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March 10, 2021

The Honorable Jan Schakowsky
Chair
United States House of Representatives
Committee on Energy and Commerce
Subcommittee on Consumer Protection
and Commerce
Washington, DC 20515

The Honorable Gus Bilirakis
Ranking Member
United States House of Representatives
Committee on Energy and Commerce
Subcommittee on Consumer Protection
and Commerce
Washington, DC 20515

Dear Chair Schakowsky and Ranking Member Bilirakis:

Prevent Blindness is the nation's leading nonprofit, voluntary organization committed to preventing blindness and preserving sight for Americans of all ages, backgrounds, and circumstances. We appreciate that the Committee has called a hearing for March 11, 2021 ("Kids Online During COVID: Child Safety in an Increasingly Digital Age") to examine the impact that increased screen time has on children's health and safety, and we would like to take the opportunity to elevate another harmful aspect of increased and prolonged screen time and digital device use in children: the impact of digital device usage and screen time on children's vision and eye health.

Vision has a critical role in children's physical, cognitive, social, and emotional development. Unlike other senses, which are fully functioning at birth, a child's vision develops throughout early childhood years and is therefore significantly vulnerable to their visual environment. Most visual disorders that lead to permanent blindness are preventable; yet, up to one in 17 young children and 1 in 5 children enrolled in Head Start has an undiagnosed vision disorder. According to the Centers for Disease Control and Prevention (CDC)¹, **63.5% of children between ages 3 and 5 years <u>had not yet seen</u> an eye care provider. This same study also found that 1.6% of children in the United States (roughly 1.1 million children) suffered from blindness or had visual impairment, even with the use of glasses. Vision disorders are the 4th most common disability in children in the U.S.² The cost of children's vision disorders amounts to \$10 billion per year, with families shouldering 45% of these costs.³**

The ongoing nature of the COVID-19 pandemic has required Americans to prolong the transition from in-person work and education to online platforms as workplaces and schools continue to determine the feasibility of returning to in-person settings while also mitigating community spread of the virus. Digital device usage has not only increased in frequency during the pandemic, but devices are also being used for longer periods of time throughout the day and every day as we continue to rely on them to work, attend school, connect with others, engage in recreational interests, seek entertainment, and consume information. This extensive reliance on digital devices and prolonged time spent in front of screens has led to a substantial increase in digital device use in children ages 6 to 12 years.⁴ Alarmingly, children

² https://preventblindness.org/wp-content/uploads/2020/07/Snapshot-Report-2020condensedF.pdf

¹ https://www.cdc.gov/nchs/data/databriefs/db353-h.pdf

³ Wittenborn JS, Zhang X, Feagan CW, et al. The economic burden of vision loss and eye disorders among the United States population younger than 40 years. Ophthalmology. 2013;120(9):1728-1735. doi:10.1016/j.ophtha.2013.01.068

⁴ https://www.axios.com/kids-screen-time-coronavirus-562073f6-0638-47f2-8ea3-4f8781d6b31b.html



younger than six years are also increasingly becoming reliant on devices and spending greater time in front of screens.

Digital device usage in children continues to raise a myriad of concerns about the effects of screen time on children's developing and susceptible eyes and the extra visual effort required to read small print overcome screen glare. Notably, children who engage in activities using digital devices and screens lack self-awareness about how long they have been staring at screens or the understanding of how to accommodate their surroundings for more comfortable or disciplined viewing.⁵ Extensive screen time can lead to symptoms such as eye strain, dry eye, blurred vision, headaches, or fatigue. Even more worrisome, children who spend many hours doing close visual work, such as learning via electronic devices without frequent breaks or time spent outdoors, also have a higher risk of developing myopia or worsening existing myopia. If left uncorrected, myopia causes far-away objects such as a classroom board to appear blurry which can cause not only discomfort, but also reduced school performance and behavioral problems related to a child's inability to focus. Myopia is an increasing public health concern as myopia can also lead to life-long sight-threatening complications such as glaucoma, myopic maculopathy, retinal detachment, and cataract in addition to problems seeing clearly in adult life that may limit access to certain jobs. 6 Left unaddressed, all of these conditions could lead to difficulties in learning and compound disparities in health care, decrease academic success, exacerbate the impact of social determinants of health, and reduce quality of life.

Vision problems in children are likely worsening due to the pandemic, which is exacerbated by many families being unable or feeling unsafe to access the necessary care to detect and treat vision disorders in children. This point is underscored by recent data from the Centers for Medicare and Medicaid Services⁷, showing that COVID-19 has led to a drastic decline in essential child health services such as screenings for developmental delays in physical, cognitive, or sensory (including vision) health, childhood vaccinations and immunizations, and routine primary and preventive care. In addition, national surveillance of children's vision and eye health is a significant public health challenge as **there is currently no system in place** to track children's vision screenings, follow-up eye exams, treatment, or outcomes of care; thus, making it difficult to measure progress, close gaps in access, address disparities to achieve equity in vision and eye care, and facilitate coordinated care across systems.

Many of the consequences of the COVID-19 pandemic on children will be long-term in nature and may not be understood or even recognized for years. However, the drastic rise in digital device usage and screen time underscores an important and timely opportunity for Congress to fully address children's vision and eye health by promoting federal-level programmatic efforts pertaining to the development, coordination, and promotion of evidence-based best practices (such as by age, and based on <u>Bright Futures</u> guidance from the American Academy of Pediatrics) and to provide states with technical assistance to promote children's vision and eye health as an essential component of childhood development and growth and successful learning.

⁶ https://www.aaojournal.org/action/showPdf?pii=S0161-6420%2820%2931043-5

⁷ https://www.cms.gov/newsroom/fact-sheets/fact-sheet-service-use-among-medicaid-chip-beneficiaries-age-18-and-under-during-covid-19



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We appreciate the Committee's consideration of this important and timely matter. Please do not hesitate to contact Sara Brown, Director of Government Affairs, at (312) 363-6031 or sbrown@preventblindness.org if you or your staff would like to discuss these issues.

Sincerely,

Jeff Todd

President and CEO

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Prevent Blindness

Cc: The Honorable Frank Pallone, Chairman Energy and Commerce Committee

The Honorable Cathy McMorris Rodgers, Ranking Member, Energy and Commerce Committee

The Honorable Anna Eshoo, Chair, Subcommittee on Health

The Honorable Brett Guthrie, Ranking Member, Subcommittee on Health