

Clarity for parents: Children's eye health in the UK









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Report by the **Association of British Dispensing Opticians (ABDO)**,
The College of Optometrists and the **Optical Suppliers Association**
in partnership with **Mumsnet**

Report research methodology

The Association of British Dispensing Opticians (ABDO), The College of Optometrists and the Optical Suppliers Association (OSA) commissioned Mumsnet to conduct an online survey with 1,008 Mumsnet users across the UK between December 2024 and January 2025.

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Introduction

Clear vision is crucial to a child’s learning and development—yet many parents and carers don’t know when and where to get their children’s eyes tested and what support and help they can access around children’s eye health. To better understand parental awareness and behaviours, the Association of British Dispensing Opticians (ABDO), The College of Optometrists and the Optical Suppliers Association (OSA) commissioned a new research project with Mumsnet, the UK’s largest online parenting platform. Millions of parents use Mumsnet to seek advice or share worries, and we were delighted to use our unique insights to help improve the next generation’s vision and eye health outcomes.

The partnership involved a nationwide online survey of 1,008 Mumsnet users, alongside analysis of nearly 8,000 discussions on Mumsnet over the past five years covering children’s vision—from eye tests and squints to prescription eyewear. The results reveal confusion among parents around key areas of children’s eye health, including the recommended age for a first eye test, whether children need to be able to read before having an eye test, choosing glasses, and where to seek help for concerns such as reduced vision, eye infections, discomfort or injury.

The UK’s eyecare professionals have never been better equipped to address these issues—we just need to raise awareness among parents of when and where to go for eye tests and eye health treatment and advice to improve their children’s eye health and vision.

The findings of the research have enabled us to make clear recommendations to healthcare policymakers and service providers and provide guidance to parents.

Our recommendations for national health and care service providers:

- Update all guidance online across the UK to signpost parents and carers to their local opticians as their first port of call for eye health services and advice. This will also prevent parents from booking unnecessary GP appointments or unnecessarily accessing other healthcare services and free up time for other childhood medical appointments
- Personal child health records, known as the ‘red book’, should always include advice about how and why parents and carers should take their child for regular eye tests every 1-2 years from the age of 3–4 years. This would ensure parents are aware of the importance of regular early eye tests and know where to go for eye health services

Our guidance for parents and carers:

- Take children for regular NHS funded eye tests from age 3–4 years old every 1-2 years, unless advised otherwise by your optometrist
- If parents or carers have any concerns about their child’s eyes before this age, do not delay. Contact your local opticians or speak to your health visitor
- If your child does need glasses, help with the cost is available from the NHS. Ask for advice and help from the practice dispensing optician on what lenses are most appropriate for your child’s prescription and for help with choosing a frame that fits correctly

Confusion about children's eyecare

Going for regular eye tests is essential to ensure that children can see as well as possible and to detect and manage any eye conditions, such as lazy eye (amblyopia) and short-sightedness (myopia). Parents and carers also need to know where to take their children for treatment and advice when they have an eye problem, such as an eye infection, discomfort, and in the event of an injury or accident.

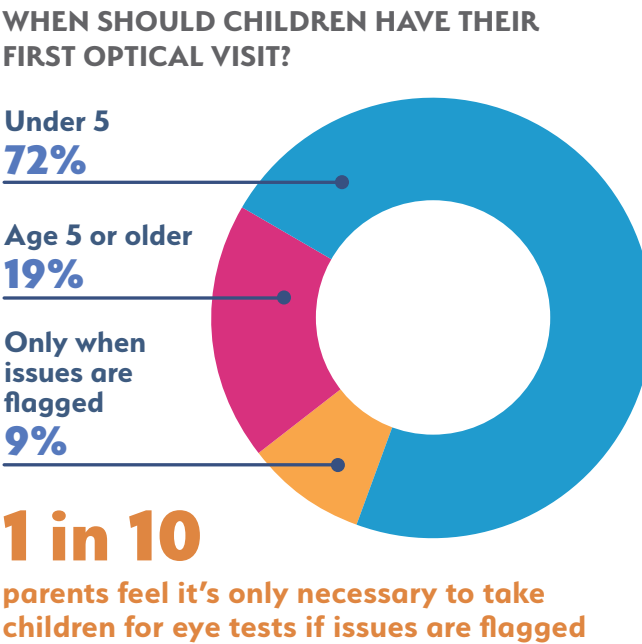
Confusion about the importance of eye tests

Worryingly, our research with Mumsnet found that one in five parents (21%) don't rate children's eye tests as very important health checks. Nearly one in ten (9%) Mumsnet respondents would only take their child for an eye test if an issue arose. Previous research commissioned by The College of Optometrists in 2024 also found that, on average, children in the UK are 5 years old before they have their first eye test.

In contrast, public awareness of dental health is currently high, with nine in ten parents rating dentist appointments as very important for their children. We need more awareness among parents and carers of the importance of regular eye tests for children from a young age, as this is the time that concerns can be identified and treated more easily, ensuring the best possible long-term vision.

