Veo, Veo (I See): Understanding the Eye Health Education Needs of Older Hispanics/Latinos

Speaker’s Notes
Neyal J. Ammary-Risch

- Good afternoon, everyone. This is Neyal Ammary-Risch, director of the National Eye Health Education Program (NEHEP) of the National Eye Institute (NEI) at the National Institutes of Health. Thank you for participating in today's webinar: “Veo, Veo (I See): Understanding the Eye Health Education Needs of Older Hispanics/Latinos.”

- Presenting with me today is Dr. Michael Maldonado, a member of the NEHEP Planning Committee and long-standing faculty member at the Texas Tech Ophthalmology Clinic. He is board certified by the American Board of Optometry in Ocular Disease and licensed in Texas and New Mexico. Dr. Maldonado trains residents and medical students on ocular disease and pathology and regularly lectures on eye disease topics throughout Texas. His many professional affiliations include the American Board of Optometry; American Academy of Optometry; American Optometric Association, where he sits on the Hispanic Communication Committee; Association for Research in Vision and Ophthalmology; Texas Optometric Association; and El Paso Diabetes Association Board of Directors. He is also the current president of the El Paso Optometric Society.
• Marcela Aguilar is a senior manager at ICF, NEHEP’s communication support contractor. Ms. Aguilar leads efforts to develop culturally and linguistically appropriate eye health educational resources for Hispanics/Latinos. Most recently, she oversaw the production of diabetic eye disease, glaucoma, and vision and aging toolkits in Spanish and trained close to 1,000 community health workers to use these resources. Ms. Aguilar has presented the results of this capacity-strengthening work at the American Public Health Association Annual Conference, National Hispanic Medical Association, and American Diabetes Association Annual Clinical Conference on Diabetes.

• Today, we will be discussing common vision problems and age-related eye diseases and conditions in Hispanics/Latinos. You will also learn how to help reduce vision loss among older Hispanics/Latinos by using free resources from NEHEP in your communities.

• At the end of this webinar, you will be able to:
  ▪ Describe Hispanics/Latinos’ understanding of eye health and vision loss.
  ▪ Discuss common vision problems among Hispanics/Latinos and how they can be treated.
  ▪ Define the most common age-related eye diseases and conditions.
  ▪ Explain the importance of comprehensive dilated eye exams and other healthy behaviors in reducing the risk of vision loss.
  ▪ Describe patient education resources available from NEHEP and how they can be used to promote eye health among older Hispanics/Latinos.

• Let’s get started…
Neyal J. Ammary-Risch

- According to U.S. Census data, 43.1 million Americans were age 65 and older in 2012.

- This figure is projected to nearly double to 83.7 million by 2050, when older adults will constitute nearly 20% of the population.
Among Hispanics/Latinos, 3.6 million were age 65 or older in 2014.

This number is estimated to reach 16.8 million by 2050.

NEHEP is working to educate this growing population about the importance of taking care of their eyes.
What is NEHEP?

- The National Eye Health Education Program (NEHEP) is part of the National Eye Institute (NEI) at the National Institutes of Health.

- NEHEP works to help preserve sight and to prevent vision loss and blindness by sharing scientifically based health information with healthcare professionals and the public.

Neyal J. Ammary-Risch

- NEHEP, a program of NEI at the National Institutes of Health, is committed to preserving sight and preventing vision loss and blindness by sharing science-based, easy-to-understand eye health information with healthcare professionals and the public.
Neyal J. Ammary-Risch

- The goal of NEHEP is to help make vision a public health priority by translating eye and vision research into public and professional education programs. NEHEP supports collaboration among eye health professionals, healthcare providers, and intermediary organizations.

- The current program areas under NEHEP include the following:
  - Diabetic Eye Disease Education Program
  - Glaucoma Education Program
  - Low Vision Education Program
  - ¡Ojo con su visión! or Watch out for your vision! Program
  - Vision and Aging Program
  - African American Outreach Initiative

- The African American Outreach Initiative is in development, and we hope it will be launched in the near future.

