Spotlights on States Engaging in Aging Eye Health
Panel moderator: Christopher Maylahn, MPH, New York State
Focus on Eye Health National Summit: What's in Sight?

Dean VanNasdale, OD, PhD, The Ohio State University
Marcus J. Molea, AICP, MHA, Ohio Department of Aging
Betsy Cagle, Alabama Department of Public Health
Kay L. Wenzl, MPA, CSW, Nebraska Department of Health and Human Services
Dean VanNasdale, OD, PhD
Assistant Professor
vannasdale.1@osu.edu

THE OHIO STATE UNIVERSITY
COLLEGE OF OPTOMETRY
Centers for Disease Control and Prevention

Vision Health Initiative (VHI)

MMWR Maps
See MMWR Article on Geographic Disparity of Severe Vision Loss

https://www.cdc.gov/visionhealth
Where the Data Reside

BRFSS  NHANES  NHIS
National Health Interview Survey

National Health and Nutrition Examination Survey

The Variability of Vision Loss Assessment in Federally Sponsored Surveys: Seeking Conceptual Clarity and Comparability

JOHN E. CREWS, DONALD J. LOLLAR, ALEX R. KEMPER, LISA M. LEE, CYNTHIA OWSLEY, XINZHI ZHANG, AMANDA F. ELLIOTT, CHIU-FANG CHOU, AND JINAN B. SAADDINE
“Are you blind or do you have serious difficulty seeing, even when wearing glasses?”
Vision Impairment in the United States
Vision Impairment in the United States

Map showing the crude prevalence of vision impairment across different states in the United States. The map highlights states with varying prevalence rates categorized into different color bands:

- Light green: 47.4 – 49.8
- Yellow: 49.9 – 53.8
- Light blue: 53.9 – 54.8
- Dark blue: 54.9 – 54.9
- Gray: Data unavailable
Multi-state Assessment

• Analyze data across 3 states
  • Alabama, Nebraska, Ohio

• Analyze data across multiple years
  • 2013, 2014, 2015

• BRFSS
  • Additional Data Sources
    • American Community Survey
## Takeaway Finding 1

### Diabetes

- Those reporting no vision impairment

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<th>AL</th>
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<tr>
<td>AL</td>
<td>11.94%</td>
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<td>NE</td>
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<td>11.07%</td>
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- Those reporting vision impairment

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<tr>
<td>AL</td>
<td>26.96%</td>
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<tr>
<td>NE</td>
<td>24.96%</td>
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<td>OH</td>
<td>22.55%</td>
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Figure 1. Number of US Adults Aged 18 or Older with Diagnosed Diabetes, 1980-2012

Diagnosed Diabetics Reporting Visual Impairment

1997: 2.7 million
2011: 4.0 million
Takeaway Finding 2
Arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia

– Those reporting no vision impairment

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<tr>
<td>AL</td>
<td>32.09%</td>
<td>23.91%</td>
<td>29.56%</td>
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– Those reporting vision impairment

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<tr>
<td>AL</td>
<td>61.58%</td>
<td>48.70%</td>
<td>58.95%</td>
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Arthritis or rheumatism
Back or spine problem
Heart trouble/hardening of the arteries
Lung or respiratory problem
Deafness or serious hearing problem
Limb/extremity stiffness
Mental or emotional problem
Diabetes

Blindness or vision impairment

Stroke

Takeaway Finding 3

Serious difficulty walking or climbing stairs

– Those reporting no vision impairment

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<td>OH</td>
<td>13.30%</td>
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– Those reporting vision impairment

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<td>AL</td>
<td>57.07%</td>
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<td>46.82%</td>
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<td>OH</td>
<td>45.22%</td>
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Takeaway Finding 4

Limited in any way in any activities because of physical, mental or emotional problems

– Those reporting no vision impairment

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<tr>
<td>AL</td>
<td>25.36%</td>
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<tr>
<td>NE</td>
<td>16.93%</td>
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<tr>
<td>OH</td>
<td>20.69%</td>
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– Those reporting vision impairment

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<tr>
<td>AL</td>
<td>63.22%</td>
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<tr>
<td>NE</td>
<td>55.72%</td>
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<tr>
<td>OH</td>
<td>57.60%</td>
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Association Between Depression and Functional Vision Loss in Persons 20 Years of Age or Older in the United States, NHANES 2005-2008

Xinzhi Zhang, MD, PhD; Kai McKeever Bullard, MPH, PhD; Mary Frances Cotch, PhD; M. Roy Wilson, MD, MS; Barry W. Rovner, MD; Gerald McGwin Jr, MS, PhD; Cynthia Owsley, PhD, MSPH; Lawrence Barker, PhD; John E. Crews, DPA; Jinan B. Saaddine, PhD
Marcus J. Molea, MHA
Chief, Strategic Partnerships, Ohio Department of Aging
Ohio’s Vision and Eye Health Initiative

• The goal of this initiative is to **improve vision and eye health through interventions that advance vision and eye health as public health priorities.**
• The AEPPP has joined with the Ohio Public Health Association’s Vision Care Section, The Ohio State University College of Optometry, the Ohio Department of Aging and the Ohio Affiliate of Prevent Blindness to implement Ohio’s Vision and Eye Health Initiative.
• An estimated **3.6 million Ohioans** have vision problems and as the population ages this number will only increase!

