

National Eye Health Education Program (NEHEP) Strategic Plan 2020–2023





Executive Summary

Loss of vision is a major public health problem in the United States. Whether it results from eve disease, vision disorders, or trauma, vision loss causes significant disability, loss of productivity, and diminished quality of life for millions of people. The National Eye Institute (NEI) addresses this public health problem through biomedical research, disease prevention, and health promotion programs.

The National Eye Health Education Program (NEHEP) was established by Congress in 1988, directing NEI "to increase its commitment to the prevention of blindness through public and professional education programs and the encouragement of regular eye examinations." NEHEP oversees public and professional education programs on diabetic eye disease, glaucoma, low vision, special population outreach, and vision and aging—with a focus on individuals and populations at higher risk of eye health disorders, including, but not limited to, older people, those with diabetes, African Americans, and Hispanics/Latinos. NEHEP also draws on research supported by NIH and NEI to identify other populations at risk (e.g., Asian Americans, residents of rural communities) and to produce educational materials as needed for professional and public audiences.

NEHEP emphasizes the importance of early detection and timely treatment of eye disease and the benefits of vision rehabilitation. NEHEP also aims to increase awareness among health professionals and the public of sciencebased health information that can be applied to preserving sight and preventing blindness. All of these efforts can improve function and quality of life for people, as well as decrease the economic burden of vision loss, currently estimated at \$139 billion.¹



The NEHEP Strategic Plan 2020–2023 is intended to help NEHEP deliver on its commitment to eye health and the prevention of blindness by providing a framework for partnerships and activities to promote vision health in 6 program areas, outlined in more detail later in this document. This plan is an update to the previous NEHEP Five-Year Agenda 2012-2017 and reflects current NEHEP priorities, including a renewed emphasis on partnership development and evaluation. This plan incorporates input from the NEHEP Planning Group (PG) and builds upon best practices in health education, health literacy and cultural competency, current research, and scientific literature.

Notably, this plan also operates within the broader context of the eye health field. Other guiding documents and initiatives from the field—both internal and external to the National Institutes of Health-will inform and influence the plan over time. For example, NEHEP's strategic vision is directly tied to that of NEI, as well as the research breakthroughs and advances that NEI scientists and grantees will likely unveil over the course of the time period this plan covers. The vision health objectives from the U.S. Department of Health and Human Services' Healthy People 2020 and 2030 initiatives, with their emphasis on evidence-based interventions to preserve sight and prevent blindness, are also important for informing future NEHEP activities.²³

Finally, the National Academies of Sciences, Engineering, and Medicine's (NASEM) 2016 report Making Eye Health a Population Health Imperative: Vision for Tomorrow calls for leaders in the field to make eye health a national priority through a variety of means, including facilitating public awareness about the importance of eye health and providing evidence-based information.4 NEHEP fully supports the vision outlined in the NASEM report.





Introduction

The National Eye Institute (NEI) is pleased to present the National Eye Health Education Program's (NEHEP) Strategic Plan for 2020–2023. NEHEP's overarching goal is to work in collaboration with strategic partners to promote eye health as a public health priority and prevent vision loss through outreach and education. This plan describes how NEHEP will work in the coming years to meet this goal. In addition, this document details NEHEP's objectives, program areas, and evaluation plans as well as the composition and potential reach of the NEHEP Partnership.

NEHEP Goal and Objectives

NEHEP developed the goal and objectives presented in this plan with the assistance of the NEHEP PG to reflect NEHEP's renewed emphasis on partnerships and evaluation. The goal and objectives summarized below reflect current NEI vision health priorities, emerging issues in the field, and lessons learned from the last strategic planning cycle.

Overall NEHEP Goal and Objectives for 2020–2023

NEHEP Goal:

The goal of NEHEP is to work in collaboration with strategic partners to promote eye health as a public health priority and prevent vision loss through outreach and education.



NEHEP Objectives:

Partnerships

- By the end of 2019, restructure the NEHEP Partnership network with a focus on clarifying the role of partners, re-engaging current partners and recruiting new strategic partners (now completed).
- By the end of 2020, establish new relationships and partnership agreements with NEHEP Partnership organizations for activities related to advancing eye health.

Outreach

• By December 2020, develop a targeted outreach and dissemination plan to reach the public, health care providers, eye health organizations, and other stakeholders with NEHEP educational programs and materials. As part of this effort, identify emerging at-risk populations, including people who live in rural areas.

