

Access to psychological therapies for people with sight loss and depression: what is the evidence?

This publication summarises findings from research commissioned by Thomas Pocklington Trust to review the evidence about access to psychological therapies for people with sight loss who experience depression. The research was conducted by Dr Ian Petch, Department of Psychology, South West London and St. George's NHS Mental Health Trust and South West London Academic, Health and Social Care System.

Summary findings

- There is a clear association between visual impairment and increased risk of depression.
- The published literature suggests that depression adversely affects the rehabilitation outcomes of people with visual impairment.
- The published literature suggests that visual functioning is affected by levels of depression when comparing people with the same visual acuity but differing levels of mental wellbeing.
- Rehabilitation programmes require depression-specific interventions to address issues such as lost sources of pleasure and confidence.
- People with visual impairment who access an Improving Access to Psychological Therapies (IAPT) service, appear, on average, to present with similar levels of depression and anxiety as those without a visual impairment, are equally likely to remain in treatment and equally likely to engage in routine outcome measurement.
- The IAPT data has significant limitations as a result of poor recording of information regarding sight loss.
- Interviews with visually impaired people indicate that initiatives to improve recognition of depression and access to services could make better use of support staff, family and carers where the person is less likely to be in contact with a GP or professional.



- Evaluation of a brief training workshop with peer, professional and lay individuals who support people with sight loss suggests confidence in identifying depression and supporting a person with sight loss to access treatment can be enhanced.
- More extensive training may improve recognition of depression in people with sight loss in addition to enhancing a facilitated pathway to psychological therapies.

Background

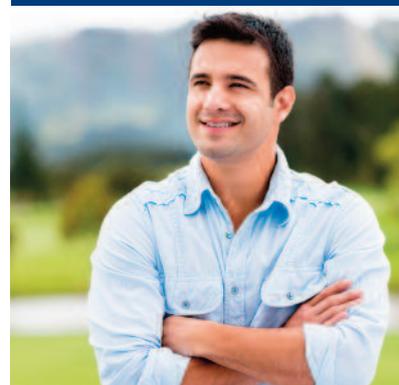
Around two million people in the UK are living with sight loss (Access Economics, 2009). Being diagnosed with an eye condition can lead to anxiety, worry and uncertainty about the future (Norowzian, 2006; Royal National Institute of Blind People, 2007; Thurston, Thurston and McCleod, 2010). This report focuses on one element of this type of response to sight loss – the association between sight loss and depression.

Visual impairment is a risk factor for depression among adults. Recent data suggests that among those accessing low vision rehabilitation services as many as 43 percent have significant depressive symptoms while almost 75 percent of these were not being treated for that depression (Nollett et al, 2016). In 2010 the Improving Access to Psychological Therapies (IAPT) programme was opened in England to adults of all ages. This programme aims to support the implementation of evidence based treatment services in primary care for people experiencing depression and anxiety disorders.

Research aims

The aims of the research were to:

- Provide an overview of the links between visual impairment and depression, the relevance of psychological treatments provided by IAPT services and their effectiveness in supporting people with visual impairment and depression;
- Identify and test an opportunity to improve access to psychological therapies for people with visual impairment experiencing depression;
- Inform further development of IAPT services and vision support services to enable greater use of, and improved benefits from, the support IAPT services can offer people with sight loss.



Research methods

The review took place between January and November 2015 and involved three main elements:

- A review of the published literature on vision impairment and depression and examination of national data regarding access to psychological therapies.
- Scoping meetings and workshops with people with visual impairment and key professionals and lay individuals supporting people with visual impairment working in statutory and voluntary organisations in south west London.
- The testing of introductory training workshops to improve confidence in recognising depression in people with visual impairment and supporting them to access treatment

Findings

1 The state of current evidence

Prevalence

The published literature demonstrates a clear association between visual impairment and increased prevalence of depression. These findings apply to those using low vision rehabilitation services and community samples irrespective of their current use of associated support services.

