1 Population, Policy and Practice Research and Teaching Department, Great Ormond Street Institute of Child Health, University College London, London, UK 2 Ulverscroft Vision Research Group, University College London, London, UK

3 School of Human Sciences and Institute of Lifecourse Development, University of Greenwich, London, UK

4 Institute of Ophthalmology, University College London, London, UK

5 Great Ormond Street Hospital NHS Foundation, London, UK

PCR36

1. BACKGROUND

- Visual impairment starting in childhood impacts all aspects of the affected individual's life.
- Family-related factors are known to be important to psychosocial adjustment outcomes of children and young people with many chronic health conditions.
- ➤ There is currently very limited knowledge in this area in relation to children and young people with visual impairment (CYP-VI).

This study presents quantitative findings of a larger mixed-methods research study which aims

- (1) to identify risk and protective factors that shape positive psychosocial adjustment of CYP-VI, and
- (2) to explore the critical timepoints when these factors employ the greatest influence

in order to inform a development of family-centred interventions informed by patient's priorities.

A FAMILY SAID ...

Thank you to other members of the Study Group for

all their help: M. Cortina Borja, P.T. Khaw, R.L. Knowles,

N. Oluonye, R. Shafran, and A.L. Solebo

"Children are great because they're so much more resilient than we are. And they also teach us how it's okay because 'Mom, look at me, I do all those things, and I'm independent and I'm happy' And that's wonderful."

- Mom of a 13 year old boy with an early onset visual impairment

2. OBJECTIVES

To investigate the associations between vision-related quality of life (VQoL) and mental health outcomes of CYP-VI and their carers, as a first step towards development of family-centred intervention.

2. METHODS

Design: Cross-sectional (part of a mixed-method research study)

Recruitment: Through the UK's two largest Paediatric Ophthalmology Departments, and relevant vision loss charities.



Participants: (1) CYP-VI

Vision-Related Quality of Life and Mental Health Outcomes of

Children and Young People with Visual Impairment and Their Carers

Ana Semrov,^{1,2} Valerija Tadic,³ & Jugnoo Rahi^{1,2,4,5} for the Resilience in Childhood Visual Impairment Study Group



- ➤ Aged 8-18 years
- ➤ With visual acuity of LogMAR ≥ 0.5 (defined as moderate, severe visual impairment, and blindness in ICD-11)
- (2) Their parents or carers

Measures:

CYP-VI outcomes

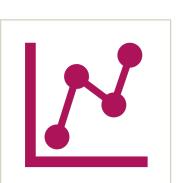
- Vision-Related Quality of Life Questionnaire for Children and Young People (VQoL_CYP; self-report)¹
- Strengths and Difficulties Questionnaire (SDQ; parent-report)²
- Self-esteem scale of Student Resilience Survey (SRS; self-report)³

Carers' / familial outcomes (all carer-reports)

- Satisfaction With Life Scale (SWLS)⁴
- ❖ Patient Health Questionnaire (PHQ-9)⁵
- General Anxiety Disorder Assessment (GAD-7)⁶
- Parental Stress Scale (PSS)⁷
- ❖ Me as a Parent (MaaP)⁸
- Family Attachment and Changeability Index 8 (FACI8)9
- Study-specific Family context questionnaire (study-specific FCQ)
- Hospital's electronic patient records (EPR)

Procedure: Study invitation letter and other study materials were sent by post. Participants could choose between printed and online versions of the consent forms and the questionnaires.





Analysis: Associations and group differences between the outcomes and other variables were analysed using Spearman's ρ correlation coefficient, Kruskal-Wallis, and Wilcoxon rank-sum tests

4. RESULTS

VQoL_CYP: higher **VQoL** scores indicate *better* VQoL.

Better VQoL is associated with fewer internalising (r = -0.503, p < 0.001) and externalising problems (r = -0.279, p = 0.019).

SDQ: higher internalising and externalising problems scores indicate *more* behavioural or emotional difficulties.

Fewer internalising problems are associated with fewer externalising problems (r = 0.469, p < 0.001).

TABLE 1. Sample characteristics

Variable		N	%
Total (overall)		73	
Gender	Female	34	46.58
	Male	39	53.42
Ethnicity	White	50	68.49
	Asian	12	16.44
	Black	8	10.96
	Other	3	4.11
Variable	Median	IQR	min - max
Age (years)	12	6	8-18
VQoL	54.2	11	33.2-78.5
Internalising problems (SDQ)	7	6	0-18
Externalising problems (SDQ)	5	5	0-13

TABLE 2. Factors (non)-significantly associated with better vision-related quality of life and lower behavioural and emotional difficulties (p<0.05)