Importance of correctly fitting glasses

The eye test is just the start of the journey to the best eye health for your child. If the optometrist prescribes glasses, the prescription needs to be turned into a pair of glasses. The frame is an essential component of this process, as it serves as the 'scaffolding' that securely holds the lenses in position. This ensures the precise prescription is applied at a crucial stage in the child's development. It needs to be designed for the child's developing facial features to ensure comfort and stability.



ABDO commissioned research into children's facial shapes to help ensure frames are produced to accommodate a child's facial features and can be fitted precisely. Importantly, these glasses then need the most appropriate lenses for each child's individual prescription, considering safety, weight and appearance. This is where dispensing opticians, as the experts in frames and lenses, can help.

Parents don't know where to go for children's eye health services

Our research found that parents and carers in the UK are confused about where to turn for eye healthcare and advice, exposing a lack of clear signposting to eyecare professionals on the high street. Currently, a slight change in vision is the only time our surveyed parents would take their child to the opticians for an eye issue, although opticians practices offer much wider eye health services.

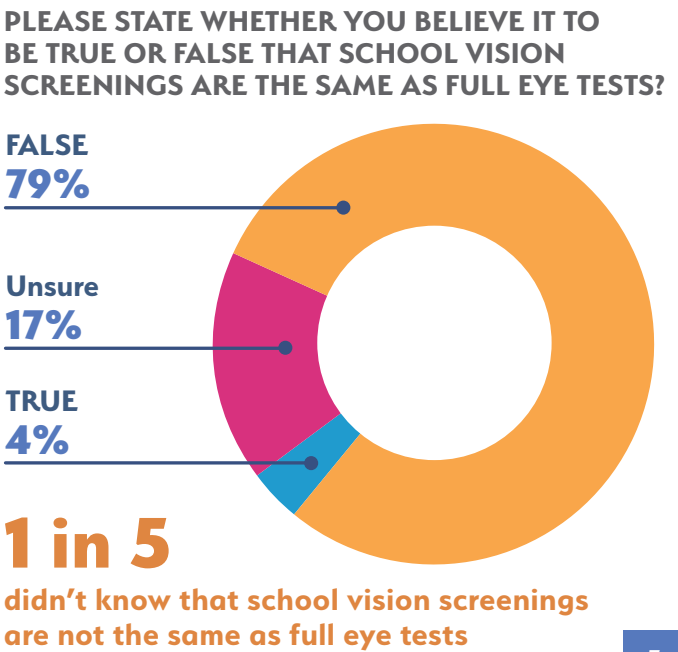
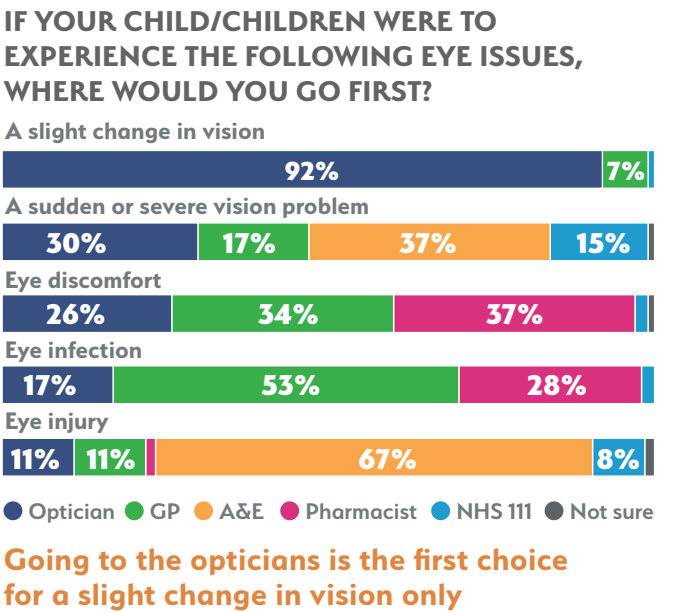
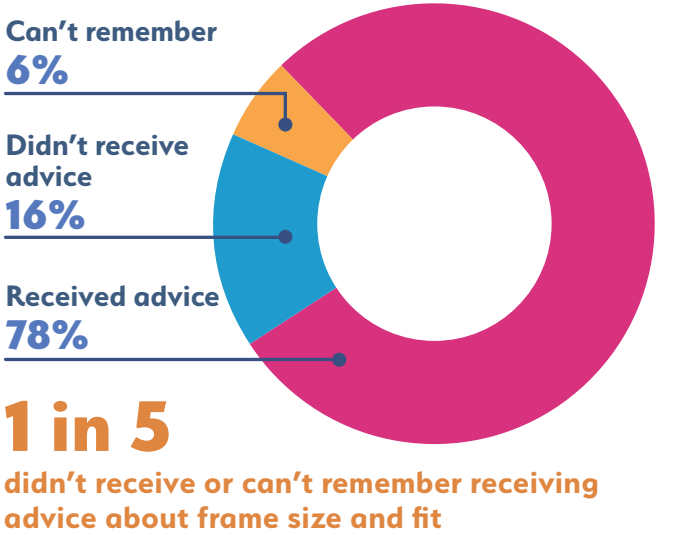
One in 12 parents (8%) would visit their GP or call NHS 111 if their child was experiencing a slight change in vision rather than making an appointment to see an optometrist at their local opticians. However, over 80% of surveyed parents would go straight to their GP or pharmacist for an eye infection issue and 71% would go to their GP or pharmacist for an eye discomfort issue instead of seeking advice at their local opticians.

