

Prevent Blindness
Testimony to the Senate Appropriations Subcommittee on Labor, Health and Human Services, Education, and Related Agencies
Submitted by: Jeff Todd, President & CEO, Prevent Blindness
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Prevent Blindness appreciates the opportunity to submit testimony to the Subcommittee and respectfully requests the following allocation and support in Fiscal Year (FY) 2019 to promote eye health and prevent eye disease and vision loss in the United States:

- **Provide at least \$3,300,000 to expand vision and eye health efforts at the Vision Health Initiative of the Centers for Disease Control and Prevention (CDC);**
- **Provide at least \$3,500,000 to the Health Resources and Services Administration's (HRSA) Maternal and Child Health Bureau (MCHB) to establish a children's vision and eye health programs in ten states, and a technical assistance coordinating center;**
- **Provide at least \$4,000,000 for the Glaucoma Project at CDC to allow the program to continue to improve glaucoma screening, referral, and treatment by reaching populations that experience the greatest disparity in access to glaucoma care.**

In September 2016, the National Academies of Sciences, Engineering, and Medicine (NASEM) issued its report, *"Making Eye Health a Population Health Imperative: Vision for Tomorrow,"* outlining recommendations to address vision and eye health through federal investments, coordination with states and local governments and other stakeholders, and actions to integrate vision into current public health interventions. NASEM recognizes that, for too long, vision and eye health have not received the attention and investment they warrant, especially given their importance to public health. With an aging population and rise in chronic diseases, now is the time to invest in our collective eye health.

Good vision is an integral component to health and economic well-being. Vision affects nearly all activities of daily living and impacts an individual's physical, emotional, social, and financial status. Loss of vision has a devastating impact on individuals and their families. Vision-related conditions affect people across the lifespan from refractive errors to chronic disease that warrants lifestyle changes, disease management, and adaption to treatment and rehabilitation. An estimated 80 million Americans have a potentially blinding eye disease, 3 million have low vision, more than 1 million are legally blind, and 200,000 are more severely visually blind. Vision impairment in children is a common condition that affects 5 to 10 percent of preschool age children, and is a leading cause of impaired health in childhood.

Recent research showed that the economic burden of vision loss and eye disorders is \$145 billion each year, and could rise to as much as \$717 billion by the year 2050 if we don't increase attention to vision and eye health. Alarmingly, while half of all incidents of vision impairment and blindness can be prevented through education, early detection, and treatment, the Vision Health Initiative at the Centers for Disease Control and Prevention reports that, due to a rapidly aging population and epidemic of diabetes and chronic disease, "the number of Americans with age-related eye disease and the vision impairment that results is expected to double within the next three decades."¹

¹ "The Burden of Vision Loss" Vision Health Initiative, Centers for Disease Control and Prevention, 2009 (Referenced May 31, 2018). https://www.cdc.gov/visionhealth/basic_information/vision_loss_burden.htm

Prevent Blindness – the nation’s leading non-profit, voluntary organization committed to preventing blindness and preserving sight – maintains a long-standing commitment to working with policymakers at all levels of government, organizations and individuals in the eye care and vision loss community, and other interested stakeholders to develop, advance, and implement policies and programs that prevent blindness and preserve sight.² To curtail the increasing incidence of vision loss in America, and its accompanying economic burden to the patient and our country, Prevent Blindness is requesting sustained and meaningful federal investment in programs that promote eye health and prevent eye disease, vision loss, and blindness.

We thank the Subcommittee members for working to ensure the Vision Health Initiative and Glaucoma Project at the CDC received additional investments totaling nearly \$1.2 million in the FY18 omnibus legislation. These increases are a critical first step to addressing the burden of vision impairment. However, there is much more to be done to understand the burden of vision impairment, eye diseases, and vision loss. Therefore, **we strongly urge Members of the Subcommittee to increase the Vision Health Initiative’s funding level to \$3.3 million and maintain the FY18 level of \$4 million for the Glaucoma Project at the CDC for FY19.**

Vision loss is often preventable; however, without the necessary funding to better understand eye health conditions, expand access to care, develop treatment options, and expand public health systems and infrastructure to disseminate good science and prevention strategies, millions of Americans face the loss of healthy eyesight and a potential decline of their independence, physical, social, and emotional wellbeing, and their economic livelihoods as a result of vision impairment and eye disease.

Vision and Eye Health at the CDC: Helping to Save Sight and Save Money

The CDC serves a critical role in promoting vision and eye health. Since 2003, the CDC and Prevent Blindness have collaborated, along with other partners, to create a more effective public health approach to vision loss prevention and eye health promotion. CDC has also been able to explore a few model programs to promote early detection of glaucoma. However, severely constrained financial resources have limited the CDC’s ability to take the work of the Vision Health Initiative (VHI) to the next level.

The NASEM report acknowledges the essential role of the CDC in addressing the challenges that exist for vision and eye health. This report also calls on the U.S. Department of Health and Human Services to prioritize and expand CDC’s vision and eye health program, in partnership with state-based chronic disease programs and other clinical and non-clinical stakeholders, to:

- Develop, implement, and evaluate evidence-based public health programs for the prevention of conditions leading to visual impairment;
- Develop and evaluate programs and models that facilitate access to, and utilization of, patient-centered vision care and rehabilitation services, including integration and coordination among health care providers;
- Develop and evaluate initiatives to improve environments and socioeconomic conditions that underpin good eye and vision health in communities and reduce eye health disparities;
- Develop a coordinate public health surveillance system to monitor eye and vision health in the U.S.