- This webinar will focus on the joint efforts of the ¡Ojo con su visión! and Vision and Aging programs to educate older Hispanics/Latinos about their eye health.
Neyal J. Ammary-Risch

- The NEHEP ¡Ojo con su visión!, or Watch out for your vision!, Program is designed to help raise awareness among Hispanics/Latinos about the importance of maintaining eye health. Our culturally and linguistically appropriate education resources provide information about how Hispanics/Latinos can protect their vision.

- Key messages communicated through the Ojo program include:
  - Hispanics/Latinos are at higher risk for certain eye diseases and conditions.
  - Hispanics/Latinos can help protect their vision by getting regular comprehensive dilated eye exams.
  - Eye diseases often have no early symptoms.
Vision and Aging Program

The Vision and Aging Program provides health and community professionals with tools and guidance for educating older adults about eye health, eye diseases and conditions, low vision, and the importance of comprehensive dilated eye examinations.

Key target audience
- Adults ages 50 and older

Key program messages
- Vision loss is not a normal part of aging.
- Everyone ages 50 and older should have a comprehensive dilated eye exam.
- Age-related eye diseases often have no early symptoms.
- Early detection and treatment may prevent vision loss or blindness.

Neyal J. Ammary-Risch

- The Vision and Aging Program is designed to help address the public health concern of vision loss and blindness among the aging population and to equip professionals with educational tools and resources to spread the word about eye health and what people can do to protect their sight. This program emphasizes the importance of comprehensive dilated eye exams in detecting age-related eye diseases and conditions early—before vision is lost.

- Key program messages include:
  - Vision loss is not a normal part of aging.
  - Everyone ages 50 and older should have a comprehensive dilated eye exam.
  - Age-related eye diseases often have no early symptoms.
  - Early detection and treatment may prevent vision loss or blindness.

- I would now like to turn things over to Dr. Maldonado to discuss common vision problems and age-related eye diseases and conditions.
Dr. Michael Maldonado

- Thank you, Neyal. It's a pleasure to be here with all of you today.

- The first thing I want to stress is that, while some changes to our vision are common as we age, vision loss and blindness are not.

- Some of these common vision changes can include:
  - Losing focus
  - Noticing declining sensitivity
  - Needing more light
  - Some people age without experiencing changes in their vision or vision loss.
Many vision changes can be corrected

Many times, vision changes can be corrected with the following:

- Contact lenses
- Glasses
- Improved lighting

Dr. Michael Maldonado

- Many times, vision changes can be corrected with glasses, contact lenses, or improved lighting. For example, increasing lighting can help a person avoid accidental trips and falls; night-lights or automatic lights can be especially helpful when entering a darkened room.
Dr. Michael Maldonado

• With the aging of the population, the prevalence of age-related eye diseases and conditions is a major public health concern. As you can see here, the number of Hispanics/Latinos with age-related eye diseases—particularly cataract and diabetic retinopathy—will increase significantly in the coming years.
Dr. Michael Maldonado

• The prevalence of glaucoma among Hispanics/Latinos is also on the rise.

• Now, let’s talk about the major age-related eye diseases and the risk factors for each.
Dr. Michael Maldonado

- Although vision loss is not a normal part of aging, older adults are at risk for a variety of eye diseases and conditions. These include the following:
  - Age-related macular degeneration (AMD)
  - Cataract
  - Diabetic eye disease
  - Glaucoma
  - Low vision
Dr. Michael Maldonado

- Let’s start with AMD, a leading cause of vision loss and blindness among adults 50 and older.

- AMD can damage the eye’s macula—the small, sensitive area located in the center of the retina. The macula is needed for having sharp, central vision and for seeing objects that are straight ahead clearly.
Dr. Michael Maldonado

- The photo on the left shows a scene as viewed by a person with normal vision. The image on the right shows the same scene as viewed by a person with advanced AMD.
Age-related macular degeneration

Risk factors:
• Age, smoking, family history, obesity, race

Symptoms:
• No pain
• Blurred vision
• Drusen (only visible to an eye care professional)

Dr. Michael Maldonado

• Age is the primary risk factor, but smoking, a family history of AMD, obesity, and race also play a role. Caucasians are more likely to lose vision from AMD.

• AMD is difficult to detect, and there is no pain with the condition.

• Some symptoms include blurry vision or straight lines that may appear crooked.

