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Preventing sight loss in older people. A qualitative study exploring barriers to the uptake of regular sight tests of older people living in socially deprived communities in South Wales

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ABSTRACT

Objectives: This paper describes research findings that try to understand some of the reasons that prevent older people in deprived communities in South Wales from accessing NHS funded sight tests and leads to a discussion of suitable interventions that seek to improve access to primary eye care services and prevent avoidable sight loss.

Study design: Data were collected from eight focus groups ($n = 63$) of mixed gender and ages (60–80+ years), of white origin living in deprived communities in South Wales. Individuals were recruited for the focus groups by extensively publicizing the project, with a range of health and older people's community services and groups such as sheltered housing complexes, stroke support groups and coffee morning groups. The study included people who attended optometry services and people not engaged with services. A purposive sampling technique summarizes the sampling approach taken, an approach which the team utilized to recruit 'information rich' cases, namely individuals, groups and organizations that provided the greatest insight into the research question.

Methods: Focus groups were recorded and transcribed verbatim. Data underwent thematic content analysis and subsequent interpretations were corroborated by expert advisors and a project steering group.

Results: Cost was perceived as a significant barrier to accessing sight tests, particularly in relation to purchasing glasses. Other barriers included the perceived pressure to buy glasses associated with visits to the optometrists; poor understanding of the purpose of a sight test in a health prevention context and acceptance of deteriorating sight loss due to the ageing process.

Conclusion: Areas of improvement for the delivery of preventative eye health services to older people are identified, as are areas for reflection on the part of those who work within the eye health industry.

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Introduction

Almost two million people in the UK are living with sight loss (which includes both visual impairment and blindness) and this is set to double to four million by 2050.¹ In Wales, the figure is approximately 100,000.¹ These increases are mainly due to an ageing population as over 80% of sight loss occurs in people over 60 years.¹ As the population ages, the prevalence and severity of people with age related eye disease such as glaucoma, cataract and age related macular degeneration will increase² causing huge challenges for health and social care.

Sight loss has a considerable impact on a person's quality of life, their families and society as a whole. The effects of sight loss on older people can be devastating. Older people with sight loss are twice as likely to experience a fall as those with full vision³ and are three times more likely to suffer from depression and social isolation compared to the rest of the population.⁴ This may explain why sight loss is one of the top three causes of suicide amongst older people.⁵

Socio-economic factors also play a significant part in eye health as 78% of older blind and partially sighted people live in poverty.^{1,6} Poorer older people are much less likely to seek early attention for the onset of visual disturbance and are less likely to visit an optometrist.^{7–9} Furthermore, communities with high levels of social deprivation have reduced access to optometric and hospital-based eye-care services.¹⁰ Consequently, chronic eye disease is worse in areas of multiple deprivation and low income.¹¹ Cases of glaucoma and diabetic retinopathy, both major causes of preventable but irreversible sight loss in working age groups in the UK, present at more advanced stages with worse prognosis in areas of high deprivation.¹²

However, older people with good vision can, and do, remain economically and socially active, and contribute significantly to the well-being of their families and to society in general.¹³ As the population ages, preventing avoidable sight loss and ensuring good vision is key to promoting positive or healthy ageing, concepts which encompass both a physical approach and a psychological approach (for example, promoting confidence, self esteem, purpose in life), both integral to improved quality of life.¹⁴

Regular sight tests are important, as many serious eye conditions do not have any visible early warning symptoms. Guidance from The College of Optometrists¹⁵ recommends the minimum intervals for eye examinations. It states that everyone aged 16 years and over should have an eye test every two years, and should not be recalled more frequently unless this is deemed clinically necessary and advised by their optometrist. Having a regular sight test should be part of everyone's health care routine as half of all sight loss, from cataract and undetected refractive error, is preventable with early detection and treatment.¹⁶

In Wales and the rest of the UK, people aged 60 years and over qualify for an NHS funded sight test. However, data from the General Ophthalmic Services in England and Wales for 2013–14, show that NHS funded sight tests for people aged 60 years and over are only taken up by approximately half of those who are eligible.^{17,18} With the predicted increase in the numbers of people with sight loss over the next ten years, encouraging older people, who are at particular risk of sight

loss, to take up their entitlement for an NHS funded sight test is a public health priority.^{19,20} Moves to improve uptake of eye examinations are promoted in the first Welsh Government (2013) eye health care plan,²¹ demonstrating the importance of eye health and preventing sight loss at a national policy level.

Qualitative research has only recently been conducted into reasons why some older people do not access eye tests. Reasons identified include: perceived lack of need, lack of eye health awareness, the cost of glasses and transport problems, a lack of appreciation of the importance of an eye test, failure to accept their own risk of eye disease, lack of awareness of eligibility for NHS funded eye tests and help with the cost of glasses.^{19,22–24}

A search of the literature demonstrates that in addition to the study reported here (full report RNIB Cymru 2011)²⁰ similar studies exploring barriers to accessing eye care services in the UK have been published in the last two years.^{23,24} However, differences between the studies include variances in the qualitative approaches used, location of the studies, age range and ethnicity of the research participants.

For example, compared to the RNIB Community Engagement Programme¹⁷ (CEP) study carried out in the Rhondda Valley, this study recruited individuals from a wider geographical area of Cwm Taf, South Wales and from a different age group ranging from 60 to 80+ years old, compared to 40–65 years. Additionally, at the time of the study no other studies with a similar focus had been undertaken with older people in Wales.

The aim of this paper is to report qualitative findings about some of the reasons that may prevent older people from deprived communities in South Wales, known to be at risk of avoidable sight loss, from accessing NHS funded eye examinations. Understanding barriers that may hinder older people from having eye examinations is crucial in order to provide evidence for policy makers, eye care and public health practitioners, so that suitable evidence-based interventions can be designed that encourage increased uptake of eye examinations and thus reduce avoidable sight loss.

The issue of location of the research, is particularly important as health service policy has been devolved from UK to Welsh Government since 1999, with differences in policies relevant to eye health becoming increasingly apparent within Wales compared to elsewhere in the UK. Effective public health policy making requires research evidence generated from the local area (in this case Wales), as well as being informed by evidence from elsewhere. Furthermore, no studies investigating the topic area had been undertaken in Wales with people aged 60 and over. This is surprising considering the obvious need for more evidence in this area given that only half of those aged 60 years and over in Wales are accessing NHS funded eye tests.¹⁸ Although the study is focussed on South Wales communities, the findings are transferable to settings outside of Wales.

Methods

Specifically, this study recruited 63 older people, aged 60 years and over, living in low income communities in the area of

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