Education Content

- By the end of 2021, increase the range of culturally appropriate and plain language educational materials available, focusing on audiences who have an elevated risk of eye disorders to address the prevention, early detection, and treatment of eve diseases and disorders.
- By the end of 2021, increase the quantity and quality of media outlets covering NEHEP programs and initiatives and the number of stakeholders promoting NEHEP messages.
- By the end of 2022, expand NEHEP's reach in implementing eye health educational programs and distributing materials promoting eye health. This will be accomplished by collaborating with partners and through their networks, reaching more providers, community health workers, families, and individuals with a higher risk of eye diseases and disorders.

Evaluation

- By the end of 2020, develop a research and evaluation plan that details the major NEHEP activities and how NEHEP will monitor and evaluate them.
- By mid-2022, evaluate the major NEHEP activities and make recommendations to inform future NFHFP activities related to healthy vision.



Role of the NEHEP Planning Group

The PG recommends program priorities, participates in communication and outreach activities and strategic planning, provides feedback to NEI on content, and facilitates cooperation among members of the NEHEP Partnership.

The PG typically includes 10 to 15 individuals with expertise in key program areas. The PG members are subject matter experts and represent a variety of disciplines, including ophthalmology, optometry, public health communication and education, and community/special population outreach. Members serve a 4-year term. The term limits bring new experts with new perspectives to the group on a regular basis. Membership criteria include:

- Demonstrated commitment to advancing eye health education
- Expertise in at least one NEHEP program area (e.g., low vision)
- Capability to contribute to the development and promotion of NEHEP
- Technical expertise to develop and enhance NEHEP programs
- Experience in national-level programs with a working knowledge of community-based activities
- Willingness to serve as a spokesperson on behalf of NEHEP at professional meetings and media-related activities
- Experience working with diverse audiences

NEHEP Partnership

The NEHEP Partnership is a national network of more than 60 public and private organizations committed to eye health education. The purpose of the Partnership is to establish ongoing, interactive, mutually beneficial relationships among NEI and its members to promote critical eye health messages, disseminate the latest eye research findings, and facilitate communication with key audiences. Going forward, NEHEP will evaluate opportunities to engage with new partners who fill gaps in NEHEP program areas. See the online NEHEP Partnership Directory for a list of current NEHEP partners.



In May 2018, NEHEP conducted a Partnership analysis to assess the operations of the Partnership over a 5-year period (2012–2017) and identify strengths, weaknesses, and opportunities. Although some partners were active and engaged, the analysis revealed that nearly half of the Partnership did not feel engaged with NEHEP and its activities. In addition, the analysis indicated the need for efforts to better engage organizations serving populations disproportionately affected by eye disease, such as African Americans, Hispanics/Latinos, Native Americans/Alaska Natives, older adults, and people with low vision.

A New Partnership Model

To reflect an emphasis on increased partner engagement, NEHEP introduced a new partnership model in 2018. During the 2020–2023 period, NEHEP will emphasize re-engaging current partners and adding new partners.

NEHEP values the contributions of all organizations in the Partnership. At the same time, NEHEP realizes that each organization has its own priorities, programs, programmatic and financial goals, audiences, stakeholders, and organizational capacity that affect its participation in the Partnership. Therefore, the new approach focuses on identifying and drawing on each organization's unique assets and capabilities and encouraging partners to become more engaged with activities that are mutually beneficial and best suit their needs.

The new model establishes 3 partner levels—contributors, collaborators, and ambassadors—designed to set expectations and clarify agreed-upon partner responsibilities. The levels will provide Partnership members with explicit ways they can engage with NEHEP. Per Figure 1, the level of effort and type of engagement for each partner level will depend on that partner's interests, priorities, and capabilities. NEHEP will develop a Partnership Agreement with each partner to document mutual expectations and help measure progress against the Partnership objectives as a whole.



