

## Issue Brief: Doctors of Optometry in Disaster Preparedness, Response, and Recovery

Strengthening the security and resilience of the United States through systematic preparation for catastrophic natural or man-made emergencies/disasters is a laudable and necessary goal.

As recently seen in Texas, Florida and now Puerto Rico and the U.S. Virgin Islands, in addition to extensive property and infrastructure damage, natural disasters elevate risk to personal and population health.

While recovery from past storm events, such as Hurricanes Katrina and Sandy, have highlighted community resilience benefits from investments in natural infrastructure, a “capabilities-based approach” has recently identified a need to additionally focus attention on community health care infrastructure.<sup>1</sup>

Projectiles, concussive forces, storm surge, and secondary biologic, viral and amoebic pathologic onslaught, linked to poor water/food/medicine access and quality, power outages, chemical exposures, and transportation and communication problems, all impact health, often for a protracted length of time.

The medical education of doctors of optometry (optometrists) includes both clinical care and public health training, with linkage to all parts of the health care system. Trained to provide emergency eye and vision care, and to monitor, diagnose and identify burgeoning health hazards in impacted communities, optometrists can assist recovery efforts. With ocular components linked to hundreds of systemic diseases, optometrists prescribe tailored solutions to a variety of health hazards and problems that arise because of a natural disaster.

The range of key roles and responsibilities of optometrists, as part of the public health team in a disaster area, include but are not limited to diagnosis and treatment of vision and eye health emergencies, ocular and adnexa injuries and disorders, waterborne and vector-borne diseases secondary to exposures to insects, mold, and industrial and household chemicals. Optometrists are trained to respond to traumatic concussions, foreign bodies in the eye, traumas/lacerations, needed refractive care, diabetes care and basic primary medical care.

Optometrists can help guarantee that natural disaster preparedness includes, among other things, the assurance of a safe, protracted supply chain of ocular examination equipment, acute and chronically needed ocular pharmaceuticals, contact lenses, prescription glasses and safety glasses. The U.S. military specifically includes optometrists as part of the medical team due to the need for primary and emergency eye health and vision care in the armed forces.

Optometrists may collaborate with other entities within a given community to promote an integrated disaster response. Such integrated planning with state and local entities helps identify potential gaps in state and local capabilities that can then be addressed in advance of an emergency, thereby building community capacity and resilience.

---

<sup>1</sup> National Preparedness Report, March 30, 2016, U.S. Department of Homeland Security

As State Emergency Response Commissions (SERCs), local emergency planning committees and other state and local efforts are expanded to accommodate new disaster data and develop new ways of organizing and providing emergency medical and public health care in times of disaster, optometrists should be considered part of the trained essential emergency workforce. When evaluating potential interruptions to the normal supply of essential services, specific provisions for the rapid integration of vision and eye health resources by optometrists should not be restricted by arbitrary state licensure. Instead, doctors of optometry should be temporarily unrestricted in order to provide a range of services “as taught.”

On a federal level, optometrists as “preparedness stakeholders” by Presidential Policy Directive (PPD-8) should be considered in the ongoing development of a national system to track our nation’s ability to build and improve the capabilities necessary to prevent, protect against, mitigate the effects of, respond to, and recover from natural disasters. <sup>2</sup>

As the Federal Emergency Management Agency, the Assistant Secretary for Preparedness and Response, and U.S. interagency operational plans and frameworks are being redeveloped along 32 core capabilities, it is important to note that individual and population health has ties to more than half of the identified core capabilities.<sup>3</sup> As such, a comprehensive capabilities-based approach should include vision and eye health, with optometrists recognized and integrated into the National Preparedness Goals, wherever possible.

---

<sup>2</sup> <https://www.dhs.gov/presidential-policy-directive-8-national-preparedness>

<sup>3</sup> National Preparedness Report, March 30, 2016, U.S. Department of Homeland Security