Pathways to depression

The link between visual impairment and depression appears to be particularly connected with the extent to which someone with sight loss is able to carry out activities of daily living rather than visual impairment itself. The literature suggests there may be a range of contributory factors not specific to sight loss but which are more likely to arise in association with sight loss, including reduced levels of income, reduced access to valued activities or multiple disabilities.

Impact of depression on visual ability and rehabilitation outcomes

In addition to the personal, psychological and health costs of depression, the published literature suggests that depression adversely affects the rehabilitation outcomes of people with visual impairment. When outcomes are measured in relation to a person's overall ability to perform activities that depend upon vision, depression has been identified as one of the strongest independent contributing factors (Goldstein et al, 2014). Additional evidence



suggests that for those receiving vision rehabilitation, instrumental interventions aimed at improved adaptation result in limited improvement in depression. This might indicate that vision rehabilitation programmes require depression-specific interventions to address issues such as lost sources of pleasure and confidence (Reeves et al, 2004; Nyman, Gosney and Victor, 2012).

2 Access to support and psychological treatments

National initiatives to address the underutilisation of effective psychological treatments for depression include the Improving Access to Psychological Therapies (IAPT) programme. National data available from the Health and Social Care Information Centre suggests that IAPT services are recruiting very small numbers of people with visual impairment for the treatment of common mental health problems.

The data illustrates that across the IAPT sites the average percentage of people referred and allocated with the coding 'sight' as a disability label was 0.45 percent. With about 1 in 30 people in the UK having visual impairment the expected referral rate in IAPT would be closer to 3 percent.

The data varies across the IAPT services suggesting that some IAPT services do not recognise and record sight related problems as a disability. It is not possible to determine from the available data whether the low referral rate is due to a lack of recording or identifying visual impairment or very low recruitment of people with visual impairment into treatment. The data may simply be consistent with the research evidence indicating that depression experienced by people with visual impairment, particularly in older people, is often unrecognised (Fenwick et al, 2009; Renaud and Bédard 2013) and there are no standard screening procedures in low vision support or rehabilitation services.

Accessibility should also be considered in relation to different stages of the treatment process in IAPT. Inspection of the data suggests that when people with sight loss are referred to IAPT services:

- the proportion who enter treatment (79 per cent) is no lower than for other disability groups or those listed as having no disability
- the proportion who complete treatment (59 per cent) appears to be similar to that reported for other disability groups and marginally lower than those listed as having no disability



- the proportion of people entering and completing treatment who meet or score above the threshold levels on standard measures for probable presence of depression or an anxiety disorder is similar across the disability groups and lower than for those listed as having no disability

The data suggests that where people with visual impairment have access to IAPT services, on average, they are equally likely to remain in treatment, equally likely to engage in routine measurement of progress and appear to present with similar levels of severity of depression and anxiety as those without a visual impairment. This may suggest that IAPT services are proving to be just as appropriate for people with visual impairment as they are for people without visual impairment.

3 The effectiveness of IAPT services for people with a visual impairment

Regarding outcomes, IAPT service data shows reliable improvement – when a person shows a decrease in anxiety or depression – is similar across the groups except for ‘all other disabilities’ which appears lower. Rates of reliable deterioration – when their level of anxiety or depression has increased – are similar across the groups.

People with sight loss have a slightly higher rate of recovery and reliable recovery – when their anxiety or depression has decreased below a set level at the time of completion of treatment – than those with other disabilities, but a slightly lower rate than those with no disability or no disability code recorded.

A more conclusive evaluation of the effectiveness of IAPT in helping people with visual impairment is only possible where there are substantial increases in the number of people identified as having visual impairment referred to IAPT services.

4 Stakeholder perspectives

Stakeholders provided views on the issues of access to treatment and support for people with visual impairment who may have mental health or emotional wellbeing needs. People with visual impairment suggested that initiatives to improve recognition of depression and access to services could make better use of support staff, family and carers in enabling a pathway to mental health services when the person with visual impairment is not in contact with a GP or other professional.