• The estimated annual financial impact to the Ohio economy due to vision problems, refractive errors, visual impairment, and blindness is **$5.4 billion**.
Characterize the Public Health Impact of Eye Disease and Vision Loss.

Through the Ohio Public Health Association’s Vision Care Section (OPHA VCS)/The Ohio State University College of Optometry, we have aggregated and analyzed existing vision-related public health data generated through the BRFSS, the census, and other state and national mechanisms to quantify the economic and personal impact of eye disease and vision loss in Ohio. This will quantify the magnitude of the impact of vision loss.

Ohio’s Vision and Eye Health Initiative
Ohio’s Vision and Eye Health Initiative

Promote Systems Change to Prevent Vision Loss and Enhance Access to Eye Care.

Through Ohio’s Aging Eye Public Private Partnership, the Ohio Department of Aging (ODA) and Prevent Blindness Ohio have convened stakeholders to address issues related to vision care public policy, vision care services, public and professional awareness and vision research that affect the quality of life for Ohio’s aging population now and in the future.
Ohio’s Aging Eye
Public Private Partnership
A statewide collaboration preparing for the
growth of aging eye challenges in Ohio

Created by Executive Order in 2003 and
supported by the Administrations of Governors
Taft, Strickland and Kasich
Member Organizations:

**Health Services Advisory Group**
NASA John H. Glenn Research Center

**Ohio Association of Area Agencies on Aging**
Ohio Association of Gerontology and Education
Ohio Agencies Serving the Blind and Visually Impaired

**Ohio Department of Aging**
Ohio Department of Health
Ohio Department of Insurance/OSHIIP
Ohio Ophthalmological Society
Ohio Osteopathic Association

Ohio Optometric Association
Ohio Public Health Association
Ohio Veterans Visual Impairment Services Team
Opticians Association of Ohio
**Opportunities for Ohioans with Disabilities**
Prevent Blindness, Ohio Affiliate
**State Senator Capri Cafaro**
**State Representative Mike Duffey**
Dr. Rafat R. Ansari  
Vision Research Senior Scientist  
NASA John H. Glenn Research Center

Stephanie M. Loucka  
Director, Ohio Department of Aging
Bonnie K. Burman provided testimony to the National Academies of Sciences, Engineering, and Medicine, (NASEM), Health and Medicine Division on Public Health Approaches to Reduce Vision Impairment and Promote Eye Health held in Washington DC.
Advocacy and Awareness

• Co-chaired by Jaqueline Davis, OD, MPH-The Ohio State University College of Optometry

• Marcus J. Molea, Chief, Strategic Partnerships Division, Ohio Department of Aging

Vision Research

• Co-chaired by Heithem El-Hodiri, PhD-The Research Institute at Nationwide Children’s Hospital

• Andrew Hartwick, OD, PhD-The Ohio State University College of Optometry
How the AEPPP Addresses the Growth of Age-Related Eye Diseases

• **Build partnerships and collaborations** to provide input to various state agencies and organizations concerned with Ohio's aging population to insure a consistent and comprehensive statewide plan of action.

• **Advise and make recommendations** as to ways of increasing awareness about the growing future vision needs of Ohio's aging population.

• **Examine and recommend best practices** for seniors in the area of identifying eye problems and maintaining healthy eyes.
11 Policy and Program Recommendations

1. Integrate adult vision messaging and strategies into existing efforts at the Ohio Department of Health (i.e. tobacco cessation, primary care and rural health, diabetes prevention and control, health promotion, falls prevention) and include both adult and child vision issues, including aging vision, in state and local health improvement planning.

2. Support measures that increase multidisciplinary vision screening practices and facilitate mechanisms for follow up care.

3. Support and advocate for comprehensive and corrective preventive eye/vision care services for adults in the state Medicaid budget.
Policy and Program Recommendations

4. Support and advocate for comprehensive and corrective preventive eye/vision care benefits for all Medicare recipients.
5. Establish adult vision screening as an essential benefit to the Medicare annual medical exam.

