decade of Healthy Ageing. The Decade establishes a framework and global call to action for member states to meet healthy ageing goals, aligned to the Sustainable Development Goals, in four key action areas: Age-friendly Environments, Combatting Ageism, Integrated Care, and Long-term Care. Member states are encouraged to collect and share data, implement and adapt plans, and develop progress reports in advance of the first Decade of Healthy Ageing progress report in 2023. Vision health spans all four of the Decade action areas, and member states have an opportunity to ensure that vision health is embedded within all of their Decade activities, data, and reports.

05. WHO's Integrated Care of Older People (ICOPE)

The WHA resolution 75/131 on United Nations Decade of Health Ageing (2021–2030) has emphasized the need of all kinds of health services—promotive, preventive, curative, rehabilitative and palliative care for healthy ageing.

The WHO's guiding document on Integrated Care of Older People, *ICOPE: Guidance on person-centred assessment and pathways in primary care* published in 2019 and implementation set out in 2020–21 highlights the need to optimize people's intrinsic capacity and functional ability, which gradually declines with ageing.

This approach has identified assessment of vision as a critical component of person-centred assessment of older adults. The ICOPE approach on care pathways to manage visual impairment includes: vision screening; managing near sightedness, far-sightedness or presbyopia with corrective glasses; treating eye diseases; adapting to low vision; and vision rehabilitation.¹⁷

This ICOPE care pathway is in alignment with the Integrated People-centred Eye Care (IPEC). IPEC is also about providing all kinds of eye care services to people according to their need, which also covers service delivery to older adults in person-centred approach. The objective and implementation of ICOPE is bolstered by the IPEC.

06. Efforts required at country level

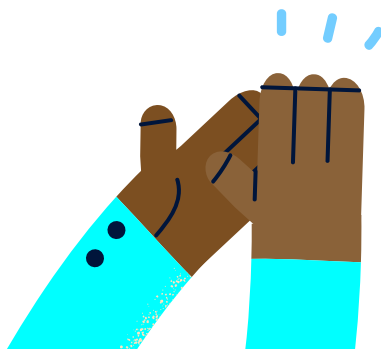
It is critical that the above global frameworks are implemented at a national level so that older adults fully understand the importance of caring for their own eye health and are able to access the eye care services they need.

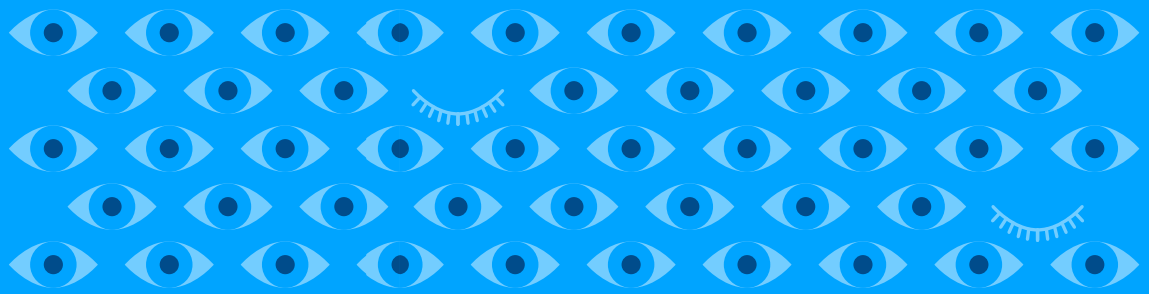
In order to do that, policy dialogues should be initiated at a national level on incorporating eye health across all sectors of health like noncommunicable diseases, care of older adults, rehabilitation. This includes, ensuring eye health is included in national health planning, health information systems, policy making, and implementation at the community level.

All relevant stakeholders need to be engaged in this process while ensuring the community voices, particularly those of older adults, are heard.

Endnotes

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The International Agency for the Prevention of Blindness (IAPB) is the overarching alliance for the global eye health sector, with more than 150 organisations in over 100 countries working together for a world where everyone has universal access to eye care. IAPB believes in a world in which no one is needlessly visually impaired, where everyone has access to the best possible standard of eye health; and where those with irreparable vision loss achieve their full potential. IAPB is working to achieve this through a new sectoral strategy: 2030 In Sight.

The International Federation on Ageing (IFA) is an international non-governmental organization (NGO) whose members are government, NGOs, academia, industry, and individuals in nearly 80 countries. IFA believes that all these members working together are essential to help shape and influence policy and good practices. IFA stands to drive the agenda for the world's population ageing. We are proud to have general consultative status at the United Nations. The International Federation on Ageing is a non-State actor in official relations with the World Health Organization (WHO).

The European Council of Optometry and Optics (ECOO) represents the interests of optometrists and opticians across Europe. ECOO's members are national professional associations from 25 countries who together represent more than 150,000 opticians and optometrists. ECOO aims to promote eye health to the public across borders and to harmonise clinical and educational standards of optometric and optical practice throughout Europe. Learn more about ECOO and its work: www.ecoo.info

The Global Coalition on Aging aims to reshape how global leaders approach and prepare for the 21st century's profound shift in population aging. GCOA uniquely brings together global corporations across industry sectors with common strategic interests in aging populations, a comprehensive and systemic understanding of aging, and an optimistic view of its impact. Through research, public policy analysis, advocacy, and strategic communications, GCOA is advancing innovative solutions and working to ensure global aging is a path to health, productivity and economic growth.

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