United States Fact Sheet

Country Overview
» The US spans 3.797 million square miles
» Population: 328.2 million
» 2019 Human Development Index Ranking: 15 of 189 countries

Scope of Vision Needs
» 0.15% of the US population is blind
» 1.25% of the population has moderate to severe vision impairment or MSVI
» The US accounts for 0.38% of global blindness and 0.36% of global MSVI
» Diabetic Retinopathy (DR) is the leading cause of blindness in adults, affecting 1/3 of diabetics over 40 years old

Nationwide Eye Care Response
» The US CSR was 6,353 surgeries per million in 2010
» There are 60.8 ophthalmologists per million people
» There are 129 optometrists and 159 AOPs per million people

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<th>VISION NEEDS</th>
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<td>% Pop Blindness</td>
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Eye care capacity and service statistics are aggregated for the U.S. and are not reflective of the actual need in the underserved Native American communities Seva aims to serve.

2 Unless otherwise noted, all statistics provided by IAPB Vision Atlas Global Vision Database.
3 CDC Diabetic Retinopathy Fact Sheet: https://www.cdc.gov/visionhealth/pdf/factsheet.pdf
Seva’s Approach in the US

American Indians suffer disproportionately from higher rates of preventable and treatable eye conditions due to a lack of access to affordable, quality eye care. Barriers to care among American Indians include: poverty, geographic isolation, and the lack of linguistically and culturally appropriate eye care providers. Seva’s goal with the American Indian Sight Initiative (AISI) is to improve eye health through collaborative, locally based partnerships. We focus on the most common and treatable eye health issues found in American Indian communities: the need for eye health screening, medical treatment, and eyeglasses. With local partners in California, New Mexico, Alaska, Washington, Oklahoma, and Wisconsin, we are reducing the barriers to quality eye care in American Indian communities.

SPOTLIGHT ON CAPACITY BUILDING FOR UNIVERSAL ACCESS TO EYE CARE

Telemedicine allows patients to communicate with a doctor via videoconference and share results in real time. For some American Indian communities in need of specialized eye care, this can be a game changer. In 2019, Seva partnered with the University of Washington Bothell’s EYE Center to make eye care more readily available to Native American children in the state of Washington. In addition to building a mobile eye clinic, Seva is sponsoring the development of telehealth technologies that will allow the University to provide remote vision screenings and monitoring for children. This will facilitate a greater continuum of care in the absence of routine on-site eye care providers in remote tribal communities. These innovative telehealth tools and programs, which continue to evolve, hold great promise in addressing eye care and other healthcare challenges into the future.

Impact of COVID-19 on Native American Communities

Native American communities across the U.S. were significantly impacted by COVID-19. Higher COVID-19 infection rates and mortality have been observed with Natives compared to the general U.S. population. As a result of CDC recommendations, all routine eye care services were suspended in March 2020 with Seva partners unless it was an emergency. Most of the eye care programs Seva supports have partially resumed offering eye care services, albeit at reduced capacity. Seva partners continue to look for ways to deliver care safely amidst the pandemic.

* Numbers based on reports received
Resources:

CASE STUDY: Kewa Pueblo Health Corporation (KPHC), Eye Care Service Expansion and Sustainability
Female Leaders in Eye Care
The Promise of Telemedicine