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Delivering eye health promotion: why and how

Eye health promotion is vital for supporting the health and wellbeing of eye patients and the community, and there is a lot we can all do to help.

In low- and/or middle-income countries, nine out of ten people who are blind or visually impaired have a condition that could have been prevented or treated.¹ This suggests that preventive measures and eye health promotion could play an important role in reducing blindness and vision impairment. However, in most countries, little attention is paid to eye health promotion.²

Why is eye health promotion needed?

Whether people remain healthy or become sick is influenced by many factors, including the conditions in which people live, their level of income, and their education. People are also more likely to become ill if they do not know how to keep themselves and their families healthy, or how and where to seek care if they become sick. The same applies to many eye conditions. For example, people are more likely to develop type 2 diabetes and vision loss from diabetic retinopathy if they do not know what causes diabetes, if they cannot afford or cook healthy food, if it is difficult for them to exercise, or if they do not understand the importance of taking their medication regularly and having their eyes examined on a regular basis. People are also more likely to become sick if there are no policies in place for affordable housing, clean water, and workplace safety, for example.

What is health promotion?

Health promotion is the process of enabling people to increase control over, and improve, their health.³ Even when there is a good health system in place, three more factors are needed to ensure that people are healthy and have a good sense of wellbeing:

- 1 **A healthy environment** for people to live and work in.
- 2 **Health literacy:** knowledge and awareness of what people can do to keep themselves healthy and safe, and how and where to get help if they need it.
- 3 **Government policies** that support health, such as ensuring there are safe places in urban areas where people can exercise.



Time spent outdoors needs to be built into the school day, as this reduces the risk that children will develop myopia. NEPAL

Health promotion is more effective when there is a focus on living standards as well as lifestyle, and when we realise that good health involves more than just the absence of disease. It is just as important for groups of people (e.g., people living with diabetes and medical experts) to work together to find relevant, workable, and acceptable solutions and to build skills so that people can bring about effective change in their own lives. These concepts and actions need to be adapted to the local setting and reach those who are hardest to reach.⁴

Where to start

A good place to start is to think about the different groups of people who will benefit from health promotion to improve their eye health (such as pregnant women, children, people with diabetes, and the elderly) and the setting where they can be reached. For each group, think about what should be in place to support their health in the three key areas of a healthy environment, health literacy, and government policies (see Figure 1).

- **A healthy environment.** What needs to be added to the environment, and what is harmful and should be removed? For example, access to water for drinking and washing is essential for a community's eye health, as is the removal of waste.
- **Health literacy.** What are the knowledge gaps and what misconceptions or false beliefs exist in the community? For example, for community members to have good eye health, they need information about diet and exercise, the importance of eye tests and blood sugar test, the benefits of cataract surgery and spectacle correction, and where to go if there is a problem with their eyes.
- **Government policies.** What policies can be put in place to support health, and which policies are potentially harmful and should be eliminated?