Confusion about school vision screenings

School vision screening is an important safety net for children's vision, but it is not the same as an eye test at your local opticians. Over one in five (21%) Mumsnet survey respondents weren't aware that school vision screenings aren't the same as full eye tests.

While school vision screenings are offered to all children in Scotland, Wales and Northern Ireland, the programme isn't available in all of England. We recommend parents and carers take their child for regular eye tests every 1-2 years from the age of 3-4 years, in addition to ensuring their child attends the school vision screening where it's offered in schools.

OF THOSE WITH A CHILD WHO WEARS GLASSES AND/OR CONTACT LENSES – DID THE PERSON WHO HELPED YOU CHOOSE YOUR CHILD'S GLASSES EXPLAIN THE IMPORTANCE OF THE FRAME SIZE AND FIT?



The nation's child eye health

Most children in the UK have excellent sight and do not need to wear glasses. Some factors can increase a child's likelihood of developing an eye condition, such as a family history of needing strong glasses in childhood. Taking children for regular eye tests is essential for identifying and treating childhood eye conditions such as strabismus (squint), amblyopia (lazy eye) and refractive error, which includes myopia (short-sightedness) and hyperopia (long-sightedness). Often children are unaware that their vision is not as good as it could be, and vision problems can be overlooked easily if regular eye tests are not undertaken.

Childhood myopia

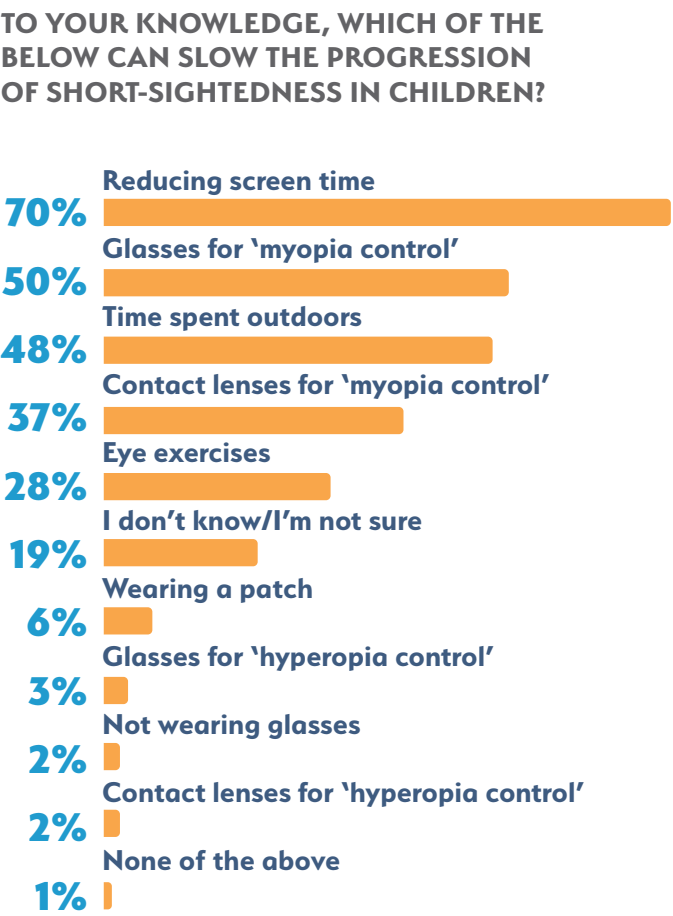
Myopia (short-sightedness) is an eye condition where someone cannot clearly see objects far away. It is usually corrected with glasses or contact lenses.

A recent international study indicates that myopia is on the rise globally and the condition has become more prevalent among children. It currently affects around one in three children and adolescents globally. Myopia usually starts in childhood between the ages of 6 and 13 years and tends to get worse until the eye has stopped growing. The UK Eye Care Data Hub forecasts that over three million children aged under 18 years in the UK currently have myopia.

School vision screening takes place at a much younger age, with the risk that children who may go on to develop myopia might not be identified. Therefore, regular eye tests are a vital part of checking that a child's vision is developing as expected from a young age into adulthood.

One in five parents (19%) in the Mumsnet survey didn't know about options that can help slow the progression of myopia in children. Treatment to slow the development of myopia does exist. Special lenses for glasses and contact lenses are now available from many high street opticians and eyecare professionals can offer guidance and advise on whether this treatment is appropriate.

Over four in five Mumsnet respondents (83%) believe treatment to slow the progression of childhood short-sightedness should be fully funded by the government for children aged up to 18 years old in full-time education.



1 in 5 didn't report knowledge of options that might help slow the progression of myopia

Squint (strabismus)

The UK Eye Care Data Hub forecasts that over 290,000 UK children will be affected by strabismus (a squint) in 2025.

