

# AVLNC Public Awareness Committee Plan

May 23, 2022

## **AVLNC Goal**

Ensure all older people with vision loss receive high quality comprehensive specialized vision rehabilitation, including low vision services.

### **Key VSA-Identified Issues**

Barriers to older people with vision loss accessing tools and services necessary for living an independent, engaged and meaningful life, include, but are not limited to:

- Vision issues are largely ignored in public policy; one important example is that vision loss and related issues are not mentioned in the Older Americans Act.
- A dearth of understanding of age-related vision loss and corresponding professional interventions for older people amongst long-term care and healthcare providers, the aging network and even eyecare professionals.
- Severely inadequate public funding for vision rehabilitation services for older people resulting in inadequate numbers of qualified personnel and readily available community-based services in many areas of the country.
- Vision rehabilitation services, low vision and other optical devices are not covered by Medicare and Medicaid.
- Extremely limited funding for accessible technology and training on its usage.
- Limited, inaccessible & unaffordable public transportation options.
- Social determinants of health obstruct the timely and effective treatment of chronic medical conditions including age-related vision loss.

## Key VSA Audiences

- Vision Rehabilitation Community
  - National organizations
  - RSA, DOE, State Agencies, TAC's
  - Community-based service providers
- Elected Officials at the federal and state levels
- Medical professionals
  - Eyecare professionals: ophthalmologists and optometrists
  - Other Medical professionals: geriatricians and gerontologists and OT's
- Policymakers
  - Aging Policy Makers: Administration on Community Living (including CIL's), National council on Aging, National Area Agencies on Aging, Gerontological Society of America, AARP, Area Agencies on Aging, Long-term Care Providers, Assisted Living
  - Healthcare Policy Makers: CDC, NEI, NIH, CMS, Surgeon General, Home Healthcare Agencies and staff
- Older People (including those with vision loss) and their families
- ACB, NFB, BVA, FFB, NOAH (Consumer Associations)
- Research Partners including NASEM and CDC
- Universities with Relevant Personnel Preparation Programs

## **Awareness Committee Plan Goals**

*(with related 3-Year AVLNC Targets)*

**Goal #1: Reframe the critical issue of senior vision loss to materially change public perception & behavior**

- *Normal aging of the eye does not lead to vision loss; vision loss results from eye disease; the most common eye diseases in America are age-related.*
- *Vision loss is recognized by HHS & CDC as a chronic health condition; it is included in the Chronic Care Act, and vision-specific issues and solutions are included in the Older Americans Act.*

**Goal #2: Significantly raise national awareness of the crucial issue of senior vision loss (among key audiences) and its profound impact in the US**

- *Vision loss is a chronic health condition. It is pervasive and significantly impacts older adults, their families and communities.*
- *National Awareness Campaign on Aging & Vision Loss is funded, executed, and adopted by national partners.*

**Goal #3: Address pervasive non-medical factors (SDOH) to reduce barriers and significantly increase access to adequate vision services for all senior Americans**

**Goal #4: Educate key vision industry stakeholders, including vision rehabilitation organizations, eyecare, occupational therapy, geriatrician & gerontology professionals (including long-term care & healthcare providers, the aging network & eyecare professionals) to maximize senior vision loss intervention & service referrals**

- *Eyecare professionals recognize that vision rehabilitation is a part of the continuum of care, and appropriate referrals are made routinely*
- *National vision rehabilitation service/outcome data will be disseminated (e.g., Big Data Project)*
- *Communicate best practices for the combination of Aging & Vision Rehabilitation Services will have been established, rolled out, and accepted by professional networks*
- *The Coalition will have established a collaborative relationship with at least 6 National Organizational Partners*
- *Will be presenting at all relevant major Aging Conferences*
- *University programs for eye care, occupational therapy, geriatrician & gerontology professionals will include aging and vision loss curricula and facilitate practicum opportunities in community-based vision rehabilitation programs; and those for vision rehabilitation will include specific aging curricula*

**Goal #5: Maximize access to vital vision services for the seniors/consumers who need them**

- *Older people with vision loss are included as a targeted population in aging policy, public health initiatives (i.e., Healthy People 2030), and health coverage*
- *Vision rehabilitation services, low vision, and other optical devices are covered by Medicare and Medicaid.*

**Goal #6: Educate key officials, policymakers, and other stakeholders to significantly increase senior vision loss industry funding (at all levels - federal, state & local).**

- *Federal grants will be available again to establish new community-based vision rehabilitation programs in severely underserved parts of the nation.*
- *Other funding at state and local levels will be available and utilized by community-based vision rehabilitation providers*
- *AVLNC will have strategic alliances with national partners and policy champions who agree to include aging & vision loss in federal legislation and other policy documents*