Figure 1: NEHEP Partner Levels

Levels

Responsibilities

Contributors



- Share NEI and NEHEP eye health resources (e.g., factsheets, virtual reality app) at conferences and grassroots events (see examples at https://www.nei.nih.gov/learn-about-eye-health/resources-for-health-educators)
- Disseminate information to support 2 to 3 of NEHEP's month-long health observances*
- Share updates for NEHEP newsletter

All the responsibilities of the contributor, plus:

Collaborators

Ambassadors



- Contribute to the creation of NEHEP resources and collaborate to develop outreach and training activities
- Integrate NEHEP messages and resources in programs/activities
- Participate in the evaluation of NEHEP programs and materials

All the responsibilities of the collaborator, plus:

- Work with other NEHEP Partnership members to share and leverage resources
- Participate in NEHEP task forces or ad hoc subgroups
- Work with NEHEP to implement evaluation programs to measure the impact of educational activities, e.g., by measuring behavior change
- Contribute to NEI publications and activities that correspond with NEHEP programs
- Implement programs and activities to expand NEHEP's ability to reach and influence people to take steps to protect their vision

^{*}Glaucoma Awareness Month, Low Vision Awareness Month, Healthy Vision Month, Cataract Awareness Month, Healthy Aging Month, National Diabetes Month.



NEHEP Program Areas

NEI is committed to advancing the eye health of all audiences across the lifespan and participates in efforts to bring broad public awareness to the importance of eye health. The following sections provide detail on each of NEHEP's current program areas.

Diabetic Eye Disease

All people with diabetes—of every age and background—have a higher risk of diabetic eye disease, the leading cause of vision loss and blindness in adults ages 20 to 74. When blood sugar is too high, new weak blood vessels can grow in the eye, leading to bleeding, scarring or dangerously high pressure inside the eye. The longer a person has diabetes, the greater their risk is of developing diabetic eye disease.

The main goal of the Diabetic Eye Disease program is to raise awareness among health care providers and those with diabetes that early detection, timely treatment, and appropriate follow-up care can reduce a person's risk of severe vision loss from diabetic eve disease.

Glaucoma

Glaucoma, a leading cause of visual impairment and blindness, causes damage to the optic nerve at the back of the eye. Although early detection and treatment may keep glaucoma under control, those with glaucoma often do not know they have it. There are no warning signs or symptoms in the early stages of primary open-angle glaucoma, the most common form of the disease.



NEHEP Highlights



Live webinar series trains **Community Health Workers** on diabetic eye disease.

In 2018, NEHEP conducted 3 Diabetes and Healthy Eyes Toolkit training webinars for Community Health Workers (CHWs). The training aimed to increase participants' knowledge of eye diseases, specifically diabetic eye disease, introduce participants to the Diabetes and Healthy Eyes Toolkit, and share NEHEP eye health education resources in Spanish. **123 CHWs** from the Asociación de Salud Primaria de Puerto Rico (Puerto Rico), Ventanillas de Salud (nationwide), and Familias Triunfadores (El Paso, TX) received the training. Participants rated the training highly - an average of 4.35 out of 5.



Some populations have a higher risk of developing glaucoma, including African Americans age 40 and older, everyone over age 60—especially Hispanics/Latinos—and people with a family history of glaucoma.

The main goal of the Glaucoma program is to reach and encourage those who have a higher risk of glaucoma to screen for the disease by getting a comprehensive dilated eye exam every 1-2 years.

Low Vision

Low vision is defined as a visual impairment that interferes with a person's ability to perform everyday activities and cannot be corrected by standard eyeglasses, contact lenses, medication, or surgery. The most common causes of low vision include age-related macular degeneration (AMD), cataract, diabetic retinopathy, and glaucoma. Congenital birth defects, injury, aging, and complications from diseases may also cause low vision. The degree of low vision varies with each person.

The Low Vision program is designed to raise awareness about the benefits of vision rehabilitation among people living with vision loss, their family, and friends. Even when surgery or medicine can no longer improve vision, vision rehabilitation can help people with low vision make the most of their remaining sight.

Vision and Aging

With the aging of the U.S. population, vision loss is a major public health concern. Low vision and blindness increase significantly with age, particularly in people age 65 and older.

The Vision and Aging program is designed to increase awareness among health care providers and older adults that vision loss is not an inevitable part of aging. If eye diseases are detected and treated early, vision loss can often be prevented.



¡Ojo con su visión! Eye Health for Hispanics/Latinos

The ¡Ojo con su visión! Eye Health for Hispanics/ Latinos program program aims to help raise awareness among Hispanics/Latinos about the importance of maintaining eye health, as Hispanic/ Latinos are disproportionally affected by eye disease. A major part of the program provides culturally and linguistically appropriate education resources to build capacity among Community Health Workers (CHWs) and provides them with resources for educating and disseminating eye health messages among their community members.

