



Sense Abilities

A QUARTERLY PUBLICATION ABOUT VISUAL IMPAIRMENTS AND DEAFBLINDNESS
FOR FAMILIES AND PROFESSIONALS

A collaborative effort of the Texas School for the Blind and Visually Impaired
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	<p><i>“Purpose, Satisfaction and Joy in the Lives of Students with Deafblindness and the People Who Care” will be the theme of the 2009 Texas Symposium on Deafblindness in February. Katie Easler, here with her mom Bobbi Siekierke, finds purpose, satisfaction, and joy in helping others. Read about the cause she supports, Locks of Love, in Family Wisdom beginning below.</i></p>
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Katy Bids Another Ponytail Farewell

By Bobbi Siekierke, Parent, Copperas Cove, TX

Abstract: A mother shares her daughter’s commitment to helping others through donating her hair to Locks of Love.

Keywords: Family Wisdom, deafblindness, volunteerism, giving back, Locks of Love

It was finally time!

After two years, Katy’s hair had once again grown long enough to meet the minimum requirements needed to make another donation to Locks of Love.

Locks of Love, headquartered in Lake Wake, Florida, takes donations of ponytails and braids and turns them into natural-hair wigs, also called hair prosthetics. These prosthetics are given to youngsters in need of hairpieces to cover their scalps left bare by disease or medical treatments, such as chemotherapy. The public, non-profit organization provides the hairpieces to financially disadvantaged children, under age 18, in the United States and Canada. For more details on the organization and how to make a hair or monetary donation, visit <<http://www.locksoflove.org>>.

Katy Easler, now age 20, first got the idea to donate her hair roughly six years ago when her then-intervener, Kathy Hefner, donated some two feet of hair to the cause.

For nearly three years after Kathy arrived at school with her new hairdo, Katy would only allow her bangs to be cut. Each time she went in for a trim, Katy asked that her ponytail be measured. By the time the summer of 2005 rolled around Katy's mane had grown long enough to provide a 12-inch donation and leave her enough tresses for a cute pixie cut.

As soon as the padded envelope of hair was taken to the post office, Katy started talking about growing her hair again for another donation. So she was delighted when her hair was long enough this summer to pay another visit to Miss Debbie at Classy Cuts and Styles in Copperas Cove. The salon is one of dozens across Texas that have agreed to follow the steps needed to properly cut hair. A list of participating salons in each state is available at the Locks of Love website. The ponytails or braids must be secured with bands and placed in a plastic bag. The hair can not touch the floor. Miss Debbie does not charge clients who are donating their hair to Locks of Love.



Miss Debbie of Classy Cuts and Styles in Copperas Cove prepares to cut off Katy Easler's ponytail so it can be donated to Locks of Love. The organization uses donated tresses to create hair prosthetics for children who are suffering long-term hair loss.

When asked why she wants to cut her hair and mail it to Florida, Katy signs, "To help the sick girls get wigs." Posted on the wall of her bedroom are two sets of photographs printed from the Locks of Love website; one shows a gallery of hair prosthetics recipients and the other photos are of people, like Katy, who have donated.

This school year Katy, who is deaf-blind due to C.H.A.R.G.E. association, is sporting her new look on the campus of the Texas School for the Deaf in Austin. She is attending the Transition Program as she prepares for her life ahead. It's a safe bet that her life ahead will include growing out her hair, once again, to help other girls and boys who are suffering with hair loss.

Hands & Voices Comes to Texas!

By Lisa Crawford. Texas Hands & Voices Co-Founder

Abstract: Learn about Texas Hands & Voices, a new chapter of the national organization which is dedicated to supporting families of children who are deaf or hard of hearing with information and resources so they can make the best choices for their child.

Keywords: Family Wisdom, hearing impaired, deaf, family support organizations

Since May of 2007 a handful of parents and professionals have been working towards establishing an official Texas chapter of Hands & Voices, a non-profit national organization dedicated to supporting families of children who are deaf/hard of hearing with information and resources so they can make the best choices for their child. Hands & Voices is non-biased about communication modes or methodologies, and we believe that given good information and support, families can make the choice that is right for their child. We are parent-led but open our organization to professionals who are interested in a family/child-focused approach to service delivery. Our motto is "What works for your child is what makes the choice right."

In the last 18 months we have succeeded in creating a Texas chapter website and have worked towards expanding our network of parents and professionals across the state. We are actively involved in a state effort to improve newborn hearing screening procedures and follow-up and have also been asked to provide a parent perspective to a state-wide collaborative group examining Deaf Education in Texas. Over the summer

we worked with DARS/ECI (Early Childhood Intervention) to increase awareness about resources for parents related to hearing loss.

We strive to help parents become knowledgeable about their child's educational needs and legal rights and hope to continue to grow and provide training and support to parents across the state.