## Plan Strategies + Executional Tactics

### Forge National Strategic Partnerships & Marketing Alliances

- Confirm organizations + strategic partners (e.g., MSU) expected to yield the highest reach & impact among key target audiences
  - Develop target partner list
  - Prioritize outreach
  - Develop pitch/script
  - Accomplish partner outreach & confirm the scope of partnership/support needs
  - Manage outreach reports + provide committee updates
- Ad Council
  - Implement & manage all aspects of the Ad Council national senior vision research project
  - Develop a national reframing/awareness campaign (based on AC research)
    - Secure an Ad Council national advertising campaign, or
    - Secure pro-bono ad agency support & pro-bono media/forged national partnerships

### Identify National Vision Networks (focused on prevention & treatment) and Build Vision Rehabilitation Pathway/Referrals

- Identify key networks + accomplish outreach
- Provide content to cross-promote vision rehabilitation services

### Disseminate Education, VSA Campaigns, + Resources to Key Audiences & Maximize Activation

- VSA Campaign Integration + Positioning
  - Confirm how best to integrate various campaigns, including “Reframed Vision positioning & messaging,” Big Data Project, Time to Be Bold, etc.
  - Integrate broader target education goals by audience (per above plan goals)

- Draft cohesive framework + positioning
  - Refine positioning + develop project pitch (Big Data Phase 1 - including umbrella BD, plus parse key BD Project content/highlights into actionable topics/themes. Reframing – Phase 2 with Ad Council)
  - Develop consumer-facing/media sub-branding for the Big Data Project–e.g., The State of Vision Loss - Big Data Insights.
- Obtain committee approvals + provide ongoing committee updates
- Research National Consumer & Trade Media reaching key audiences
  - Develop comprehensive press/media outreach list (including media contacts, contact information, editorial calendars, closing dates, etc.) for trade/industry verticals + consumer media
- Generate National + BD State PR & Placements/Features
  - Public Relations
    - Develop a press kit (backgrounder, project one-sheets, calendar, etc.)
    - Draft a series of press releases (secure quotes & approvals), including a topline project release, plus a series of releases aligned by key BD project themes/topics
    - Develop a list of content/assets needed for outreach (print articles, digital content + imagery)
    - Accomplish press outreach/pitches to trade, consumer media, social good, + other
    - Create talking points & accomplish interview prep
    - Coordinate any press interviews
    - Obtain committee input, accomplish outreach + provide ongoing committee updates
  - Forge Broader Content-based Media Partnerships
    - Pitch a national “The State of Vision Loss” magazine or newspaper column (to be syndicated)
    - Draft media partner/agency partner content (e.g., articles + other), and develop related creative assets
    - Obtain any approvals + provide ongoing committee updates
  - Press monitoring - accomplish ongoing press searches, set google alerts, + aggregate all features with links for the committee.

- Optimize VSA Public-facing Assets (prioritize over 2+ years)
  - Develop updated VSA web content (or a microsite) to deliver enhanced content + materials
    - Update website content (monthly)
  - Develop VSA social media campaign(s) + other creative assets TBD
  - Blog
    - Blog topic development, editorial calendar, blog post copywriting & image selection, posting to the blog platform(s)
    - Push to social + added media releases (key blogs as articles)
  - Podcasts
    - Podcast topic development, develop an editorial calendar, accomplish guest outreach
    - Confirm podcast hosting sources, coordinate podcast “virtual studio,” develop podcast-specific questions, prep host, coordinate podcast filming/recording, & host, edit, + post/disseminate podcasts
  - Public-facing campaign newsletter - highlights campaign news, success stories, impact, available assets, etc.)
    - Phase 2 (Phase 1 agency newsletter – see below)
  - Obtain any approvals + provide committee updates
  
- Key Stakeholders
  - Provide actionable BDP & other campaign information + Tool Kit for Key Stakeholders
    - Create a tool kit that makes the Reframing, Big Data project + Time to Be Bold content accessible for Key Stakeholders, including vision service providers + others (release in stages)
      - Identify components needed, including BDP one-sheet
      - Develop components/assets
        - Parse content by theme and align components to support key business areas/staff – CEO/Agency leads, Development & Marketing leads, etc., to drive awareness of services available, service referrals, + funding
          - Branded marketing components highlight/disseminate key big data themes/insights, e.g., PR release series, articles/columns (for local + newsletter use), newsletter features, website banners + content, social media campaign, etc.
          - Development content that supports agency funding outreach (e.g., government, foundation, corporate + individual funding overviews – for LOIs + applications/grant narrative support)
    - Obtain any approvals + provide ongoing committee updates



