

THINK OF VISION

A Guide for Teachers of School-Aged Children

A vision disorder can develop at any age during childhood or adolescence. For school-aged children, 1 in 4 will have a vision disorder requiring treatment. When vision disorders are identified and treated early, a child's health and education benefits. Children whose vision problems remain undiagnosed and untreated, or who do not follow the eye doctor's prescribed treatment, may struggle in school, making learning and teaching challenging.

If you repeatedly observe a student exhibiting one or several of these signs, THINK OF VISION! Ask the parent or school nurse to schedule the student for a comprehensive eye exam with an eye doctor (optometrist or ophthalmologist).

APPEARANCE:

- Eyes are cloudy, red, watery, burning, or itchy
- One or both eyes turn, wander, or have unequal pupil size
- Eyelid is droopy, encrusted, or swollen

BEHAVIORS:

- Frequently blinking, squinting, frowning when concentrating, or rubbing eyes
- Unusual body posture or head turn when looking at distant objects (e.g., whiteboard)
- Poor social interaction
- Unable to focus or maintain attention
- Avoidance: playing outside, joining in games, high absenteeism
- Difficulty coordinating hand/eye movements (e.g., catching a ball)
- Clumsiness
- Overactive or lethargic classroom behavior

COMPLAINTS:

- Sensitivity to bright light
- Repeated headaches, dizziness, or nausea
- Blurred or double vision

WHEN READING, WRITING, OR DOING CLOSE-UP WORK:

- Difficulty with letter formation, letter reversals, spelling, or written language
- Difficulty focusing on schoolwork for long periods of time / needs frequent breaks
- Rereads, skips lines, or loses place more than peers
- Closes or covers one eye, tilts or turns head, or lays head on desk
- Misaligns digits, columns, or numbers
- Writing strays from lines on ruled paper
- Irregular writing or spacing between words
- Tires quickly when reading
- Holds books close to face

EDUCATIONAL CONCERNS:

A comprehensive eye exam from an eye doctor should be part of the evaluation process with any educational concern, especially if a student has:

- Developmental delays or other disabilities
- An IEP or will be enrolled in Special Education
- Reading challenges
- Academic performance below peer level
- High risk of dropping out of school



**Prevent
Blindness**
Our Vision Is Vision.



**Children's Vision
Massachusetts**
Open Eyes. Open Doors.

Visit NationalCenter.PreventBlindness.org
for more information.

Eyeglasses and Contact Lenses are Prescribed Treatments!

Blurry vision will not correct itself and needs evaluation by an eye doctor. When used as prescribed, eyeglasses and contact lenses allow clear images to be received, transmitted, and quickly interpreted by the brain. Vision can change as a child grows. Frequent updates in prescriptions are common, and necessary.

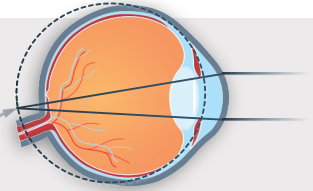
How a child sees with:



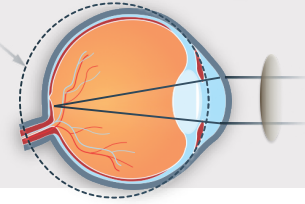
HYPEROPIA (*blur at near*)

HYPEROPIA

Light rays fall behind retina



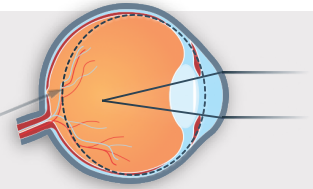
With correction, light rays fall on retina



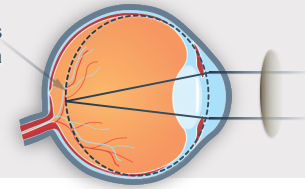
MYOPIA (*blur at far*)

MYOPIA

Light rays fall in front of retina



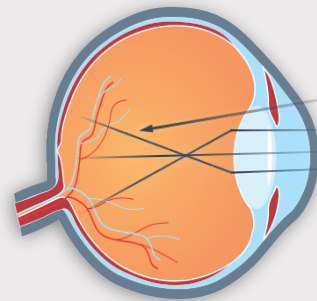
With correction, light rays fall on retina



ASTIGMATISM (*blur at any distance*)

ASTIGMATISM

Light rays entering the cornea do not focus at a single point, thus causing **distorted** vision at any distance



In research, consistent use of vision correction in school improved:

- » Academic progress in reading, vocabulary, and math
- » Focus and attention span during lessons
- » Classroom participation and interaction
- » Confidence and behavior
- » Satisfaction with school

Helpful Teacher/Classroom Support:

- » Know which students have been prescribed vision treatment
- » Understand how the prescribed treatment is to be used
- » Along with parents, set the expectation for wearing of vision correction as prescribed
- » Address peer teasing about wearing eyeglasses