As this is being written, we have a Hands & Voices event planned in Grapevine, TX on November. 15th. Families in the DFW area will socialize with other families and learn about self-advocacy skills that can help their children be successful. Check our website for more information on future events.

The national Hands & Voices website, <www.handsandvoices.org>, is full of great articles and information about many topics related to hearing loss. The Texas website, <www.txhandsandvoices.org>, is geared toward providing information specific to Texas. Please visit our website and consider becoming a member. Your support helps us continue our efforts and, with your membership, you will receive the quarterly national publication, *The Communicator*.

If you are interested in getting our Texas Chapter quarterly newsletters via email, please go to our website at www.txhandsandvoices.org and submit an email request with your contact information and your area of interest.

A Royal Evening

By Christine Givens, Parent, The Woodlands, TX

Abstract: A mother shares her daughter's experience attending a prom specifically designed for young people with disabilities.

Keywords: Family Wisdom, deafblind, community based services, inclusion, recreation, social

On April 12, 2008, our church, The Woodlands United Methodist Church (TWUMC), held a formal dance for area Special Needs teenagers and their guests. A total of 50 teenagers arrived at the church to experience a "Royal Evening". They were Kings and Queens who were presented with crowns and personalized sashes. As the teens arrived, they were escorted to the south entrance where they embarked on an early evening carriage ride. The carriage, which was pulled by two decorated Clydesdale horses,

delivered them to the main entrance. They were again escorted to an interview area where the “Court Jester” was simulcast onto the big screens in the banquet area. He made lively conversation for all to enjoy and then introduced the arriving “Royalty”. Pictures were taken and a meal fit for royalty was served. The Kings and Queens were then entertained by a local DJ and danced the evening away.

You might be asking, “Nice article – but what is it doing in *Texas SenseAbilities?*” Well, this story focuses on two particular young people who attended the dance. What was so unique about them is that King Travis Daft and Queen Skye Givens are both deafblind and have multiple disabilities. What a spectacular pair they were on that brisk April evening. Travis arrived handsomely dressed in a black tuxedo with matching yellow cummerbund and bowtie and Skye arrived in a beautiful yellow gown with a matching wrap. Our Special Blessing Ministry Team at (TWUMC) made some very special arrangements to meet their unique needs.

Let’s back up to the day that Skye received an invitation from her friend Travis to come as his guest. Skye is only 10 years old and Travis is 17. First, we convinced Dad that his little girl, Skye, was growing up and opportunities to socialize will be coming her way. This was a very exciting time, and Skye needed something to wear. Honestly, as Skye’s mother, I was a little perplexed about the proper attire for a formal dance, and how do we even go about finding a dress???? I mentioned the invitation to Skye’s Recreational Therapist, Kristin Schultz, and without any hesitation on her part, she immediately responded “we’re going dress shopping,” and that’s exactly what happened the very next week. Skye was a trooper and Kristin was leading the way, determined that we were going to try on as many dresses as needed to find just the right one. (It only took 12 dresses for Mom to decide that dress number 2 was really the perfect one for Skye.)

Of course, Mom had to do the trial run for fixing hair and dressing just to be sure we didn’t have any snags on the “big night”. Skye’s grandparents and several of our neighbors came to give Skye a “paparazzi” send off, complete with flashing cameras and well wishes from all. Of course Dad was the proudest of all and he shared some heartfelt words before we left. (I wish I had thought to ask someone to take a picture of his face when he saw her all dressed up for the first time. She looked beautiful.)

Kristin and I met Travis and his parents, Teresa and Gary, at the church. Skye and Travis exchanged flowers. Travis and Gary had picked out a yellow corsage for Skye, and Skye helped design Travis' yellow boutonniere. You could not have found prouder parents at that moment. So many plans and special arrangements had taken place and now the evening was in full swing.

Our Special Blessing Ministry Team had thought of every last detail to accommodate their needs. Travis and Skye arrived just in time to be the final carriage riders for the evening. Volunteers were ready to lift each of our Royals into their Cinderella carriage, and ready at the other end with wheelchairs in hand to get them resettled. Cameras and videos were in constant use to help tell their story.



Once they arrived for their interview, the Court Jester welcomed them and announced their arrival.

They posed for some pictures and went right to the dance floor where they enjoyed dancing to the classics – The Chicken Dance, The Conga, The Cotton-Eyed Joe, The Train Dance and YMCA to name just a few. Of course the dancing was made complete by the parents and Kristin who maneuvered the wheelchairs expertly across the dance floor and attempted to keep up with the various hand signs and arm motions. Beforehand, Teresa and I both felt that if they could just make it through one or two songs, it would be a success. Well, our young party animals danced almost until the end. They had a great time!