- Activation - Ongoing education for Key Stakeholders  
Develop Activation Plan, including:
  - Townhall + Webinars to disseminate Reframing & BD projects
  - Presentation highlighting overall project benefits/impact/use, plus individual content/sessions aligned with key takeaways/themes.
    - Consider separate training session webinars for leadership, marketing & development staff
  - Monthly newsletter for Key Stakeholders (+ others) - highlights campaign news, agency leader quotes + success stories, tips on using data/ increased marketing + development impact, available assets, etc.)
- Monitor activation levels to maximize engagement + use of tool kit, education series, etc.
  - Accomplish periodic outreach to survey Key Stakeholder activation levels (and value of tool kit/assets for development + marketing staff)
    - Obtain quotes + success stories (for newsletter + website)
  - Present findings to the committee for optimization/refinement of activation plan
- Conferences & Events - Disseminate Content via High-visibility Conferences & Events
  - Develop a comprehensive list of national conferences & high-visibility events (that attract our key audiences/stakeholders)
    - Confirm conference presenter/research poster presentation deadlines, submission costs & speaker/presenter requirements, etc.
    - Create a comprehensive conference/event calendar, reflecting key dates & deliverables
    - Develop a related budget + secure funding
  - Develop initial conference/event presentation(s) – PPT + BD posters (iterate for various uses)
  - Training sessions with committee/volunteer presenters
  - Ongoing committee updates

### **Develop + Disseminate a Vision Services/Resources State & Added Agency Matrix**

- Determine optimal presentation method for trade + consumer audiences (e.g., consider organizing/presenting state service providers at the county level)
  - Review existing agency information + reformat data
  - Post on VSA website + other national + state sites/partner sites
  - Committee input + updates

**Secure Funding to Fuel Awareness Committee Plans** (e.g., Ad Council, tool kit, conferences, podcasts, etc.)

- Research available government, foundation, corporate + individuals (grants + funding priorities)
  - Obtain input on the potential funder list from committee + VSA (incl. development lead)
  - Prioritize outreach & draft LOIs + applications
  - Provide ongoing committee updates
  
- Secure Grant to Underwrite National Digital VSA Campaigns
  - Apply for grant
  - Develop themed matrix, campaigns + keywords
  - Retain agency to develop + manage digital campaigns
  - Manage agency + provide committee updates

## **Added Plan Documents**

Please also refer to ALVNC Awareness Committee's:

- 3-Year Tactical Execution Plan
- Awareness Committee Subcommittees
- Ambassador + Volunteer Roles

## Important Background

AGING & VISION LOSS THEORY OF CHANGE (October 2020)

Losing vision later in life is an overlooked yet rapidly growing public health crisis, which has been exacerbated by COVID-19.

At least 12 million Americans over the age of 60 report significant difficulty seeing resulting in reduced ability to engage in necessary daily tasks or activities they once found enjoyable. Accurately taking medications, getting groceries, cooking, reading mail, and other mundane chores can seem impossible without assistance. The current pandemic-related restrictions have intensified social isolation, loneliness, anxiety and dependence resulting in diminished physical and mental health of older people with vision loss. Without intervention, these devastating effects can have a lasting effect. Mounting evidence supports a link between vision impairment and risk for dementia and mild cognitive impairment. This correlation is particularly notable in women, and those with more significant visual impairment are at greater risk.

While vision loss is not a natural part of aging, research has shown that at least half of Americans aged 65 and older are at high risk of eye diseases that can lead to impaired sight such as glaucoma, macular degeneration and diabetic retinopathy. The CDC estimated that eye disorders and vision loss are among the costliest conditions to the U.S. economy at more than \$145 Billion. Based on ever-increasing healthcare costs and an aging population, this cost will continue to grow through 2050.

**The magnitude of this crisis requires a paradigm shift.**

**Older People Living with Blindness and Low Vision are:**

- A growing and diverse population *spanning three generations*
- Valuable and significant contributors to employers, family and community life
- Deserving of respect and compassion
- Capable of self-determination regarding their lifestyles
- Indispensable resilient partners in creating a livable world
- In need of specialized services & accessible resources, tools and environments

**In order to be Effective, Policies, Practices and Systems in Support of Older People Living with Blindness & Low Vision must be:**

- Included in social determinants of health acknowledging the unique risks of aging with vision loss
- Developed in collaboration with experts & older people skilled in self-advocacy
- Culturally competent
- Equitably funded

**Factors Contributing to the Problem**

Barriers to older people with vision loss accessing tools and services necessary for living an independent, engaged and meaningful life, include, but are not limited to:

- Vision issues are largely ignored in public policy; one important example is that vision loss and related issues are not mentioned in the Older Americans Act.
- A dearth of understanding of age-related vision loss and corresponding professional interventions for older people amongst long-term care and healthcare providers, the aging network and even eyecare professionals.
- Severely inadequate public funding for vision rehabilitation services for older people resulting in inadequate numbers of qualified personnel and readily available community-based services in many areas of the country.
- Vision rehabilitation services, low vision and other optical devices are not covered by Medicare and Medicaid.
- Extremely limited funding for accessible technology and training on its usage.
- Limited, inaccessible & unaffordable public transportation options.
- Social determinants of health obstruct the timely and effective treatment of chronic medical conditions including age-related vision loss.