See Remaining Recommendations in AEPPPP Annual Report:

https://ohio.preventblindness.org/ohios-aging-eye-public-private-partnership
Aging Eye Research Summits
Fellowship Award Recipients
Vision for Tomorrow

A statewide collaboration preparing for the growth of aging eye challenges in Ohio

Ohio’s Aging Eye Public Private Partnership

2016 Report to the Governor and the Ohio General Assembly

Annual Report, Directories and Fact Sheets
Legislative Breakfasts and Briefings
Awareness Raising and Educational Activities

Donna Pusecker
Implement Promising Interventions Related to Vision and Eye Health

- Research indicates that low vision is a key cause of falls among older adults, that falls are the leading cause of eye injury and that falls and the fear of falling result in a loss of independence.
- Ohio has taken the momentum and collaboration developed through Ohio’s AEPPP and STEADY U falls prevention initiative and is developing a collective impact strategy that improves vision and eye health, and reduces falls and associated injury among older adults.

Ohio’s Vision and Eye Health Initiative
STEADY U Ohio is a comprehensive falls prevention initiative led by the Ohio Department of Aging and supported by Ohio government and state business partners to:

• strengthen existing falls prevention activities,
• identify opportunities for new initiatives, and
• coordinate a statewide educational campaign to bring falls prevention to the forefront of planning for individuals, families, health care providers, business and community leaders and all Ohioans.

Preventing Falls... One Step at a Time

www.steadyu.ohio.gov
**A Matter of Balance** is an award-winning, evidence-based falls intervention. After six months, participants report more control over factors that could cause them to fall, increased exercise and activity levels and fewer falls. They feel more comfortable talking about their fear of falling and plan to continue exercising. Ninety-eight percent of participants would recommend A Matter of Balance to their friends and loved ones.

A Matter of Balance is available from community-based providers in all 88 Ohio counties.
• The Department of Aging and Prevent Blindness Ohio are cross-training new A Matter of Balance coaches in the Adult Vision Screening Training Program and encouraging current coaches to take the training to add this process to the falls prevention curriculum.
The Falls Epidemic Among Our Elders

The Nexus Between Vision Loss and Falls

Vision loss can not only lead to falls; falls are also the leading cause of eye injury.

An estimated 3.6 million Ohioans have vision problems and the number of Ohio residents with impaired vision, including blindness, could double in the next three decades. Data from the 2012 Vision Problems in the U.S. report indicate alarming increases in the four leading causes of vision loss: age-related macular degeneration, cataracts, open-angle glaucoma and diabetic retinopathy.

The economic impact of vision problems in Ohio is $1.4 billion annually in both direct and indirect costs. Age-related eye diseases increase the likelihood of debilitating falls by older Ohioans. According to the Centers for Disease Control and Prevention, Ohioans age 65 and older who have an age-related eye disease were 15.7 percent more likely to have fallen than peers without an eye disease. This is the sixth highest rate of falls among all states. Of those who fall, 20 to 30 percent suffer moderate to severe injuries that make it hard for them to get around or live independently. Falling once doubles the chances of falling again, threatening the health and independence of older adults and likely resulting in higher medical costs.

Eye diseases can not only lead to a fall, falls are also the leading cause of eye injury. According to research from the American Academy of Ophthalmology, Falls are an epidemic among our elders and are the number one cause of injuries leading to ER visits, hospital stays and deaths in Ohioans age 65 plus. An older Ohioan falls every minute on average, resulting in an injury every five minutes, an emergency department visit every six minutes, two hospitalizations each hour and three deaths each day. The number of total falls among older Ohioans increased more than 202 percent from 2000-2015. The total estimated cost of falls (medical costs, work loss, etc.) is $1.8 billion annually in Ohio.

Together We Can Reduce Vision Loss and Falls

The Centers for Disease Control and Prevention lists "having yearly eye exams" among its recommended fall prevention strategies for older Americans. However, a large number of people who have problems with their eyesight don’t visit eye doctors because of the cost or because they don’t have health insurance that covers eye care, according to a 2015 CDC survey. The survey also showed that others don’t get regular eye exams because they don’t think they have eye problems or have no transportation to get to doctors’ offices.

Ohio’s Aging Eye Public Private Partnership, the Ohio Department of Aging, Prevent Blindness and our many partners are working together to help older Ohioans access vision care and prevent falls.

STEADY U Ohio is an intensive community-based fall prevention initiative, supported by Ohio government and state business partners, to ensure that every county, every community and every Ohioan knows how they can prevent falls.

The Ohio Department of Aging and STEADY U partners collaborate to offer A Matter of Balance, a community-based, award-winning program available in all 88 Ohio counties. The program consists of small group workshops that help participants learn to recognize and address various factors in their lifestyle that may be increasing their risk of falling, including a fear of falling. Through group discussion, problem-solving activities, increased awareness, exercise and skill-building, participants are empowered to:

- View falls as something they can control
- Set goals and increase their activity levels
- Make changes around their homes to reduce falls risk
- Exercise to increase strength and balance
- Workshop leaders are not health professionals, but people who have made a commitment to stay falls-free and have been specially trained to help others maintain healthy, active lifestyles free from falls and falls-related injuries.