² For more information about Prevent Blindness and our federal government relations and public policy efforts, please visit www.preventblindness.org.

The requested FY19 resources will allow the CDC to apply previous vision and eye health research findings to develop effective prevention and early interventions, with an initial focus on early detection of diabetic retinopathy. These investments will additionally provide for much-needed and overdue surveillance work necessary to understand the range and depth of vision impairment and eye disease, and implement targeted public health interventions that allow for Americans to receive and understand the importance of caring for their vision and eyes.

Investing in the Vision of Our Nation's Most Valuable Resource: Children

In addition to acknowledging the essential, yet underfunded, role of the Vision Health Initiative at the CDC, the NASEM report committee acknowledged the HRSA-funded quality improvement work being led by the National Center for Children's Vision and Eye Health as a leading example of the importance of continuous quality improvement among diverse stakeholders in advancing eye health in the U.S. Early detection and intervention for vision problems are incorporated into national goals and health care standards. For example, Healthy People 2020 includes the following vision objectives:

- “Increase the proportion of preschool children aged 5 years and under who receive vision screening” (Objective V-1);
- “Reduce blindness and visual impairment in children and adolescents aged 17 years and under” (Objective V-20); and
- “Increase the use of personal protective eyewear in recreational activities and hazardous situations around the home among children and adolescents aged 6 to 17 years” (Objective V-6.1).

While the risk of eye disease increases after the age of 40, eye and vision problems in children are of an equal and time-sensitive concern. If left undiagnosed and untreated, eye diseases in children can lead to permanent and irreversible visual loss and/or cause problems socially, academically, and developmentally. Studies have demonstrated that optical correction of significant refractive error may be related to improved child development and school readiness.^{3,4,5} yet only 52% of children ages three through five are screened for vision problems⁶, and only one-third of all children receive eye care services before the age of six.⁷ But early detection can help prevent vision loss and blindness as many serious ocular conditions in children are treatable if identified at an early stage.

In 2009, Prevent Blindness established the National Center for Children's Vision and Eye Health (the Center). The Center is a national vision health collaborative effort aimed at developing the public health infrastructure necessary to address issues surrounding children's vision screening with funding support from a HRSA-MCHB grant opportunity. Through their

³ Ibironke JO, F. D. (2011). Child Development and Refractive Errors in Preschool Children. *Optometry and Vision Science*, 252-8.

⁴ Roch-Leveq AC, B. B. (2008). Ametropia, preschoolers' cognitive abilities, and effects of spectacle correction. *Arch Ophthalmol*, 187-98.

⁵ Atkinson J, A. S. (2002). Infant vision screening predicts failures on motor and cognitive tests up to school age. *Strabismus*, 187-98.

⁶ O'Connor, K. (2012). Overview of Health Care Access, Use, Unmet Needs and Key System Performance Measures for CSHCN by Vision Status. *Children's Vision and Eye Health Federal Intra-Agency Task Force Meeting*. Washington D.C.

⁷ “Our Vision for Children's Vision: A National Call to Action for the Advancement of Children's Vision and Eye Health, Prevent Blindness America,” Prevent Blindness America, 2008.

work, the Center has established a National Advisory Committee to provide recommendations toward national guidelines for quality improvement strategies, vision screening, and developing a continuum of children's vision and eye health. With this support the Center, will continue to:

- (1) Provide national leadership in dissemination of best practices, infrastructure development, professional education, and national vision screening guidelines that ensure a continuum of vision and eye health care focused on children ages birth to six years old;
- (2) Advance state-based performance improvement systems and screening guidelines;
- (3) Promote family education and engagement in their child's vision health; and
- (4) Provide technical assistance to states in the implementation of strategies for vision screening, establishment of quality improvement measures, and promotion of state-to-state sharing of promising practices.

The National Survey of Children's Health for 2016-2017, which included questions pertaining to children's vision screening, revealed important information on the rate that children's vision is being conducted by age, site, state, socioeconomic status, child health status, and other barriers to eye care as well as important trends to consider in terms of the eye care workforce, access to eye care providers in community health centers, and disparities in access to eye care between rural and urban communities, income levels, and other factors. While there are some existing regulations related to the vision of school aged children in 2/3 of the states, only 34% of U.S. states address the vision health of children younger than 5 years old. Currently, there is a lack of data on the proportion of children screened, and there is no effective system to ensure that children who fail screenings ultimately access appropriate comprehensive eye examinations and follow-up care.

To address this issue, our request for a \$3.5 million program would establish within MCHB-HRSA a 10 state grant system for states and local governments needing technical assistance with setting up children's vision screenings and eye health programs as well as coordinate programmatic efforts across federal agencies. In the first year of this program the MCHB would award up to 10 competitive grants to states and territories and fund technical assistance, allowing for the opportunity to identify and develop resources as a part of vision health outreach and awareness. We believe that the appropriation would integrate vision into a holistic approach for children's health given the essential role that healthy vision plays in school readiness and learning as well as other developmental areas. We ask for the Subcommittee's support of our request.

Conclusion

On behalf of Prevent Blindness, our Board of Directors, and the millions of people at risk for vision loss and eye disease, we thank you for the opportunity to submit written testimony regarding FY19 funding for the CDC's Vision Health Initiative and Glaucoma Project, and the MCHB at HRSA in support of the work of the National Center for Children's Vision and Eye Health. Please know that Prevent Blindness stands ready to work with the Subcommittee and other Members of Congress to advance policies that will prevent blindness and preserve sight.