Write the Vision: Eye Health for African Americans

African Americans have a higher risk of many eye diseases and conditions—such as cataract, diabetic retinopathy, and glaucoma—most of which have no early symptoms and can lead to vision loss or blindness. Given the incidence of eye disease among African Americans, NEHEP developed Write the Vision: Eye Health for African Americans in 2017. Write the Vision aims to educate health providers and African Americans age 40 and older about their increased risk of eye diseases and encourage them to make eye health a priority.



NEHEP Highlights



Dr. Rodriguez-Coleman speaks to the nation about common eye diseases in Hispanic/Latinos.

NEHEP Planning Committee member, Dr. Hanna Rodriguez-Coleman, appeared on May 23, 2018 on the Spanish-language Univision Network's ;Despierta América! to discuss common eve diseases in Hispanics/Latinos. The interview reached over 317,958 people when aired before being posted to Univision's website, which has an estimated 656,000 monthly visitors.



Evaluation

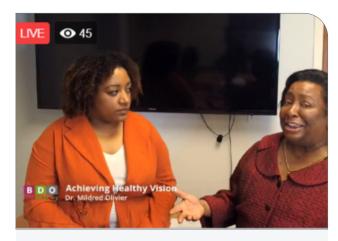
Evaluation efforts will focus on determining the effectiveness of communication strategies and the major program activities—and assessing the impact those activities have on public awareness of the importance of vision health and the steps to take to prevent vision loss. NEHEP plans to conduct several types of evaluation formative, process, and summative—to gain a full picture of the effectiveness and impact of its activities.

Formative Evaluation to Improve the Quality and Effectiveness of Program **Activities**

Formative research activities will depend on the needs and goals of each NEHEP program area and/ or a proposed NEHEP-wide activity. When needed, NEHEP will conduct formative research activities to help shape and guide the development of program goals, strategies, key messages, and audiences. Activities may include needs assessments with partners, pre-testing of messages and materials, literature reviews, and environmental scans.

Process Measures to Assess Communication Strategy and **Program Activities**

NEHEP will collect process measures for all major activities to help describe and assess communication strategy and program efforts. These measures will highlight the direct results of program activities and will indicate if messages and communication products were delivered to the intended audiences.



NEHEP Highlights



Harnessing the power of partnerships to promote Healthy Vision Month.

Each May, NEI commemorates Healthy Vision Month (HVM) to encourage Americans to make eye health and safety a priority and highlight the importance of preventing vision loss and blindness through early detection and treatment. For HVM 2019, NEHEP partnered with 15 organizations to get the word out through social media outlets. For example, NEHEP partnered with BlackDoctor.org to host a Facebook Live event with Dr. Mildred Olivier. With the help of partner organizations, the campaign generated almost 40 million impressions.



For common activities across NEHEP programs such as observance months, partnership engagement, and newsletter distribution, we will capture a standard set of process measures. Process measures may include, but are not limited to, social media measures, paid digital metrics, earned media metrics, website metrics, email metrics, and conference participation. NEHEP will capture and report on these measures and use them to monitor and summarize progress towards meeting the overall NEHEP goal and objectives. NEHEP will also describe any immediate recommended changes to program activities based on the findings.

Summative Evaluation to Assess **Program Outcomes**

A new focus of this strategic planning cycle is to move beyond process measurement to gauge the effect that NEHEP activities have on influencing eye health behaviors (e.g., obtaining dilated eye exams). This level of evaluation can be challenging to implement across a national-level program like NEHEP. Therefore, NEI, in collaboration with organizations from the NEHEP Partnership, will develop and implement pilot projects to assess program outcomes. The pilot projects will capture the effects of program activities for specific NEHEP programs (e.g., ¡Ojo con su visión!), as well as the effects on interpersonal influencers (e.g., Community Health Workers). The pilot projects will aim to measure a range of different outcomes that may include, but are not limited to, changes in behavioral intentions, attitudes and beliefs, knowledge and awareness, and skills and self-efficacy. We will use the results of these pilot projects to refine future communication tactics and strategies.

Conclusion

By the end of 2023, NEHEP hopes to see a significant increase in vision awareness, knowledge, and action towards preventing eye disease across a broad range of stakeholder audiences, reducing vision impairment, and educating those with uncorrectable vision about assistive devices that improve quality of life. As a major public health problem that causes significant disability, loss of productivity, and diminished quality of life for millions of people, loss of vision needs to be addressed by a multi-pronged strategy that includes communication, partnership, and engagement with stakeholder audiences as significant factors.





References

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