For more information about STEADY U and A Matter of Balance, please visit www.steadyohio.org or call 1-800-241-5678 to be connected to the area agency on aging serving your community.

Ohio’s Aging Eye Public Private Partnership (O/A Prevent Blindness) 1-800-301-3020; info@ohepp.org

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For more information about STEADY U and A Matter of Balance, please visit www.steadyohio.org or call 1-800-301-3020, ext. 112 or email info@ohepp.org.
• The work of Ohio’s AEPPP is supported entirely by **donated funds, products and services** from member organizations, as well as contributions from private sources.

• Prevent Blindness serves as the **fiscal agent** for the partnership.

• Support for educational materials, advocacy, printing, supplies and meeting expenses have been provided by:

  - Case Western Reserve University Department of Ophthalmology
  - Ohio Departments of Aging and Health
  - Prevent Blindness, Ohio Affiliate

  - The Vision Research Fellowship Program is supported by a grant from the Sarah E. Slack Prevention of Blindness Fund, Muskingum County Community Foundation and the Levin Family Foundation.
Contact Information

Marcus J. Molea, AICP, MHA
Chief, Strategic Partnerships
Ohio Department of Aging

614-752-9167
mmolea@age.ohio.gov

https://ohio.preventblindness.org/ohios-aging-eye-public-private-partnership
Betsy Cagle
Injury Prevention Branch Director,
Alabama Department of Public Health
Project Partners

- Alabama Department of Public Health
- Alabama Vision Coalition
- Eyesight Foundation of Alabama
- Alabama Optometric Association
- Alabama Rural Health Association
- Providers from pharmacy, podiatry, optometry, dentistry
3.73% or more of county residents report vision loss AND diabetes prevalence at or above 12.2% (among Medicare, Medicaid, and Blue Cross Blue Shield beneficiaries)

Poverty, Vision Loss, and Diabetes Prevalence by County

Source: Alabama Possible, American Community Survey(ACS), 5 Year Survey, Table B.10103, and BRFSS 2015
Ratio of Citizens to Primary Care Providers

- None
- 1 per 10,800 – 14,400
- 1 per 5,100 – 7,600
- 1 per 3,000 – 4,950
- 1 per 2,050 – 2,960
- 1 per 1,000 – 1,900
Dentists in Alabama

- 2,244 licensed dentists in Alabama.
- Over 65% (1,469) are in the 7 most populated counties: Baldwin, Jefferson, Madison, Mobile, Montgomery, Shelby, and Tuscaloosa.
- Half (33) of Alabama’s counties have fewer than 10 licensed dentists.
- 4 counties have no dentists.
Optometrists and Ophthalmologists in Alabama

- 961 licensed optometrists and ophthalmologists in Alabama.
- More than 50% (488) of the licensed eye doctors are in the 3 most populated counties: Jefferson, Madison, and Mobile.
- 41% (28) of Alabama counties have fewer than 5 licensed eye doctors.
- 14 counties have 0 eye doctors.
Podiatrists in Alabama

• 134 licensed podiatrists in Alabama.

• Over 50% (36) of Alabama counties have 0 licensed podiatrists.
Alabama Counties with 5 or Fewer Providers and Diabetes Prevalence Above 10.6%

Alabama Counties with 6-10 Providers and Diabetes Prevalence Above 10.6%

Ratio of citizens to primary care providers higher than 7,000:1
Project Activities

• Data Maps
• PPOD Network Development
• Diabetic Retinopathy Screening Plan
• Elevating Awareness of Vision Risks and Connections to Chronic Disease
• Public Service Announcements
Unexpected Wins and Breakthroughs

- Awareness
- Partnerships
- PPOD Networking
- Information Sharing
- Telemedicine Screening
Lessons Learned

• Data is all over the place
• Many obstacles to accessing care
• Lasting impact will require policy changes
Future Plans

- Strengthen Partnerships
- Website
- Education
- Find Gaps in Services to Children
Kay L. Wenzl, MPA
DHHS Health Promotion
Unit Administrator
Catherine’s Macular Degeneration Story
What did we learn?

• Existing data, but not much
• Needed more data from BRFSS
• Agencies, partners in Nebraska addressing eye and vision health, but information not centralized
• Challenge to initiate activities with minimal staffing and then minimal contractual services
What did we do?

- Expanded BRFSS survey to include the vision module
- Stakeholders meeting held - focus on elders and vision needs
- Reviewed vision impairment data and its influence on other topics
What did we accomplish

- Website dedicated to eye vision health in Nebraska
- Facts sheets from data
- Eye disease information documents
- Centralized listing of resources and service agencies
Next Steps

• Continue BRFSS data collection for vision module
• Coordinate stakeholder meeting and develop partnerships
• Develop additional fact sheets/materials