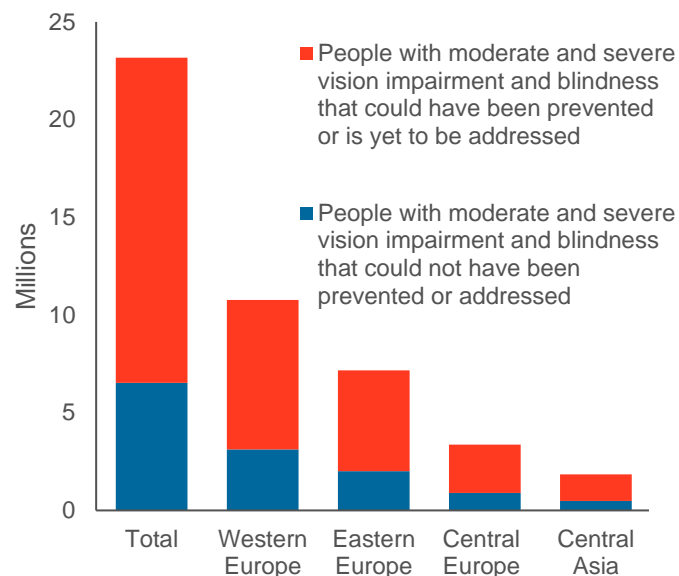


# Integrated people-centred eye care, including preventable vision impairment and blindness

**30** > **MILLION** people in the **European Region** with **vision impairment or blindness**

**2.8 MIL** People are **blind** (defined as a lack of vision) in the **European Region**

Approximately **27.2 MIL** People have **vision impairment** in the **European Region**



**> 70 MIL** People have **eye diseases** that are in the **early stages**. If these conditions are **left untreated** they will cause **disabling impairment**

Many causes of **vision impairment** can be **prevented or addressed** via **early detection and timely management**

- **Effective interventions** are available for both **cataract** and **uncorrected refractive error**, the **leading causes** of **blindness** and **vision impairment**
- **Treatment** of an **eye condition** that typically **does not cause vision impairment** can often still lead to **personal and financial hardships**

Demographic and lifestyle trends including globally ageing populations are expected to cause global eye care needs to increase substantially in coming decades



The **European Region** has the **highest median age** in the world

In **2050** the **number of people aged 65 and older** is forecast to **increase to 25%** from **14%** in **2010**



**80%**

of **distance vision** impairment (objects far away are blurry) and **blindness** in both eyes **occur in adults 50+**

**2/3**

of **near vision** impairment (affects vision at a close distance) **occur in adults 50+**

**Vision impairments** can affect and have **consequences** for **individuals, their families and careers**

**Intervention access** should be available to **everyone, everywhere**: This can be achieved through **cost-effective interventions** for **promotion, prevention, treatment and rehabilitation** available at the **primary health care level** to address the **needs accompanying eye conditions and vision impairments**



**Rehabilitation**, including access to **assistive technology** such as **spectacles**, is **critical** for many major eye conditions that cause **vision impairment and blindness**



**Availability and accessibility** of **eye care services** especially for individuals in **rural areas**



**Shortages** of **trained health personnel** and **insufficient cross-sectoral collaboration**



**Costs** of **services, socioeconomic and cultural factors, and inequities**

By **maximizing residual vision** and providing **practical adaptations** tailored to **individual needs and priorities**, **rehabilitation** aims to **optimize everyday functioning**



Steps towards achieving the **2030 Agenda for Sustainable Development** can be taken by **establishing integrated people-centred eye care and preventing vision impairment and blindness**

- SDG 3 Good Health and Well-Being**
- SDG 1 No Poverty**
- SDG 4 Quality Education**
- SDG 5 Gender Equality**
- SDG 6 Clean Water and Sanitation**
- SDG 8 Decent Work and Economic Growth**
- SDG 10 Reduce Inequalities**



**Vision impairments** affect **individual development, educational achievement, quality of life, social well-being and economic independence**. In addition, **disproportionate burdens** on **underserved and vulnerable populations** means that **vision impairments** affect **society as a whole**

## TAKE ACTION:



**Eye care** should be an **integral part of universal health coverage**



Implement **integrated people-centred eye care** in health systems



Promote **high-quality implementation** and **health systems research** for **effective eye care interventions**



**Monitor trends** and **evaluate progress**



**Raise awareness** and **engage people and communities**

**Sources:** 1. WHO World report on vision: <https://www.who.int/publications-detail/world-report-on-vision>; 2. WHO Executive Board Integrated people-centred eye care, including preventable vision impairment and blindness: [https://apps.who.int/gb/ebwha/pdf\\_files/EB146/B146\\_R8-en.pdf](https://apps.who.int/gb/ebwha/pdf_files/EB146/B146_R8-en.pdf); 3. WHO European Region Healthy ageing website: <http://www.euro.who.int/en/health-topics/Life-stages/healthy-ageing>; 4. The International Agency for the Prevention of Blindness: <https://www.iapb.org/iapb-regions/europe/european-coalition-for-vision/>; 5. Flaxman SR, Bourne RRA, Resnikoff S, Ackland P, Braithwaite T, Cicinelli MV, et al. Global causes of blindness and distance vision impairment 1990–2020: a systematic review and meta-analysis. The Lancet Global Health. 2017;5(12):e1221–e34; 6. WHO Universal eye health: a global action plan 2014–2019: <https://www.who.int/blindness/actionplan/en/>; 7. Frick KD, Joy SM, Wilson DA, Naidoo KS, Holden BA. The global burden of potential productivity loss from uncorrected presbyopia. Ophthalmology. 2015;122(8):1706–10.; 8. Vision Rehabilitation for Elderly Individuals with Low Vision or Blindness: <https://www.cms.gov/Medicare/Coverage/InfoExchange/downloads/rtcvisionrehab.pdf>; 9. Medline Plus (NIH US National Library of Medicine): Blindness and vision loss: <https://medlineplus.gov/ency/article/003040.htm>; 10. American Academy of Ophthalmology: <https://www.aao.org/>; 11. Classification of Diseases ICD–11: <https://www.who.int/classifications/icd/en/>