Figure 1 Examples of eye health promotion

<p>Who? Pregnant women Where? Antenatal clinics</p>	<p>Who? Young children Where? Immunisation clinics</p>	<p>Who? Schoolchildren, adolescents, and teachers Where? Schools</p>
<p>1 A healthy environment. Ensure that health facilities that provide antenatal care are accessible to all women, regardless of disability or income. Ensure that pregnant women have access to vitamin A rich food or vitamin supplements.</p> <p>2 Health literacy. Provide information that encourages healthy behaviours and reduces the risk of preterm delivery, such as smoking cessation, abstinence from alcohol, and a healthy diet, including vitamin A rich foods. Encourage exclusive breast feeding from birth.</p> <p>3 Government policies. Provide free or affordable antenatal care for all pregnant women on a regular basis.</p> <p>Impact: Less visual loss from retinopathy of prematurity, vitamin A deficiency, and neonatal conjunctivitis.</p>	<p>1 A healthy environment. Ensure that health facilities that provide immunisation and vitamin A supplementation are accessible to all parents of young children.</p> <p>2 Health literacy. Provide information on the benefits of immunisation, a healthy diet, and the need for vitamin A supplements. Encourage exclusive breast feeding for infants as well as environmental and personal hygiene (including face washing).</p> <p>3 Government policies. Provide free or affordable antenatal care for all pregnant women on a regular basis.</p> <p>Impact: Less trachoma and less visual loss from measles and vitamin A deficiency.</p>	<p>1 A healthy environment. A healthy school environment with water and sanitation as well as safe outdoor spaces for play as time outside reduces the risk of developing myopia.</p> <p>2 Health literacy. Provide health education in schools about a healthy diet, personal and environmental hygiene, safe play, and the consequences of smoking and risky sexual behaviours. Encourage the use of spectacles, if required, and tell children what to do if they have an eye problem. Train schoolteachers to screen children for eye conditions and to take care of their own eyes and vision, e.g., correction of presbyopia.</p> <p>3 Government policies. All children aged 5-15 years should be in school. Education policies on school health should include eye health.</p> <p>Impact: Less myopia, obesity, and Type 2 diabetes; less trachoma and ocular injuries; less visual loss in children and teachers from uncorrected refractive errors; prompt management of eye conditions.</p>
<p>Who? People of working age Where? Workplaces</p> <p>1 A healthy environment. A healthy and safe work environment with appropriate infrastructure to encourage good hygiene and to prevent ocular injuries.</p> <p>2 Health literacy. Provide information on a healthy diet, regular exercise, how to protect the eyes from injury, and the benefits of smoking cessation. Emphasise the need for regular blood sugar and blood pressure tests and eye examinations to detect potentially blinding eye conditions. Provide information about where to access eye care, if needed.</p> <p>3 Government policies. Occupational health (or health and safety) policies which protect the eye health of workers.</p> <p>Impact: Fewer people develop diabetes or sustain eye injuries as well as earlier detection of blinding eye conditions.</p>	<p>Who? Older people/the elderly Where? Care homes, social activities for the elderly, health clinics for the elderly</p> <p>1 A healthy environment. A healthy and safe living environment with appropriate infrastructure. Accessible health facilities.</p> <p>2 Health literacy. Provide information on a healthy diet, regular exercise, with regular blood sugar tests and eye examinations. Information on where to access eye care, if needed.</p> <p>3 Government policies. Include eye health in policies on health care for the elderly.</p> <p>Impact: Fewer people develop diabetes. Early detection of blinding eye conditions such as cataract and glaucoma.</p>	<p>Who? Schoolchildren, adolescents, and teachers Where? Schools</p>

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What role can we play in eye health promotion?

As ophthalmologists, optometrists, ophthalmic nurses, and allied eye health personnel, we may have access to groups such as pregnant women, children, people with type 2 diabetes, and the elderly, either where we work or in the community where we live. We can train other health care workers to deliver appropriate eye health promotion. e.g., at antenatal care clinics, in diabetes clinics, or in schools. For example, eye health workers have successfully trained staff members who were working in maternal and child health clinics to deliver primary eye care, which included eye health promotion and prevention, with appreciable success.⁵ Children in school are a captive

audience for eye health promotion, and the International Agency for the Prevention of Blindness has developed a school activity pack containing eye health promotional materials that can be downloaded free of charge (<https://bit.ly/IAPBpack>).⁶

The role of health education in eye care is to encourage the uptake of eye health promoting behaviours and increase the use of eye care services.⁷ In the course of our work, health education can be directed at individuals, families, and communities. This could include encouraging family members to have their eyes examined, particularly if there is a history of eye disease, such as glaucoma. For patients

“The role of health education in eye care is to encourage the uptake of eye health promoting behaviours and increase the use of eye care services.”

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with diabetes, we could explain the importance of annual eye examinations and work with them to find ways in which they could adopt a healthier lifestyle.

Improvement in the quality and quantity of services is an area of health promotion⁸ which we can also influence by making eye care services more accessible, affordable, and acceptable.

Outreach activities provide an excellent opportunity to discuss eye health promoting behaviours. We can encourage managers and regional policy makers to invest in new ways of working that prioritise health promotion. We can also advocate for policies that encourage healthy behaviours, such protective eye wear in the workplace and safe play areas in schools. World Sight Day is an excellent opportunity for eye health service providers to advocate for these policies, whether in the media, in the workplace, or in schools.

As eye health workers, we should do our best to incorporate eye health promotion into our routine eye health service delivery and become ambassadors of eye health care.

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