• An early sign is drusen, which are yellow deposits under the retina. Drusen can only be seen by an eye care professional during a comprehensive dilated eye exam.

• The image on this page shows an Amsler grid. If an eye care professional suspects someone has AMD, he or she may ask the patient to look at the grid. Changes in central vision may cause the lines in the Amsler grid to disappear or appear wavy, a sign of AMD.
Age-related macular degeneration

Treatment options:

• Age-Related Eye Disease Study (AREDS) formulation (special supplement of vitamins and minerals)
• Eye injections
• Laser surgery

Dr. Michael Maldonado

• NEI’s Age-Related Eye Disease Study found that a specific high-dose formulation of vitamins A, C, and E and the minerals zinc and copper can significantly reduce the progression of advanced AMD for people with early signs of the disease.

• Other treatment options include laser surgery and eye injections.

• A person’s eye care professional is the best person to determine treatment options and also how to get the AREDS formulation.
Dr. Michael Maldonado

• Next, I want to talk about cataract.

• A cataract is a clouding of the lens inside the eye. It can occur in one or both eyes, but does not spread from one eye to the other.

• Over time, the cataract may grow larger and cloud more of the lens, making it harder to see.
Dr. Michael Maldonado

- The photo on the left shows a scene as viewed by a person with normal vision. The image on the right shows the same scene as viewed by a person with an advanced cataract.
Dr. Michael Maldonado

• Besides age, the risk is higher for people who have diabetes, who smoke, or who have been exposed to high amounts of sunlight.

• Some symptoms of cataract include:
  - Cloudy or blurred vision
  - Colors that may not appear as bright as they once did
  - Glare or light from the sun or lamps that appears too bright
  - Light from oncoming headlights during night driving that causes more glare than it once did
Dr. Michael Maldonado

- Symptoms of early cataract may be improved with new eyeglasses, better lighting, anti-glare sunglasses, or magnifying lenses. If these do not help, cataract surgery is the only other effective treatment. This is one of the most common and successful surgeries performed in the United States. In fact, by age 80, more than half of all Americans either have a cataract or have had cataract surgery.

- Cataract surgery involves removing the cloudy lens and replacing it with an artificial one. Some people with cataract may never need this surgery, and many others are able to postpone it for years.
Dr. Michael Maldonado

• Let’s move on to diabetic eye disease. This refers to a group of eye problems that people with diabetes may face as a complication of the disease, such as diabetic retinopathy, glaucoma, and cataract.

• Diabetic retinopathy is the leading cause of vision loss and blindness in adults 20–74 years of age.
  ▪ It occurs when diabetes damages the tiny blood vessels inside the retina, the light-sensitive tissue at the back of the eye.
  ▪ A healthy retina is necessary for good vision.
Dr. Michael Maldonado

- The photo on the left shows a scene as viewed by a person with normal vision. The image on the right shows the same scene as viewed by a person with advanced diabetic retinopathy.
Dr. Michael Maldonado

• Although blurred or blocked vision may sometimes occur, diabetic eye disease typically has no early warning signs, so people with diabetes could have it and not know it until later stages, when noticeable vision loss starts to occur. It’s really important for people with diabetes to have a comprehensive dilated eye exam at least once a year to detect eye problems early. They should not wait for symptoms before seeing their eye doctor.
Dr. Michael Maldonado

• There are effective treatment options for diabetic retinopathy. These include laser surgery and injections.

• Early detection, timely treatment, and appropriate follow-up care can reduce a person’s risk of severe vision loss or blindness by 95%.
Another common eye disease related to aging is glaucoma. Glaucoma is a group of eye diseases that can damage the optic nerve, which is the largest sensory nerve of the eye. It carries impulses for sight from the retina to the brain. Primary open-angle glaucoma is the most common form. Glaucoma is usually associated with elevated pressure in the eye, but the amount of pressure needed to cause problems can vary from person to person. Glaucoma can develop in one or both eyes and affects peripheral, or side, vision. If left untreated, glaucoma can result in vision loss or blindness.
Dr. Michael Maldonado

- The photo on the left shows a scene as viewed by a person with normal vision. The image on the right shows the same scene as viewed by a person with advanced glaucoma.
Dr. Michael Maldonado

- Anyone can develop glaucoma; however, there are some risk factors that put people at higher risk. These include age, race, and family history. People who are at particularly higher risk include:
  - African Americans over age 40
  - Everyone over age 60, especially Hispanics/Latinos
  - People with a family history of glaucoma
- People with diabetes are also at higher risk of developing glaucoma.
Dr. Michael Maldonado

- Glaucoma often has no early warning signs or symptoms, and there is no pain.