A squint occurs when your eyes don't point in the same direction. The most common type of squint is where one eye turns slightly inwards towards the nose. This may result in seeing double. If the squint develops in early childhood, the child will learn to ignore the vision in the squinting eye, which can lead to the squinting eye developing amblyopia (lazy eye).

If parents or carers notice a young child has a squint, it is important that the child is examined by an optometrist for management to help prevent the onset of amblyopia. Children are normally referred to the local hospital eye service, but treatment depends on what is causing the squint; in some cases prescribed glasses will be beneficial, but in other cases surgery may be needed.

Where there is also amblyopia, prescribed glasses or the use of an eye patch or eye drops in the good eye will often help. If glasses do not fully correct the condition, the child may need an operation to straighten their eyes to help them use both together. This can be done as early as a few months of age. An optometrist will be able to offer advice specific to your child.

Lazy eye (amblyopia)

Lazy eye (amblyopia) may be caused if a young child has one eye that is significantly more short-sighted or long-sighted than the other or has a squint. This means that the sight in the affected eye or eyes does not develop properly.

About 2–3% of all children develop lazy eye when they are a few years old. Lazy eye is not always easy for parents to spot, as children may assume that the way they see is normal and may not tell you that there is a problem. Symptoms include one eye turning in or out, being clumsy or having poor hand to eye coordination, screwing up their eyes or shutting an eye, or having unexplained headaches.

Children with lazy eye are normally referred to the local hospital eye service for management, which aims to stimulate vision to develop in the lazy eye by enabling the child to use their weaker eye more. The treatment depends on what is causing the lazy eye and can include the prescription of glasses or the use of an eye patch or eye drops to encourage the child to use their weaker eye.



When to take your child to the opticians

Take children for regular eye tests

The College of Optometrists and ABDO recommend that parents and guardians take their children for regular eye tests from age 3–4 years every 1-2 years, unless advised otherwise by your optometrist.



Denise Voon, clinical adviser at The College of Optometrists, says, "Regular eye tests are critical for checking children's vision and eye health. If eye conditions that develop in childhood, such as squint and lazy eye, are

not picked up at an early age the child may have permanently reduced vision in one or both eyes. The earlier eye problems are detected, they can get access to faster treatment to improve their vision and support them to thrive in all areas of their childhood."



Max Halford, clinical and policy director, ABDO advises, "An eye test is a crucial part of a child's development checks. If, following an eye test, your child is recommended glasses then remember that children aged under

16 can only have their glasses dispensed by an optometrist or dispensing optician registered with the General Optical Council (GOC) or people and students working under their supervision. If your child is prescribed glasses, dispensing opticians are the experts on hand to help parents, carers and children choose the best frames and most appropriate lenses for their prescription requirements and that maximise the vision for your child."

Children's eye tests are free in the UK

In England, Wales and Northern Ireland, the national health and care services pay for eye tests for children aged under 16 years and for those aged 16–18 who are in full-time education. In Scotland, the NHS pays for eye examinations for everyone. Parents and carers can make an appointment for their child's NHS funded eye test with an optometrist at their local opticians.

The national health and care services also provide an optical voucher towards the cost of glasses for children under the age of 16 years and up to the age of 18 years for young people in full-time education. This may cover the full cost of the glasses, or parents can put it towards the cost of more expensive options.

Where should parents take their children for eyecare?

Eyecare professionals based at local opticians practices should be parents and carers' first port of call for most eyecare issues. If your child experiences a change in their vision or has an issue with their eye health, such as an infection or soreness, contact your local opticians for advice and guidance.

- Many opticians practices provide NHS funded minor and/or urgent eyecare services, so check with your local opticians if this is available in your area
- In the case of more severe injuries, contact NHS 111 or attend your nearest A&E department

What is an optometrist?

Optometrists at local opticians are trained to examine the eyes to test for and detect vision problems, injury, eye disease and some general health problems. They prescribe glasses or contact lenses, provide advice and treatment, and refer other conditions on for specialist management where appropriate.

What is a dispensing optician?

If a child is prescribed glasses, the dispensing optician will advise on, fit and supply the frames and lenses most appropriate for the child's needs.

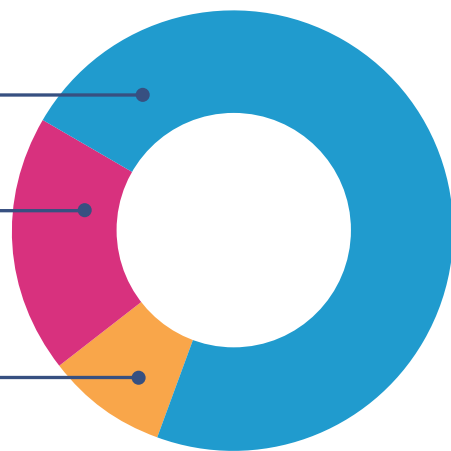
Optometrists and some dispensing opticians also provide clinical advice, guidance and treatment for common eye conditions, including acute conditions such as red eye, and identify and refer those that require specialist care.

WHEN SHOULD CHILDREN HAVE THEIR FIRST OPTICAL VISIT?

