Improving later life for people with sight loss

Summary
Society is in the midst of a longevity revolution. The prevalence of sight loss increases with age: currently there are almost 2 million people aged 65 and over living with sight loss in the UK. This number is rising because of the ageing population yet the number receiving support is falling. The number of blind and partially sighted people receiving social care fell by 35% between 2008 and 2013.

The resulting unmet need had considerable consequences for wider health and wellbeing. Compared with the general older population, older people with sight loss:

- Are more likely to have other health conditions
- Are more likely to have difficulty accessing health services
- Are more likely to live in poverty
- Are less likely to be able to shop for everyday necessities without assistance
- Are less likely to play as much sport as they would like to
- Are more likely to experience chronic pain
- Are more likely to have problems with mobility outside the home
- Have greater need for services
- Are more likely to live in poor quality housing
- Are more likely to experience falls
- Are more likely to have additional disabilities
- Are more likely to report having poor quality social relationships
- Are more likely to have negative views of their neighbourhood.

Age UK, RNIB and people in later life who are experiencing sight loss have developed an agenda for action to respond to the challenge of sight loss in an ageing society.

We look forward to working with partners and colleagues across the voluntary, statutory and private sectors, as well as with many older people, to implement our recommendations.
Key recommendations

One: Empower older people to manage their eye health
Maintaining eye health is a key part of ageing well and supporting older people to live an active, healthy life. Older people are empowered to look after their eye health, and to manage their independence, by improved awareness and access to the right information at the right time, including entitlements under the Care Act 2014.

Two: Involve older people
Older people should be actively engaged and involved in the co-production of services, policy and strategic development in way that is both accessible, and relevant to their interests.

Three: Improve professional awareness
Practitioners, specialists and care providers who are regularly in contact with older people need greater awareness of eye health and sight loss so that they can identify people with sight loss and meet the needs of older people with multiple conditions.

Four: Improve access to support at diagnosis and beyond
We need to connect with older people when they are losing their sight, offering them information, advice and access to the agencies that can provide support to navigate the system. Sight loss advisers, integrated care and partnership working can deliver seamless transitions between specialist and general services and person-centred packages of support for blind and partially sighted older people that recognise their social, emotional, practical and medical needs.

Five: Improve access to peer support and emotional support
People need more than clinical and practical support to cope with sight loss in later life. Improved access to peer support groups and services can be invaluable in meeting these needs; it gives access to emotional support, advice and new social connections.

Six: Be ready for ageing and sight loss
Ensuring that older people with sight loss are able to live healthy and active lives is not just a matter of providing the right services. It requires a whole-system response from policy makers, commissioners and practitioners to make communities ready for ageing with sight loss.

For our full report see:
rnib.org.uk/improvinglaterlife
ageuk.org.uk/professional-resources-home/research/reports/health-wellbeing/older-people-with-sight-loss