- As the disease progresses, a person with glaucoma may notice it is difficult to see objects to the side, but objects in front may still be seen clearly.

- Left untreated, central, or straight-ahead, vision may decrease until no vision remains.

- The most common treatment option for glaucoma is medication, usually eye drops. It is very important for people with glaucoma to take their medications as directed.

- Laser or conventional surgery can also be used to help relieve pressure by allowing fluid to drain from the eye.

- Although glaucoma cannot be cured, it can usually be controlled through early detection and treatment.
Low vision

- Low vision is a visual impairment that cannot be corrected by regular glasses, contact lenses, medication, or surgery and that interferes with the ability to perform everyday activities.

Dr. Michael Maldonado

- Next, let’s talk about low vision. Left untreated, many eye diseases and conditions can lead to low vision.

- This is a visual impairment that cannot be corrected with regular glasses, contact lenses, medication, or surgery. It may interfere with a person’s ability to perform everyday activities, such as:
  - Reading
  - Shopping
  - Cooking
  - Watching TV
  - Writing
  - Driving or getting around the neighborhood
Low vision

People at higher risk:
• People with eye diseases
• People who develop vision loss after eye injuries or because of birth defects

Treatment options:
• Vision rehabilitation

Dr. Michael Maldonado

• People whose eye diseases go undetected and untreated are at higher risk for low vision. People can also develop low vision from eye injuries or birth defects.

• While vision that has been lost usually cannot be restored, people can learn to make the most of their remaining vision through vision rehabilitation.

• People who have been diagnosed with low vision should see a specialist in low vision. This specialist will assess a patient’s needs and prescribe treatment options, including vision rehabilitation services and assistive devices that can help maintain independence and quality of life.

• It’s important for health professionals to make referrals for low vision services and raise awareness about the availability of vision rehabilitation early on because it is most effective if it is started as soon as low vision problems are identified.
Dr. Michael Maldonado

• I’m going to move on to another condition, called dry eye, that commonly affects people as they age. Dry eye occurs when the eye does not produce tears properly or when the tears evaporate too quickly. If left untreated, this condition can lead to pain, ulcers, or scars on the cornea as well as to some loss of vision.

• Dry eye can make it more difficult to perform some activities, such as using a computer or reading for a long period of time. It can also decrease a person’s tolerance for dry environments, such as the inside of an airplane.

• Dry eye can be a temporary or chronic (ongoing) condition. Its symptoms include:
  - Episodes of excess tears following dry periods
  - Feeling of sand or grit
  - Blurred vision
  - Pain and redness
  - Stringy discharge from the eye
  - Stinging or burning of the eye
  - Sensitivity to light
Dry eye

People at higher risk:
- Dry eye can occur at any age.
- Women experience dry eye more often than men.
- Dry eye can occur as a side effect of certain medications.
- Dry eye can also result from focusing on a computer screen for long periods of time.

Dr. Michael Maldonado

- Dry eye can occur at any age; however, older adults are more likely to experience it.

- Research has shown that women experience dry eye more often than men. It can occur at any age and is more common after menopause.

- Dry eye can also be a side effect of certain medications.
Dr. Michael Maldonado

- Some treatment options for dry eye include:
  - Using artificial tears, prescription eye drops, gels, gel inserts, and ointments.
  - Wearing glasses or sunglasses that fit close to the face, such as wraparound shades or ones that have side shields.
  - Getting punctal or tear duct plugs. These are inserted by an eye care professional into the drainage holes where tears drain from the eyes and into the nose. This is a temporary treatment option.

- I would now like to turn things over to Marcela Aguilar to discuss older adults’ knowledge of eye health.
Marcela Aguilar

• Thanks very much, Dr. Maldonado.