Under 5
72%

Age 5 or older
19%

Only when issues are flagged
9%



1 in 10

parents feel it's only necessary to take children for eye tests if issues are flagged

Busting child eye health myths

Health hacks and misinformation are rife in today’s digital world. Our research with Mumsnet users reveals that there are some common misunderstandings about looking after children’s eye health.

Buying glasses and contact lenses online for children under the age of 16 is illegal. TRUE

Children aged under 16 years can only have their glasses dispensed by an optometrist or dispensing optician who are registered with the General Optical Council (GOC) or by people and students working under their direct supervision. This is to ensure children receive the best possible care from qualified registered health professionals.

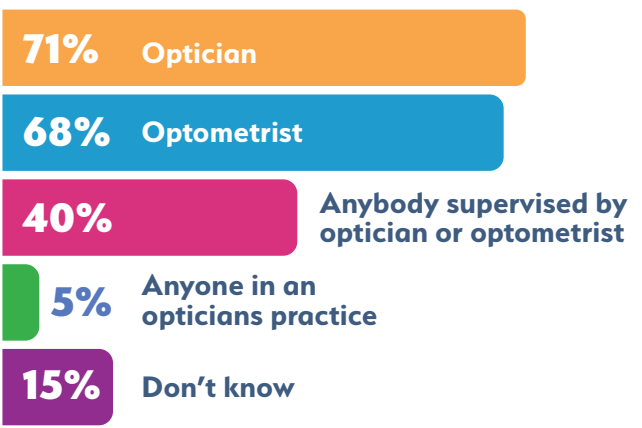
Children need to be able to read before they can have an eye test. FALSE

Children do not have to be able to read or talk to have their eyes examined. It is possible to find out whether a child has healthy eyes or needs glasses without asking them any questions during their eye test.

Children’s glasses are fully funded by the NHS. FALSE

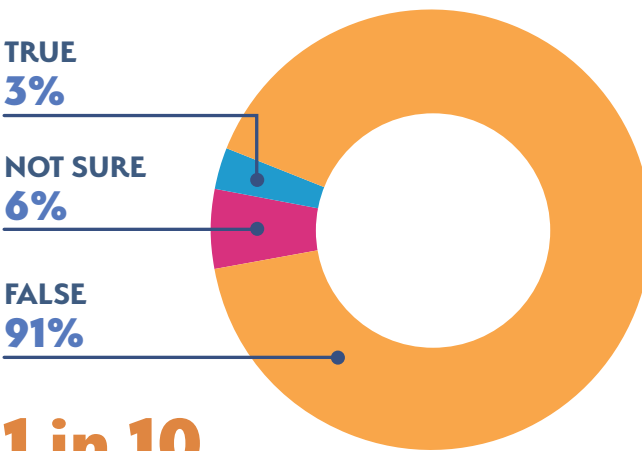
The national health and care services provide an optical voucher towards the cost of prescribed glasses or contact lenses for children aged under 16 years and those aged 16–18 years in full-time education in England, Scotland and Northern Ireland. In some cases, the NHS voucher may not cover the cost of glasses, but in Wales every practice will have at least one style of glasses that is completely covered by the NHS voucher.

WHICH OF THE FOLLOWING PEOPLE CAN LEGALLY DISPENSE CHILDREN’S EYEWEAR (E.G. GLASSES AND CONTACT LENSES)?



1 in 5 don't know or answered incorrectly about who could dispense children's eyewear

PLEASE STATE WHETHER YOU BELIEVE IT TO BE TRUE OR FALSE THAT CHILDREN NEED TO BE ABLE TO READ TO HAVE EYE TESTS?



1 in 10 parents think that children need to be able to read to have eye tests

School vision screenings are the same as full eye tests carried out at an opticians practice. FALSE

School vision screenings are an important programme, but it is a basic eye test and it’s not offered in every area of the UK. A free children’s NHS eye test carried out by an optometrist at an opticians practice will include a full eye health check and sight test and advice from registered eyecare professionals. Parents and carers should ensure their child attends both the school vision screening, where it is offered, and also attend regular eye tests at an opticians.

Eye exercises can help slow the progression of short-sightedness in children. FALSE

Worryingly, one in four Mumsnet users (28%) believe that eye exercises can help slow the progression of short-sightedness or myopia – this is not true. Parents should always ensure children wear their prescribed glasses or contact lens to correct their myopia and follow the advice of their eyecare professional. Most visual problems are a result of the shape and development of the eye, and exercises won’t affect this.

Spending time outdoors and eating plenty of fruit and vegetables can help support healthy eyes. TRUE

Eating a wide variety of fruit and vegetables, including dark green leaves, is good for children’s general health and may support good eye health.

Scientific studies have shown that children who spend sufficient time outdoors are less likely to be or become short-sighted. Around two hours per day is currently recommended. Long periods of near work, such as reading and screen time, may contribute to the development and progression of childhood myopia (short-sightedness), but the evidence for this is uncertain. Researchers do not yet fully understand why these effects happen, but more research is being undertaken to find out which environmental factors are relevant to myopia development.