**Ideally, older people with vision loss will successfully age in place, engage in meaningful activities, and access resources, professional vision rehabilitation services, independent living tools and employment when desired.**

**Actions that can facilitate this change are as follows:**

**Awareness:** A National Awareness Campaign conducted in collaboration with all national blindness organizations, MSU OIB-TAC, State VR Agencies, community rehabilitation providers and other national partners outside The Field.

- Develop strategic partnerships with eyecare and other medical professionals, the aging network, allied healthcare entities and integrated care collaboratives.
- Develop toolkits and training videos for dissemination and use by partners and coalition members.
- Hire a PR firm to develop and conduct an awareness campaign.

**Outcomes:** It is generally understood that . . .

- Normal aging of the eye does not lead to vision loss; vision loss is the result of eye disease; most common eye diseases in America are age-related.
- Vision loss is a chronic health condition. It is pervasive and has a significant impact on older adults, their families and communities.
- Vision loss is recognized by HHS and CDC as a chronic health condition; is included in the Chronic Care Act, and vision specific issues and solutions are included in the Older Americans Act.
- Vision rehabilitation is the process of treatment and education that helps individuals who are blind or have low vision attain maximum function, well-being, personally satisfying levels of independence, and optimum quality of life.
- Vision rehabilitation is a quality standard of care and medical, allied health and aging network professionals routinely seek to identify and connect older people experiencing vision loss to those services.

**Policy & Funding:** National and statewide advocacy to assure relevant policy and legislation such as OAA referencing vision-specific issues and services and; promotion of the recognition of vision loss as a chronic condition and Medicare/Medicaid covering vision rehabilitation, low vision devices and access technology; and that public funding of services for this population is significantly increased.

- Advocate for the creation of federal interagency committee on Aging & Vision Loss in accordance with the 2016 NASEM recommendations
- Advocate for significantly increased public funding for Older People with Vision Loss with annual cost of living increases (from Rehab Services Admin for OIB)
- Explore funding opportunities with the Administration for Community Living
- Prepare draft language for incorporation in specific documents like OAA
- Participate in coalitions in pursuit of Medicare/Medicaid coverage of vision rehabilitation services and devices (low vision and technology)
- Develop toolkits demonstrating alternative funding strategies used in state & local government and share with all members to explore applicability
- Prepare & distribute specific briefing papers that educate policy makers on all significant aspects of aging & vision loss

**Outcomes:** Public funding for the following interventions is increased at least ten-fold:

- Professional vision rehabilitation services
- Qualified personnel training
- Devices & technology with training on usage for older people with vision loss

**Data & Research:** Assure meaningful vision loss incidence and prevalence data is collected and shared; that vision rehabilitation outcomes are measured and disseminated widely; and that the research recommended in the 2016 NASEM Report is conducted to establish evidence-based programming and the efficacy of vision rehabilitation services for funders.

- Advocate with CDC for consistent collection of incidence/prevalence data.
- Compel Healthy People 2030 vision objectives to include AT & vision rehab.
- Develop and promote the use of an outcome measurement tool for professional vision rehabilitation services by all service providers in the field.
- Initiate vision rehab services research projects in higher ed and other institutions in accordance with the 2016 NASEM Report on Vision.
- Collaborate with NASEM on topic workshops culminating in a report to support national policy recommendations concerning aging & vision loss.

**Outcomes:** National data is regularly collected and disseminated on an annual basis

- Documenting the incidence, prevalence and co-morbidity of all older people with vision loss; with cross reference to social determinants of health
- Documenting evidence-based professional vision rehabilitation service outcomes
- And national evidence-based research has established the value of vision rehabilitation services and programming.

**Access:** Establish a “no wrong door” system of care for the identification of older people experiencing vision loss and their connection to professional services and accessible solutions in support of independent living and employment.

- Develop and disseminate screening tools to partners in aging and allied health networks including long-term care; create streamlined process for referral to vision rehabilitation services.
- Field-wide promotion of standardization and best practices for vision rehabilitation services amongst all service providers in the field.
- Advocacy for inclusive design, affordable community-based transportation and 508 compliance of all communication outlets.

**Outcomes:** Older people with vision loss have easy access to . . .

- High quality professional vision rehabilitation services throughout the U.S.
- Accessible living environments that accommodate living with vision loss
- Information through accessible technology
- Affordable transportation options