• Next, we’ll take a brief look at what older adults know, or don’t know, about eye health. Then, I will turn things back to Dr. Maldonado to discuss key messages and behaviors that can be shared with older adults to help prevent vision loss.
Marcela Aguilar

• Before we move on, I’d like to ask a few quick survey questions.

• First, according to a national survey, what percentage of Hispanic/Latino older adults reported having had their eyes examined? Was it…
  - 92%
  - 73%
  - 35%
  - 10%

• The answer is 73%.
When NEI and the Lions Clubs International Foundation conducted a national survey around eye health and disease, we found some interesting results. Knowledge, attitudes, and practices among people ages 65 and older varied widely. For example:

- 72% of Hispanic/Latino adults reported that loss of eyesight and loss of memory would have the greatest impact on their daily life.
- 14% of Hispanic/Latino adults and 23% of non-Hispanic adults reported being told by an eye care professional that they had an eye disease or condition.
- 73% of Hispanic/Latino adults and 94% of non-Hispanic adults reported having had their eyes examined sometime in the past by an eye care professional.

Source: 2005 Survey of Public Knowledge, Attitudes, and Practices Related to Eye Health and Disease, NEI and LCIF
www.nei.nih.gov/kap

Marcela Aguilar

- When NEI and the Lions Clubs International Foundation conducted a national survey around eye health and disease, we found some interesting results. Knowledge, attitudes, and practices among people ages 65 and older varied widely. For example:
  - 72% of Hispanic/Latino adults reported that loss of eyesight and loss of memory would have the greatest impact on their daily life.
  - 14% of Hispanic/Latino adults and 23% of non-Hispanic adults reported being told by an eye care provider that they have an eye disease or condition.
  - Hispanic/Latino adults are less likely to have their eyes examined. 73% of Hispanic/Latino adults reported having had their eyes examined sometime in the past by a healthcare provider, compared to 94% of non-Hispanic adults.
Marcela Aguilar

• We have one more question…

• What are the greatest barriers Hispanics/Latinos report in seeking eye care?
  ▪ Lack of health insurance or money
  ▪ Finding a trustworthy physician
  ▪ Lack of awareness about eye health
  ▪ All of the above

• The answer is all of the above.
NEHEP also conducted a series of focus groups with older adults across the United States to gain a deeper understanding of their knowledge around eye health and disease. Some of the key findings include the following:

- Among Hispanics/Latinos who participated in the focus groups, the most commonly reported condition was cataract, and most participants indicated they knew what it was.
- Other than cataract, participants lacked awareness or were misinformed of eye diseases and conditions such as AMD, glaucoma, diabetic retinopathy, and low vision.
- The focus groups found that family caregivers play an important role in the healthcare professional–patient relationship and in the process of looking for more information.
- Participants said they will often treat eye conditions with over-the-counter medication or purchase reading glasses rather than seeking medical attention from an eye care professional.
- Healthcare professionals are the most trusted source of information for Hispanics/Latinos. Participants preferred and felt more comfortable with professionals who speak Spanish. For healthcare professionals who do not speak Spanish, familial caregivers and relatives become important and are the main link between patient and professional.
- When exploring why older adults didn’t get their eyes examined regularly, participants mentioned several barriers to eye care, including not having health insurance or money, difficulty finding a trustworthy physician, and not knowing how often they should have a comprehensive dilated eye exam.

Dr. Maldonado, now that we’ve provided some background information about major causes of vision loss among older adults and their knowledge about them, why don’t I turn it back to you so that you can share information about what people can do to protect their sight as they age.
Dr. Michael Maldonado

• Thank you, Marcela.

• We just mentioned that people don’t always know when they should get a comprehensive dilated eye exam. This is something all adults should do as part of their routine health care. We generally recommend that everyone ages 50 and older have one, and how often someone needs to have one depends on their individual risk factors, so it’s something they should talk to their eye care professional about.

• But I want to spend a little time talking about what a dilated eye exam is because this is the single most important thing people can do to make sure their eyes are healthy and they are seeing their best.
Dr. Michael Maldonado

- A comprehensive dilated eye exam allows an eye care professional to take a good look at the insides and backs of the eyes to detect possible signs of eye diseases or conditions.