Stakeholders also suggested that a focus on identifying depression will involve establishing rapport and trust, recognising mental health needs against a background of adjustment to sight loss



and offering multiple opportunities for support. Depression can emerge at different stages of a person's response to sight loss and it is important to recognise different states of readiness to acknowledge it.

Both formal and volunteer support staff suggested that they need to be equipped with the necessary knowledge and skills to identify the possibility of depression and support access to appropriate services.

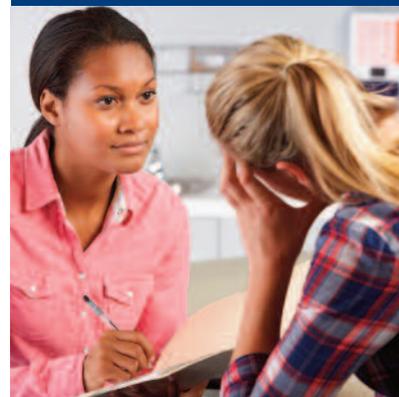
5 Training to improve confidence in talking to people with sight loss about depression

The review results suggest one of the key challenges to improving access to psychological therapies for people with visual impairment and depression lies in the sensitive identification of depression. This will need to operate across a pathway that is broader than a traditional healthcare system as people with visual impairment are often receiving support from non-statutory or non-healthcare providers and may have limited routine contact with health services. The final phase of this review therefore focused on the piloting of a brief training package for volunteer participants aimed at improving knowledge and confidence to identify depression and support a person with visual impairment to access local forms of support and treatment.

Participants for the training who volunteered to take part were drawn from a network of formal and volunteer contacts that people with visual impairment might encounter. Evaluation of the training suggests that this fairly brief intervention can promote confidence among a broad range of support staff in identifying depression among people with visual impairment and in supporting them to access treatment.

Conclusions and recommendations

Brief training, as described, provided by IAPT services can improve confidence in identifying possible signs of depression for a broad range of support staff that have regular contact with people with visual impairment. Further evaluation of this training across a larger sample, multiple sites and with a control comparison will help to generalise from the current findings. It will also help establish the key elements of training needed to achieve the necessary improvements in detection and referral of people with visual impairment and common mental health problems to support services. This may help resolve the under representation of people with sight loss in IAPT services. It is recommended that local IAPT services consider offering the type of brief training described in this review with the aim of promoting referrals and access.



In order to more robustly test the effect of this brief training on referral and access rates to local psychological therapy services, further direct measurement of referral and access rates is required. This includes the need for IAPT services to improve their recording of disability data and more specifically data regarding visual impairment as a disability.

The findings from this preliminary evaluation suggest that people from a broad range of backgrounds, working in a range of visual impairment support settings, felt more confident to identify possible signs of depression. This type of brief training may have the impact of increasing confidence to integrate mental health support interventions into a setting providing support for people with a visual impairment that does not currently do so. The result of this may be to improve access to psychological therapies for people with visual impairment through their provision in visual impairment support settings. This has yet to be formally tested and would be a logical next step in the progression of this area of work.

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How to obtain further information

This paper is a summary of the full report entitled 'Visual Impairment, Depression and Access to Psychological Therapies' which is downloadable from www.pocklington-trust.org.uk or on request from:

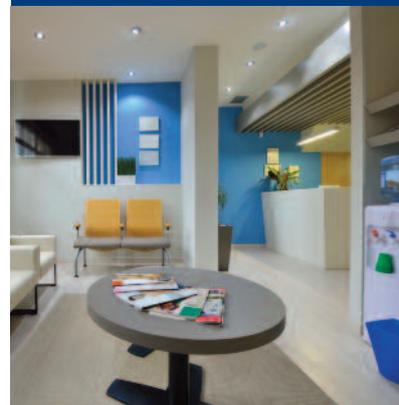
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In this publication, the terms 'people with visual impairment', 'people with sight loss' and 'visually impaired people' all refer to people who are blind or have partial sight.





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