Canadian Association for Health Services and Policy Research (CAHSPR) Toronto, ON 2017

Access to Vision Health Services Amongst Vulnerable Populations in Canada:

A Scoping Review.

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Objectives 50 words (41)

A scoping review was conducted to determine the nature of research activity and existing gaps in knowledge with regards to access to vision health services amongst vulnerable populations in Canada. 'Vulnerable populations' are groups at risk of poor health due to underlying differences in social status.

Approach 100 word limit (98)

A scoping review was conducted using the Arksey and O'Malley (2005) methodological framework. Key words were used to search five electronic databases: MEDLINE, EMBASE, SCOPUS, PAIS index, CINAHL and the grey literature. Reference lists of key articles were also searched. The search strategy yielded a total of 886 abstracts. All abstracts were reviewed by two authors for relevance. Abstracts were excluded if they were case studies, reviews, not written in English, full articles were not accessible, and topic was irrelevant to the study. From the 35 articles that remained, data was analyzed using descriptive summary and thematic analyses.

Results 125 word limit (124)

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General themes identified were: epidemiology of ophthalmic conditions (19), vision care workforce and supply (2), factors associated with (and barriers to) accessing vision care (7), the efficacy of intervention programs (6) and cost effectiveness analysis of interventions for vision care (1). Based on the Behavioural Model of Health Services Use, most studies focused on individual and not contextual characteristics of populations. In terms of realized access to care, studies focused mostly on vision health outcomes (22) and less on health behaviours of vulnerable populations and care professionals (12). Most studies focused on Ontario populations (44%). Gaps identified in the literature include a limited number of studies evaluating contextual factors and health behaviours, an absence of large, population-based studies and limited data from Eastern provinces.

Conclusions 50 word limit (50)

The access to vision care literature looks at important topics in vulnerable Canadian populations. However, more research is needed to develop a fuller understanding of vision care access to aid decision making. Future studies should address contextual attributes of access, incorporate larger population samples, and data from less populated provinces.