- This exam is different from the basic eye exam or screening that people have to get new glasses or contacts. During the exam, drops are placed in the eyes to dilate, or widen, the pupils. The eye care professional then uses a special magnifying lens to examine the retina and the optic nerve for signs of disease.
Dr. Michael Maldonado

- I’d like to share this illustration because it really shows how much more of the back of the eye an eye care professional can see when the eyes are dilated; this is really important in helping us detect eye problems early. Remember, even if you aren’t noticing any problems with your vision, it’s still important to have regular eye exams.
**Medicare Benefit**

- Will help pay for comprehensive dilated eye exams for:
  - African Americans ages 50 or older
  - Hispanics/Latinos ages 65 or older
  - People with a family history of glaucoma
  - People with diabetes
- To learn more, visit [www.nei.nih.gov/medicare](http://www.nei.nih.gov/medicare).

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**Dr. Michael Maldonado**

- Medicare will help pay for comprehensive dilated eye exams for:
  - African Americans ages 50 or older
  - Hispanics/Latinos ages 65 or older
  - People with a family history of glaucoma
  - People with diabetes
- To learn more about this benefit, visit [www.nei.nih.gov/medicare](http://www.nei.nih.gov/medicare).
Ways to prevent vision loss

Step #2

• Eat a healthy, balanced diet.

Dr. Michael Maldonado

• The next way to help prevent vision loss is to eat a healthy, balanced diet. Eating nutritiously is good for the entire body, but research has shown that some foods are especially good for the eyes. These include dark, leafy greens, such as spinach, kale, and collard greens, and fish that are high in omega-3 fatty acids, such as salmon, tuna, and halibut.
Dr. Michael Maldonado

- Maintaining a healthy weight is another thing you can do to protect your vision. Being overweight or obese increases a person’s risk for diabetes and other systemic conditions, which can lead to vision loss, such as diabetic eye disease or glaucoma. If you are having trouble maintaining a healthy weight, talk to your doctor.
Dr. Michael Maldonado

- It is also important to encourage older adults to not smoke. Smoking is as bad for the eyes as it is for the rest of the body, and it increases the risk for many eye diseases and conditions, like AMD and cataract.
Dr. Michael Maldonado

• If someone has diabetes, keeping it under control is extremely important in preventing or slowing down the progression of diabetic eye disease. People with diabetes should keep their blood sugar, blood pressure, and cholesterol at normal levels and make sure to take any medications as prescribed.
Dr. Michael Maldonado

- Next, it's important to remember to wear sunglasses and a brimmed hat when outdoors to protect the eyes from too much exposure to sunlight. Make sure to look for sunglasses that block 99% to 100% of both UVA and UVB rays.
Dr. Michael Maldonado

• Wearing protective eyewear when playing sports, doing activities around the home, or working is also helpful in protecting your sight.

• Protective eyewear includes safety glasses and goggles, safety shields, and eye guards designed to provide the correct protection for a certain activity.
Dr. Michael Maldonado

- Last is knowing your family’s eye health history. Talk to your family members and find out if anyone has been diagnosed with a disease or condition, since many are hereditary. This will help to determine whether you are at higher risk for developing an eye disease or condition. Be sure to share this information with your eye care professional.

- I know we’ve covered a lot of information up to this point, but don’t worry about remembering everything. Neyal is going to talk a little more about where you can find the information I covered and more, including how you can share some of this same information with the older adults in your community.
Neyal J. Ammary-Risch

• Thank you, Dr. Maldonado, for that important information.

• NEHEP is committed to the prevention of blindness and the promotion of vision rehabilitation. We know we can’t reach everyone on our own, so we rely on health and community professionals who work with older adults to help us convey science-based, easy-to-understand information about eye health to patients and others they serve across the country.
Resources to help spread the word

- See Well for a Lifetime Toolkit
- Living With Low Vision booklet
- Drop-in article
- Infocards and animations
- NEHEP Vision and Aging Program website
- NEHEP ¡Ojo con su visión! Program website
- Age-related eye diseases Web page
- Outlook

Neyal J. Ammary-Risch

- NEHEP resources you can use to promote eye health to older adults include:
  - See Well for a Lifetime Toolkit
  - Living With Low Vision booklet
  - Drop-in article
  - Infocards and animations
  - NEHEP Vision and Aging Program website
  - NEHEP ¡Ojo con su visión! Program website
  - Age-related eye diseases Web page
  - Outlook

- I will provide more information on each in the following slides.
Neyal J. Ammary-Risch

• The See Well for a Lifetime Toolkit was developed to help professionals who work with older adults convey science-based, easy-to-understand information about maintaining eye health as part of healthy aging. It is intended for use in senior centers, assisted-living facilities, clinics and hospitals, nonprofit organizations, and other community settings. This resource was recently adapted into Spanish.

