

# **"IF I SEE SO GOOD - WHY DO I PERFORM SO BAD?"**

*By Melvin Kaplan, O.D.*

The word "see" can have two meanings: to have the power of sight and to understand. Language is ironic because human beings do comprehend their environment primarily through sight. But if someone's visual perception of the world is flawed, if space is visualized on two planes rather than the three that are critical for proper depth perception, isn't it likely that comprehension will be impaired as well?

The answer is a most emphatic "yes." We view the implications of visual perception in the following manner: Visual perception is the process of receiving, integrating, and decoding or interpreting visual stimuli. The antithesis of a healthy visual system is one in which the individual can see but experiences difficulty in locating, examining and identifying the dominant visual cues, as well as integrating or combining the visual and other individual stimuli. The testing of a dysfunctional individual in the conventional manner, therefore, identifies only the central process without regard to selective attention to space, organization, or orientation. Although it gives a diagnosis, such as learning disabled, attention deficit disorder, and other DSM labels, it does not enhance the cure.

Recognized symptoms include fatigue, blur, headaches, eye strain, loss of place, rereading, etc. One visually responds to the stress of these symptoms by avoidance behavior. Avoidance behavior can be so effective at masking the visual problem that no outward signs of discomfort will be seen.

The visual management of the individual at risk needs both standard and novel ways to measure and observe their performance.

As the environmental visual demands of school, work and play increases so will inappropriate performance. Performance shows a hierarchy of levels.

▶ Level I will visually see academic problems in reading, social problems and in sports.

▶ Level II will involve problems in visual organization and depth perception such as driving at night and panic disorders.

▶ Level III has both organization and orientation dysfunction such as autism, schizophrenia, and bipolar depression.

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The concept of the relationship between visual perceptual dysfunction and psychiatric dysfunction was the subject of a recent control study at the New York Medical College in Valhalla, New York. The results are statistically strong in seeing the psychophysiological relationship between vision and behavior.

Why the visual system? Simply speaking each animal on earth favors a particular modality to allow them to interact with their environment. In man it is vision. The visual transformation of light is five times faster than the chemical transformation.

Performance testing measures your level of abilities to see, move, feel and think. The questions that should be asked by the procedures are:

▶ Is the person's performance appropriate or inappropriate to the task at hand.

▶ How and to what extent can perception and competent action once established be modified?

▶ Under what conditions can such competence be modified and then reestablished at a higher level of competence.

Finally, the role of visual management in rehabilitation is to set conditions that promote changes of action to raise your level of performance in response to these questions.