Looking after children’s eye health

Keeping your child’s vision healthy will have long-term positive benefits. However, it’s not just a matter of one single thing parents can do, but a range of lifestyle factors that can help support children’s eye health. This includes time spent outdoors, eating a healthy diet that includes plenty of leafy green vegetables, wearing sunglasses when needed and ensuring they have the UKCA or CE mark to confirm they provide UV protection, and taking advice on screen time, such as encouraging regular breaks from screens.

Lots of myths and misinformation exist, and dispensing opticians and optometrists can help parents with the best possible advice.

Conclusions and recommendations

Good eye health is a key factor in children’s development and their future wellbeing. It’s vital that eye conditions that develop during childhood are picked up at an early age to prevent a child having permanently reduced vision in one or both eyes.

While most children in the UK have excellent eyesight and don’t need glasses, in today’s world of online misinformation and disinformation, families need to be signposted to trusted and reliable sources of information from eyecare professionals when issues do arise.

Optometrists based at local optical practices carry out free NHS eye tests for children across the UK. Along with dispensing opticians, they are the best first port of call for eye health care advice and issues.

However, our research identifies a gap in awareness of where, when and how parents and carers should access eye health examinations and services for their children. Regular eye tests and easy access to advice and treatment from registered eye health professionals are essential for ensuring any development of eye conditions is detected early so that a child’s vision can be corrected and they can thrive in their childhood.

Our recommendations for the UK national health and care services:

Our recommendations for national health and care service providers:

- Update all guidance online across the UK to signpost parents and carers to their local opticians as their first port of call for eye health services and advice. This will also prevent parents from booking unnecessary GP appointments or unnecessarily accessing other healthcare services and free up time for other childhood medical appointments
- Personal child health records, known as the ‘red book’, should always include advice about how and why parents and carers should take their child for regular eye tests every 1-2 years from the age of 3–4 years. This would ensure parents are aware of the importance of regular early eye tests and know where to go for eye health services

Our guidance for parents and carers:

- Take children for regular NHS funded eye tests from age 3–4 years every 1-2 years, unless advised otherwise by your optometrist
- If parents or carers have any concerns about their child’s eyes before this age, do not delay. Contact your local opticians or speak to your health visitor
- If your child does need glasses, help with the cost is available from the NHS. Ask for advice and help from the practice dispensing optician on what lenses are most appropriate for your child’s prescription and for help with choosing a frame that fits correctly

Log on to www.lookafteryoureyes.org or visit abdo.org.uk/eyecarefaq/ for further advice and information.

Appendix

Q2 - At what age do you think children should have their first visit to an opticians practice to have their eyes examined?

	TOTAL
NET: under 2	8%
NET: under 5	72%
0	2%
1	6%
2	16%
3	24%
4	24%
5	14%
6	2%
7	1%
8	1%
9	0%
10	0%
11	0%
12	0%
13	0%
14	0%
15	0%
16	0%
17	0%
18	0%
Whenever issues arise/are flagged (e.g. in school vision screenings), if they are (otherwise no need)	9%
Average age (of those who think there’s a specific age)	3.4 years
Total number of respondents	1,008

Q3 - How often do you feel children should go for each of the following types of health appointments? AN EYE TEST AT THE OPTICIANS

	TOTAL
Every 6 months	15%
Once a year	65%
Every two years	15%
Only when something is wrong	3%
Never	0%
I don’t know/I’m not sure	2%
Total number of respondents	1,008

Q3 - How often do you feel children should go for each of the following types of health appointments? A CHECKUP AT THE DENTISTS

	TOTAL
Every 6 months	75%
Once a year	24%
Every two years	1%
Only when something is wrong	0%
Never	0%
I don’t know/I’m not sure	0%
Total number of respondents	1,008

Q4 - Overall, how important do you consider the following types of appointments for children to be? AN EYE TEST AT THE OPTICIANS

	TOTAL
Very important	79%
Somewhat important	18%
Neither important nor unimportant	2%
Somewhat unimportant	1%
Not important at all	0%
NET: Neutral or not important	3%
Total number of respondents	1,008

Q4 - Overall, how important do you consider the following types of appointments for children to be? A CHECKUP AT THE DENTISTS

	TOTAL
Very important	89%
Somewhat important	11%
Neither important nor unimportant	0%
Somewhat unimportant	0%
Not important at all	0%
NET: Neutral or not important	0%
Total number of respondents	1,008

Q5 - If your child/children were to experience the following eye issues, where would you go first? OPTICIANS PRACTICE

	TOTAL
A slight change in vision	92%
A sudden or severe vision problem	30%
Eye discomfort (itching or soreness)	26%
Eye infection	17%
An eye injury	11%
Total number of respondents	1,008

Q5 - If your child/children were to experience the following eye issues, where would you go first? GP

	TOTAL
A slight change in vision	7%
A sudden or severe vision problem	17%
Eye discomfort (itching or soreness)	34%
Eye infection	53%
An eye injury	11%
Total number of respondents	1,008

Q5 - If your child/children were to experience the following eye issues, where would you go first? PHARMACIST

	TOTAL
A slight change in vision	0%
A sudden or severe vision problem	0%
Eye discomfort (itching or soreness)	37%
Eye infection	28%
An eye injury	1%
Total number of respondents	1,008

Q5 - If your child/children were to experience the following eye issues, where would you go first? A&E

