

# Seeing is Learning: Vision Care for Children in Three Migrant Communities

<b>Submission date</b> 16/11/2014	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 12/12/2014	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 29/05/2020	<b>Condition category</b> Eye Diseases	<input type="checkbox"/> Individual participant data

## Plain English summary of protocol

### Background and study aims

A large number of school children in rural China have problems with their vision that are currently not being corrected by eyeglasses. Our previous research has shown that giving myopic (short sighted) children glasses to correct their vision leads to a significant improvement in their performance at school. However, we have also conducted interviews which suggest that nothing is being done to address this problem. Here, we will attempt to update and duplicate the results of our earlier study, and also to build on the previous research by determining the extent to which teachers influence the health behavior of their students as regards to eye care.

### Who can participate?

Children aged 8-12 years and attending a public elementary school in a rural area of northwestern China. The schools are randomly selected from areas surrounding major cities. These areas are known to be poor and have a large migrant population.

### What does the study involve?

Schools are randomly allocated into one of three groups. Children in group 1 schools do not receive any eyeglasses and carry on as usual. Children and teachers in group 2 schools are given a basic 5-minute vision test. Those children whose basic vision test suggests that they have a problem with their vision then have an auto-refraction test. Children who are found to need eyeglasses are given a free, high-quality pair of glasses. They will also be taught the importance of proper eye care. Children and teachers in group 3 are treated in the same way as those in group 2, but teachers are also given an incentive to promote the wearing of eyeglasses in the classroom.

### What are the possible benefits and risks of participating?

The possible benefits for children include undergoing a high-quality vision examination, determining whether the participant has a vision problem, receiving a prescription and made-to-order pair of glasses the participant would otherwise never have acquired on their own. These services are rendered for free. The varied benefits of glasses wear among those with refractive error are documented in numerous clinical studies. Insofar as risks, a small number of subjects harbor adverse reactions to the medication used to dilate their eyes. This risk is manageable with the staff available on hand during the study.

Where is the study run from?

Schools in a rural area of northwestern China. Planning is carried out from our offices at Stanford University, and those of our collaborators in Beijing.

When is the study starting and how long is it expected to run for?

January 2013 to January 2015.

Who is funding the study?

Caterpillar (USA), Brien Holden Vision Institute (Australia) and Essilor (France).

Who is the main contact?

Professor Scott Rozelle

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## Contact information

### Type(s)

Scientific

### Contact name

Prof Scott Rozelle

### Contact details

Stanford University

450 Serra Mall

Stanford

United States of America

94305

## Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

28343

## Study information

### Scientific Title

Seeing is Learning: Vision Care for Children in Three Migrant Communities: an interventional cluster-randomized multicentre controlled trial

### Acronym

SIL II

Study objectives

We predict that fitting migrant students in China with eyeglasses, educating these students about eyeglasses and giving teachers incentives to ensure children wear eyeglasses will raise performance in school among children who receive corrective glasses.

### **Ethics approval required**

Old ethics approval format

### **Ethics approval(s)**

Stanford University Internal Review Board Human Subjects Research, Protocol ID: 28343

### **Study design**

Interventional cluster-randomized multicentre controlled trial

### **Primary study design**

Interventional

### **Secondary study design**

Cluster randomised trial

### **Study setting(s)**

School

### **Study type(s)**

Treatment

### **Participant information sheet**

Not available in web format, please use the contact details below to request a patient information sheet

### **Health condition(s) or problem(s) studied**

Vision care

### **Interventions**

1. Control (no eyeglasses)

2. Free eyeglasses + information schools

Students and teachers will undergo a 5 minute basic vision test. Those students whose basic vision test indicates a problem will continue on to the auto-refraction test. If this test indicates that students need eyeglasses, they will receive a free, high quality pair of glasses. They will also undergo a training session in which they will learn about the importance and proper vision care.

3. Free eyeglasses + information + teacher incentive schools

These schools will receive the same intervention as described above, but the teachers in these schools will receive an incentive to promote eyeglasses wear among the students in their class.

### **Intervention Type**

Device

### **Primary outcome measure**

Measured in both a baseline and follow-up survey:

1. Number of children wearing glasses regularly

2. School performance, determined from a standardized test we will administer and students grade

**Secondary outcome measures**

Measured at baseline by way of a survey filled out by the subjects:

1. Student interest in school
2. Student mental health
3. Student self confidence

**Overall study start date**

09/01/2013

**Completion date**

12/01/2015

**Eligibility****Key inclusion criteria**

1. Male and female fourth and fifth grade elementary school students,
2. Ages 8 to 12
3. Attending public elementary schools in rural areas of northwestern China
4. Schools are randomly selected from areas surrounding major cities. These areas are known to have high concentrations of migrants and are known to be relatively poor.

**Participant type(s)**

Patient

**Age group**

Child

**Lower age limit**

8 Years

**Upper age limit**

12 Years

**Sex**

Both

**Target number of participants**

The number of students included in the study is 10,000. The study will be conducted in 150 schools in two province level administrative provinces in China.

**Key exclusion criteria**

Students will be excluded from the trial if they have an ailment or condition that prevents them from being safely dilated and given a proper corrective vision prescription (existing literature indicates this would be at most one percent of the sample population).

**Date of first enrolment**

09/01/2013

**Date of final enrolment**

12/01/2015

## Locations

### Countries of recruitment

China

United States of America

### Study participating centre

**Stanford University**

450 Serra Mall

Stanford

United States of America

94305

## Sponsor information

### Organisation

Stanford University (USA)

### Sponsor details

450 Serra Mall

Stanford

United States of America

94305

### Sponsor type

University/education

### ROR

<https://ror.org/00f54p054>

## Funder(s)

### Funder type

Industry

### Funder Name

Caterpillar Inc.

### Alternative Name(s)

Caterpillar Inc., CAT, Inc., CAT

**Funding Body Type**

Government organisation

**Funding Body Subtype**

For-profit companies (industry)

**Location**

United States of America

**Funder Name**

Brien Holden Vision Institute

**Funder Name**

Essilor

## Results and Publications

**Publication and dissemination plan**

Not provided at time of registration

**Intention to publish date**

**Individual participant data (IPD) sharing plan**

**IPD sharing plan summary**

Not provided at time of registration

**Study outputs**

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>	results	01/11/2015	29/05/2020	Yes	No