• The Spanish toolkit contains two modules that can be used for individual educational sessions or that can build on each other as a series. Each module contains a PowerPoint presentation, a speaker’s guide, participant handouts, a promotional announcement, and participant evaluation forms.

• The toolkit was distributed to a select group of social service providers, community health workers, and healthcare professionals who serve Hispanics/Latinos to solicit feedback on the content and to conduct audience testing with Spanish-speaking members of their communities. Results were used to revise and finalize the toolkit.

• We are excited to announce that the Spanish toolkit will soon be available.
The Living With Low Vision booklet, or Cómo vivir con Baja Visión in Spanish, is designed to help educate older adults with vision loss on how vision rehabilitation can help them to maintain or regain their independence and quality of life.

NEHEP also offers a variety of infocards for use in raising awareness about vision rehabilitation.
Neyal J. Ammary-Risch

- NEHEP also has a drop-in article that you can take from our website and use in blogs, newsletters, websites, local newspapers, or other publications. This consumer-friendly resource talks about what older adults can do to protect their vision as they age, including the importance of getting a comprehensive dilated eye exam.
These infocards and animations are designed to educate Hispanic/Latino older adults about age-related eye diseases and the importance of taking care of their eyes.

Organizations can add these cards to or share the animations on their social media pages to inform older adults and the general public about what they can do to keep their eyes healthy and make sure they are seeing their best.
Neyal J. Ammary-Risch

• Here is an example of an animation NEHEP has developed. It is part one of a five-part videonovela developed for Hispanic Heritage Month.

• The episodes will be posted on the NEHEP Facebook and Twitter pages throughout Hispanic Heritage Month.
Neyal J. Ammary-Risch

- The NEHEP Vision and Aging Program Web page is designed to help health and community professionals find educational resources they can use to raise awareness about eye health and the importance of comprehensive dilated eye exams among older adults. In addition to educational materials, we also have links to eye health education research, data and statistics, tips for working with the media, and other resources that can help with program planning.
The NEHEP ¡Ojo con su visión! Program page is designed to assist community health workers in finding Spanish-language educational resources they can use to raise awareness about eye health among Hispanics/Latinos.

Available at
- www.nei.nih.gov/nehep/programs/ojo

Neyal J. Ammary-Risch

- The NEHEP ¡Ojo con su visión! Program page is designed to assist community health workers in finding Spanish-language educational resources they can use to raise awareness about eye health among Hispanics/Latinos.
Neyal J. Ammary-Risch

• Another resource that we have is the age-related eye diseases Web page, which is geared toward the public and provides information about major age-related eye diseases and conditions as well as the importance of comprehensive dilated eye exams in preventing vision loss. People can also find information on financial assistance, tips for finding an eye care provider, and other eye health resources.
Additional resources

*Outlook*

- Provides updates on NEHEP eye health education research, activities, and resources
- Subscribe on the NEHEP website to start receiving quarterly issues

Available at

Neyal J. Ammary-Risch

- I want to mention some additional resources you may find useful in planning health education efforts. The first is NEHEP’s quarterly newsletter, *Outlook*. It provides updates on our eye health education research, activities, and resources. It also includes information from partner organizations. You can subscribe to the newsletter on the NEHEP website.
Neyal J. Ammary-Risch

Finally, I want to remind you that NEHEP is on social media. So, if you or your organization is on any of these platforms, be sure to follow us. We often post public health messages about eye health that you can share.
Contact

- National Eye Institute
  2020@nei.nih.gov
  Phone: 301–496–5248

Neyal J. Ammary-Risch

- Thank you, Dr. Maldonado and Marcela, and thanks to everyone for attending today’s webinar.