	TOTAL
A slight change in vision	0%
A sudden or severe vision problem	37%
Eye discomfort (itching or soreness)	0%
Eye infection	0%
An eye injury	67%
Total number of respondents	1,008

Q5 - If your child/children were to experience the following eye issues, where would you go first? NHS 111

	TOTAL
A slight change in vision	1%
A sudden or severe vision problem	15%
Eye discomfort (itching or soreness)	2%
Eye infection	1%
An eye injury	8%
Total number of respondents	1,008

Q5 - If your child/children were to experience the following eye issues, where would you go first? NOT SURE

	TOTAL
A slight change in vision	1%
A sudden or severe vision problem	1%
Eye discomfort (itching or soreness)	1%
Eye infection	0%
An eye injury	1%
Total number of respondents	1,008

Q5 - If your child/children were to experience the following eye issues, where would you go first? A SLIGHT CHANGE IN VISION

	TOTAL
GP	7%
Opticians practice	92%
Pharmacist	0%
A&E	0%
NHS 111	1%
I don't know/I'm not sure	1%
Total number of respondents	1,008

Q5 - If your child/children were to experience the following eye issues, where would you go first? A SUDDEN OR SEVERE VISION PROBLEM

	TOTAL
GP	17%
Opticians practice	30%
Pharmacist	0%
A&E	37%
NHS 111	15%
I don't know/I'm not sure	1%
Total number of respondents	1,008

Q5 - If your child/children were to experience the following eye issues, where would you go first? EYE DISCOMFORT

	TOTAL
GP	34%
Opticians practice	26%
Pharmacist	37%
A&E	0%
NHS 111	2%
I don't know/I'm not sure	1%
Total number of respondents	1,008

Q5 - If your child/children were to experience the following eye issues, where would you go first? EYE INFECTION

	TOTAL
GP	53%
Opticians practice	17%
Pharmacist	28%
A&E	0%
NHS 111	1%
I don't know/I'm not sure	0%
Total number of respondents	1,008

Q5 - If your child/children were to experience the following eye issues, where would you go first? EYE INJURY

	TOTAL
GP	11%
Opticians practice	11%
Pharmacist	1%
A&E	67%
NHS 111	8%
I don't know/I'm not sure	1%
Total number of respondents	1,008

Q6 - Do you have a child who wears contact lenses or glasses? Note: If you have multiple children who need glasses/contact lenses, please choose one child to base your answer to this question and the next on.

	TOTAL
Yes, contact lenses	1%
Yes, glasses	44%
Yes, both contact lenses and glasses	7%
No	48%
Total number of respondents	1,008

Q7 - Did the person who helped you choose your child's glasses explain the importance of the frame size and fit? Note: If you have multiple children who need glasses/contact lenses, please choose one child to base your answer to this question on.

	TOTAL
Yes	78%
No	16%
I can't remember	6%
Total number of respondents	516

Q8 - Which (if any) of the following items does your child/do your children who need(s) glasses/contact lenses have? CHILD/CHILDREN HAVE THESE

	TOTAL
Sunglasses	35%
Swimming goggles	13%
Sportswear (i.e. goggles for rugby/football, etc.)	6%
Total number of respondents	528

Q8 - Which (if any) of the following items does your child/do your children who need(s) glasses/contact lenses have? HAVE THESE OR PLAN ON BUYING

	TOTAL
Sunglasses	57%
Swimming goggles	21%
Sportswear (i.e. goggles for rugby/football, etc.)	12%
Total number of respondents	528

Q8 - Which (if any) of the following items does your child/do your children who need(s) glasses/contact lenses have? KNEW THEY EXISTED

	TOTAL
Sunglasses	98%
Swimming goggles	90%
Sportswear (i.e. goggles for rugby/football, etc.)	90%
Total number of respondents	528

Q8 - Which (if any) of the following items does your child/do your children who need(s) glasses/contact lenses have? DIDN'T KNOW THEY EXISTED

	TOTAL
Sunglasses	2%
Swimming goggles	10%
Sportswear (i.e. goggles for rugby/football, etc.)	10%
Total number of respondents	528

Q9 - To your knowledge, which of the following people can legally dispense children's eyewear (e.g. glasses and contact lenses)? Please select all that apply.

	TOTAL
A dispensing optician	71%
An optometrist	68%
Somebody being supervised by a dispensing optician/optometrist	40%
Anyone who works in an optician's practice whether supervised or not (i.e. dispensing opticians, optometrists, optical assistant)	5%
I don't know / I'm not sure	15%
None of the above	0%
Total number of respondents	1,008

Q10 - Which of the following do you feel best describes the optometrist's main role in an opticians practice?

	TOTAL
They perform the eye test and eye health checks	83%
They fit glasses and contact lenses	4%
I have heard of this title, but am not sure what their role is	12%
I have never heard of this title before	1%
NET: Incorrect answer or don't know	17%
Total number of respondents	1,008

Q11 - Which of the following do you feel best describes the dispensing optician's main role in an opticians practice?

