

Assessment of Visual Perception & Visual Ability in people with visual impairment

Contact Information

First Name:	Last Name:	Sex:
Address:		
City:	State	Postal Code:
Phone:	Mobile:	E-Mail:

Identify percentage of life as blind, extend of blindness and nature of residual vision

Age Now:	Age at Onset of vision loss:
Extend of blindness 1. Complete blind since birth 2. Complete blind but had normal sight or low vision 3. Partial blind but had normal sight 4. Partial blind since birth	Any details of about vision loss
Best-corrected Acuity: In Right Eye -	In Left Eye -
Restricted Visual Field: (in degrees)	Eye Disorder:

Identify the ability to create mental images, recall images with correctness

Ask the questions below and give rating based on answer by the participants against the predefined attributes

Q1-Describe the space you are most familiar with	Total Points 25	Rating
Vividness of description	10	
Detailing of objects – size, forms, texture & colour	10	
Perspective	5	

Q2-Describe five objects you touch everyday	Total Points 20	Rating
Vividness of description	10	
Detailing of objects – size, forms, texture & colour	15	

Q3-Describe the person you love most	Total Points 10	Rating
Vividness of description	5	

Q4 - Describe what you remember most when you had sight	Total Points- 25	Rating
Vividness of description	10	
Detailing of objects – size, forms, texture & colour	10	
Perspective	5	

Q5 - Describe the new place you have recently visited	Total Points-10	Rating
Vividness of description	5	
Detailing of objects – size, forms, texture & colour	5	

Q6 - Describe your favourite TV show or cinema you have last seen	Total Points-10	Rating
Vividness of description	10	

Identify ability to use non visual senses and behavioural attributes

Q7- For which daily work you are depend on others and why

Q8- Are you familiar with Braille, computer

Q9- Do you like to be alone sometime OR with friends or family and why

Q10- Describe what you do most of the time

Identify the area of interest and level of fulfilment

Q11- What you love to do most and why

Q12- Are you doing what you love to do

Exposure to photography

Did you have formal training in photography	Yes	No
If Yes, name of the training institute		
If Yes, year in which training was completed		
If No, are you a first time photographer	Yes	No
If No, Year in which you started taking pictures		
Name of photography competition where you have submitted your work.		

Assessment of Visual Ability

Visual Ability of the visually impaired can be summarised the attributes of visual perception under different conditions or environments.

Percentage of sub-total helps in ranking the conditions / environments within the attribute while percentage of grand-total helps in ranking the attributes against overall visual perception.

Attributes of Visual Perception	Conditions / Environments	Total Points	Rating Earned	% of Sub-Total	% of Grand Total
Vividness of description	of familiar space	10			
	of daily touched objects	10			
	of loved person	5			
	of memory of sight	10			
	of new place last visited	5			
	of favourite TV show or film	10			
	Sub-Total	50			
Detailing of objects size, forms, texture & colour	of familiar space	10			
	of daily touched objects	15			
	of memory of sight	10			
	of new place last visited	5			
	Sub-Total	35			
Perspective	of familiar space	5			
	of new place last visited	5			
	Sub-Total	10			
	Grand Total	100			