Child's characteristics	Measure	↑ Better VQoL	↓ Fewer internalising problems (SDQ)	↓ Fewer externalising problems (SDQ)
↑ Higher self-esteem	SRS	0.509 (<0.001)	-0.392 (0.001)	-0.310 (0.009)
Gender	EPR	Not sig.	Not sig.	Not sig.
Ethnicity	FCQ	Not sig.	Not sig.	Not sig.
↓ Younger age	FCQ	-0.261 (0.026)	Not sig.	Not sig.
Severity of visual impairment	EPR	Not sig.	Not sig.	Not sig.
Absence of an additional impairment *	FCQ	0.604 (0.024)	0.866 (<0.001)	Not sig.
Carer's characteristics	Measure	↑ Better VQoL	↓ Fewer internalising problems	↓ Fewer externalising problems
↑ Higher carer's satisfaction with life	SWLS	0.443 (<0.001)	-0.270 (0.026)	Not sig.
↓ Fewer carer's anxiety symptoms	GAD7	-0.301 (0.01)	0.434 (<0.001)	0.261 (0.029)
↓ Fewer carer's depression symptoms	PHQ-9	-0.344 (0.003)	0.429 (<0.001)	Not sig.
↓ Lower carer's stress level	PSS	-0.255 (0.033)	0.393 (0.001)	Not sig.
↑ Better carer's parenting self-regulation	MaaP	0.308 (0.009)	-0.269 (0.024)	-0.276 (0.021)
Education level	FCQ	Not sig.	Not sig.	Not sig.
Occupation level	FCQ	Not sig.	Not sig.	Not sig.
Family's characteristics	Measure	↑ Better VQoL	↓ Fewer internalising problems	↓ Fewer externalising problems
↑ Better family functioning	FACI8	0.287 (0.014)	Not sig.	Not sig.
Size of the family	FCQ	Not sig.	Not sig.	Not sig.
Indices of multiple deprivation	EPR	Not sig.	Not sig.	Not sig.

 $^\circ$ Absence of additional impairment reports Cohen's d statistic. Other significant associations report Spearman's $_
ho$. Out of 73 CYP-VI, 28 had an additional chronic health condition or impairment.

5. CONCLUSIONS

- > Correlations exist between the mental health of children and young people with visual impairment (CYP-VI) and their carers, indicating both should be considered when assessing VQoL outcomes in this population
- Findings are aligned with the 'disability paradox', demonstrating that poorer psychosocial outcomes cannot be predicted by clinical characteristics or metrics of relative deprivation that are conventionally considered in clinical practice.
- Multi-modal psychosocial interventions aimed at improving the mental health of the whole family may facilitate better VQoL of CYP-VI.

A FAMILY SAID ...

"You go through a very long phase of pretending that it doesn't still affect you. I think because it does change your life so much. /.../ But I think there is a huge sense of almost satisfaction when you're out on the other end, and know what works for you, what you need, and where the gaps are."

- Female, 17 years, with late onset visual impairment; on coming to terms with being visually impaired and the impact on her mental health

6. FUTURE WORK

The next stages of the study analysis will:

- Identify additional potential inter- and intrapersonal determinants of psychosocial adjustment in CYP-VI (quantitative survey data).
- Inform the sensitive timepoints and characterising the key events that may elicit adaptive responses from families with CYP-VI (qualitative interview data).







j.rahi@ucl.ac.uk



and Young People with Visual Impairment. Ophthalmology. 2020;127(2):249-260. doi:10.1016/j.ophtha.2019.08.033

Goodman R. Psychometric properties of the strengths and difficulties questionnaire. J Am Acad Child Adolesc Psychiatry. 2001;40(11):1337-1345. doi:10.1097/00004583-200111000-00015 Sun J, Stewart D. Development of population-based resilience measures in the primary school setting. Health Education. 2007;7(6), 575-59 4. Diener E, Emmons RA, Larsen RJ, Griffin S. The Satisfaction With Life Scale. J Pers Assess. 1985;49(1):71-75. doi:10.1207/s15327752jpa4901_13

5. Kroenke K, Spitzer RL, Williams JB. The PHQ-9: validity of a brief depression severity measure. J Gen Intern Med. 2001;16(9):606-613. doi:10.1046/j.1525-1497.2001.016009606. 6. Spitzer RL, Kroenke K, Williams JBW, Löwe B. A Brief Measure for Assessing Generalized Anxiety Disorder: The GAD-7. Arch Intern Med. 2006;166(10):1092–1097. doi:10.1001/archinte.166.10.1092

8. Hamilton VE, Matthews JM, Crawford SB. Development and preliminary validation of a parenting self-regulation scale: "me as a parent." Journal of Child and Family Studies. 2014;24(10):2853-2864. doi:10.1007/s10826-014-0089-z 9. McCubbin HI, Thompson AI, Elver KM. Family Attachment and Changeability Index 8 (FACI8). In: McCubbin HI, Thompson AI, McCubbin MA, eds. Family Assessment: Resiliency, Coping and Adaptation: Inventories for Research and Practice. Madison, Wisconsin: University of Wisconsin; 1997:725-751.