	TOTAL
They perform the eye test and eye health checks	12%
They advise on the most suitable glasses based on the prescription and on facial measurements	74%
I have heard of this title, but am not sure what their role is	11%
I have never heard of this title before	3%
NET: Incorrect answer or don't know	26%
Total number of respondents	1,008

Q12 - Please state whether you believe the following statements to be true or false. TRUE

	TOTAL
All children under the age of 16, as well as children under 19 in full-time education are entitled to NHS-funded eye tests	96%
Children need to be able to read before they can have an eye test	3%
Buying glasses and contact lenses online for children under the age of 16 is illegal	31%
School vision screenings are the same as full sight tests carried out at an opticians practice	4%
Total number of respondents	1,008

Q12 - Please state whether you believe the following statements to be true or false. TRUE OR 'NOT SURE'

TOTAL	
All children under the age of 16, as well as children under 19 in full-time education are entitled to NHS-funded eye tests	99%
Children need to be able to read before they can have an eye test	9%
Buying glasses and contact lenses online for children under the age of 16 is illegal	80%
School vision screenings are the same as full sight tests carried out at an opticians practice	21%
Total number of respondents	1,008

Q12 - Please state whether you believe the following statements to be true or false. FALSE

TOTAL	
All children under the age of 16, as well as children under 19 in full-time education are entitled to NHS-funded eye tests	1%
Children need to be able to read before they can have an eye test	91%
Buying glasses and contact lenses online for children under the age of 16 is illegal	20%
School vision screenings are the same as full sight tests carried out at an opticians practice	79%
Total number of respondents	1,008

Q12 - Please state whether you believe the following statements to be true or false. FALSE OR 'NOT SURE'

TOTAL	
All children under the age of 16, as well as children under 19 in full-time education are entitled to NHS-funded eye tests	4%
Children need to be able to read before they can have an eye test	97%
Buying glasses and contact lenses online for children under the age of 16 is illegal	69%
School vision screenings are the same as full sight tests carried out at an opticians practice	96%
Total number of respondents	1,008

Q12 - Please state whether you believe the following statements to be true or false. NOT SURE

TOTAL	
All children under the age of 16, as well as children under 19 in full-time education are entitled to NHS-funded eye tests	3%
Children need to be able to read before they can have an eye test	6%
Buying glasses and contact lenses online for children under the age of 16 is illegal	48%
School vision screenings are the same as full sight tests carried out at an opticians practice	17%
Total number of respondents	1,008

Q13 - Which of the following statements do you believe to be true in relation to all children under 16, and to children under 19 in full-time education?

TOTAL	
Glasses and/or contact lenses are fully funded by the NHS	29%
Glasses and/or contact lenses are partly funded by the NHS by means of a voucher	63%
There is no help with the cost of glasses and/or contact lenses from the NHS	1%
I don't know/I'm not sure	7%
Total number of respondents	1,008

Q14 - Which of the following do you feel best describes the meaning of 'myopia'?

TOTAL	
Long-sightedness	3%
Lazy eye	5%
Short-sightedness	63%
Squint	4%
I don't know/I'm not sure	24%
Total number of respondents	1,008

Q15 - To your knowledge, which of the below can slow the progression of short-sightedness in children? Please select all that apply.

TOTAL	
Time spent outdoors	48%
Reducing screen time	70%
Eye exercises	28%
Not wearing glasses	2%
Wearing a patch	6%
Glasses for 'hyperopia control' (farsightedness)	3%
Contact lenses for 'hyperopia control'	2%
Glasses for 'myopia control' (short-sightedness)	50%
Contact lenses for 'myopia control'	37%
I don't know/I'm not sure	19%
None of the above	1%
Total number of respondents	1,008

Q16 - Currently, tooth decay treatment in children under the age of 18 (or 19 if in full-time education) is fully funded by the NHS, while treatment to slow the progression of short-sightedness is not. How do you feel about this approach?

TOTAL	
I agree with this approach – tooth decay treatment should be fully funded, but treatment to slow the progression of short-sightedness should not	12%
I disagree with this approach – tooth decay and short-sightedness treatments should be fully funded	83%
I disagree with this approach – neither tooth decay treatment, nor treatment to slow the progression of short-sightedness should be fully funded	2%
I disagree with this approach – tooth decay treatment should not be fully funded, but treatment to slow the progression of short-sightedness should be	2%
Total number of respondents	1,008

Q17 - To your knowledge, which of the below are evidence-based ways of keeping children's vision healthy generally? Please select all that apply.

TOTAL	
Limiting time on screens	85%
Reading physical books	27%
Staying in when it's sunny	4%
Eating brown carbohydrates	3%
Spending time outdoors	57%
Eating plenty of fruit and vegetables	69%
Daily eye exercises	18%
Wearing blue light filtering glasses	12%
None of the above	6%
Total number of respondents	1,008

Q18 - To your knowledge, which of the below is best for children's eyes on sunny days?

TOTAL	
I don't know/I'm not sure	2%
To wear a sun hat/cap only	4%
To wear sunglasses (prescription or otherwise) only	8%
To wear a sun hat/cap, and sunglasses (prescription or otherwise)	86%
To neither wear a sun hat/cap, nor sunglasses (prescription or otherwise)	0%
Total number of respondents	1,008

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