Overview of Prevent Blindness Issue Brief – Vision Loss and Mental Health: Key Takeaways from an Interprofessional Task Force

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“Mental health is a state of well-being in which an individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and is able to make a contribution to his or her community.”
The Prevent Blindness Mental Health Task Force

• Hatched from the ASPECT program
• Comprised of about 20 individuals, including patients with a variety of eye conditions, parents, ophthalmologists, optometrists, peer counselors, psychologists, social workers, and vision rehabilitation specialists.
• Four focus group meetings conducted in June 2022
• Issue Brief, published in June 2023, summarizes the findings and is geared towards policy makers, providers, professionals, and program personnel.
Focus group questions

Questions for first meeting:
1) In what ways does vision loss affect mental health?
2) What gets in the way of providers asking patients, with vision impairment, about their mental health? What are the barriers?

Question for second meeting:
1) From your perspective, what are the top 2-3 things providers could do to help reduce psychological distress among patients with vision loss
   a. At time of diagnosis
   b. Beyond diagnosis
   c. What resources would be helpful for providers to know about?
   d. How can a referral to low vision therapy improve a patient's mental health?
   e. How can a mental health or psychiatric referral be helpful?
   f. How might incorporating a 2-question depression screening tool into the electronic health record be helpful?
Focus group questions

Questions for third meeting:
1) From your perspective, what are the top 2-3 things patients can do to help reduce psychological distress?
   a. At the time of diagnosis
   b. Beyond diagnosis
2) What resources would be helpful for patients given a new vision threatening diagnosis?

Question for fourth meeting:
1) How are the mental health needs different between individuals born with vision loss versus those who lose sight later in life?
   a. How should we tailor our resources to meet the needs of both types of patients?
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<tr>
<th>Key Barriers</th>
<th>Description</th>
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<td>Awareness</td>
<td>Eye care providers may not be informed of local or national mental health resources, or have a referral network in place</td>
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<td>Limited Time</td>
<td>Insufficient time to ask about or address mental health concerns</td>
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<td>Shortage of Trained Providers</td>
<td>Specifically, mental health providers who have expertise or special training in counseling those with vision impairment or blindness</td>
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<td>Stigma</td>
<td>Exists at individual, provider, and public levels which can impact help-seeking and referrals to mental health providers</td>
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<td>Lack of referrals</td>
<td>There are insufficient referrals to vision rehabilitation. There may be a reluctance from either the eye care provider or patient to accept that medical treatment will no longer be helpful, and that vision rehabilitation would be equally beneficial, even during the medical treatment phase, as vision loss is experienced</td>
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Key Takeaways: Intersection of Vision Loss and Mental Health

- Change or loss of identity
- Loss of independence
- Emotions, tracking, and recall
- Grief and coping
• **Change or loss of identity:** Individuals who develop vision loss and blindness in adulthood might not be able to do the things they once did, or at least not in the same way and that involves loss and often a shift in identity.

• **Loss of independence:** Acute depression and anxiety among those with vision loss and blindness is often a reflection of losing independence and adjusting to new life circumstances. Therefore, it is important to consider resources that might help patients safely re-gain their independence and self-efficacy.
• **Emotions, tracking, and recall:** Patients may not initially grasp all the information during an office visit when a new diagnosis is made. A flood of emotions (such as shock, fear, devastation, anxiety, anger, and loss) may interfere with remembering medical information. Patients will benefit from a bit of extra time to engage in both emotional and cognitive processing.

• **Grief and coping:** Anticipatory grief or anxiety related to gradual vision loss is different than a possible life-threatening situation sometimes associated with sudden traumatic vision loss, and different still from grief that sometimes accompanies inherited or congenital eye conditions. No matter their circumstances, patients can benefit from being asked about how they are coping and what supports they have in place.
Questions to Ask that Communicate Empathy

• I imagine it is hard adjusting to your vision loss. How are you holding up?
  • This normalizes the grief and loss process and shows you care

• Would you like to talk to someone about how you are feeling?
  • Phrasing the question in such a way can get around the mental health stigma that many people have internalized

• Tell me about how you previously coped with difficult situations
  • Reminding them of the skills they already have to manage challenging situations and emotions is a crucial component to providing support
Opportunities for Process Improvement & Advocacy

• **Awareness of vision rehabilitation services**
  • Increase awareness among providers and patients
  • Share success stories with providers about patients who have benefited from services

• **Resource development and dissemination**
  • Increase availability & resource sharing between providers, patients, and organizations

• **Training for eye care, primary care, and mental health providers**
  • Increase training on empathetic communication, grief process, and “patient journey” of living with or anticipating vision loss or blindness

• **Integrated eye care model**
  • Considered the gold standard. Includes patient navigators, peer support teams, mental health professionals, & other care professionals to connect patients to services they need
Next Steps for Prevent Blindness

• Develop training modules for mental health providers

• Partner with Schools of Optometry & Ophthalmology residency programs to provide training on mental health, vision rehabilitation, and trauma informed care
Thank you!

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ASPECT Program: CVPH.preventblindness.org/aspect-program