As I write this article there are so many people to thank for making this evening so successful for these two young friends. We extend our deepest thanks to TWUMC, the Special Blessing Ministry Team, the many volunteers who assisted with the decorations, pictures, etc., of course the parents and Kristin, the surrounding community and all who heard their story before and after the dance. It doesn't matter that our kids have issues, we still want them to have those "awesome moments" that none of us will

ever forget. Skye and Travis' experience touched so many lives during this time and we're all thankful to God for their special spirits. Their stories have opened the door to talk to people who are unaware of deafblindness and multiple disabilities. Countless pictures have been sent to family and friends and anyone who wants to hear—I generally have pictures with me so I'm ready. What's even more amazing is that their story continues to touch hearts. Who knows – possibly next year somewhere in the US another deafblind couple will be attending their prom for the first time.

As you finish reading this article, I hope it encourages you to look at those individuals in your own life who are deafblind and make sure that their stories and “awesome moments” are shared with others. In fact, share with as many people as possible. Remember – Travis and Skye created change.

My First Prom

By Travis Dafft, Student, Houston, TX

Abstract: A high school student who is deafblind shares his experience attending a dance sponsored by a local church.

Keywords: Family Wisdom, deafblind, community based services, inclusion, recreation, social

A note from mom: This article is written through Travis' perspective through a process we routinely use. He chose individual phrases and words for this article on his own. For example, we would come up with an idea that fit into the specific part of the storyline and present Travis a choice about what to write. After it was written, he would be asked if it was okay. If Travis responded “yes,” the sentence would stay in the article. If he said “no,” then we would begin the process of making choices again. While it is a lengthy process, we are finding that Travis not only has a wicked sense of humor but now he really has a voice. Instead of being talked about, he engages with people.

Thanks to TWUMC, Special Blessings Ministry Team, Lisa and Nino Thompson, Debbie and Kevin Glass, Willie and Gayle, George and Christine Givens and all the parents and high school volunteers who made this a special night for all. While on vacation in Indiana, Travis has shown his pictures and told his story to many people. It has even encouraged his

friend Amanda to speak to her pastor about holding a special prom at her church. It is amazing the change two smiling faces can bring to this world.

Most teenagers look forward to the spring when the big event takes place in their lives...PROM. Every year, The Woodlands United Methodist Church holds a "Special Blessings" prom and this would be my first year that I would be able to attend. I never thought this day would come, especially after all the medical crisis I have had lately. But April 12th was approaching fast and I still did not have a date for the dance.

As I lay in my hospital bed, I decided to ask a friend, Skye Givens, to join me at the dance. My mom and I were a little worried because Skye is 10 and I am 17 and maybe her parents wouldn't let her go. So my mom asked her mother if it was ok to invite her. Ms. Givens was excited and said I could ask Skye to go to the prom as my guest.

I made a special invitation asking Skye to do me the honor of attending a "Royal Evening" with me at the church. Her parents called and said she would love to go.

Now the real work began. Mom told dad and me that it was our job to get my tux and her flowers. Dad was ready to go to the mall but mom said we had to wait until we knew the color of Skye's dress. While Skye and her mom were shopping for her dress, a friend of mine Sky Hoake, gave me his old tux that he had outgrown. It was a perfect fit.

Finally Ms. Givens called and said that Skye would be wearing a yellow gown. Dad and I ordered a yellow cummerbund and bowtie from the internet. He asked mom if I needed shoes but mom said I could wear my black shoes that fit over my braces. Then it was off to the flower shop. The clerk helped us pick out a pretty flower design, and I paid for it.

Dad and I went to the mall to get me some special cologne for the big night. I smelled over 12 scents before I picked the most expensive Gucci cologne. Now I was ready.

April 12th finally arrived; I spent the afternoon getting dressed. My sister came over and we took a lot of pictures. I gave mom a special flower for her to wear. Then it was off to meet up with Skye.

When we arrived at the church, there were a lot of friends all waiting to greet us and take our picture. Skye and I got our crowns and sashes proclaiming

us to be King and Queen. We had a short ride in a horse drawn carriage to the entrance of the hall. We were introduced by the court jester and then the dance began.

Mom and Ms. Givens were sure that it would be a short stay because Skye and I are both Deafblind and don't handle noise very well. Our parents thought that we would last one maybe two songs at the most. As the night progressed, I never left the dance floor. Mom helped me dance at first, then she showed two very nice high school girls how to move my chair and they were my partners for the rest of the night. Skye danced nearby with her special helpers and we had a blast. My first prom was a huge success and I can hardly wait until next year.

Your Relationship with Grief and Adapting

By Elisa Sanchez Wilkinson, Mom and Family Resource Specialist, Project for New Mexico Children and Youth Who are Deaf-blind

Abstract: The author walks the reader through current literature on the process families go through when they learn their child has a disability by relating it to her personal experiences.

Keywords: Family Wisdom, deafblindness, grief process, adapting

In our everyday lives we often wonder why some things make us happy and some things make us sad. It is the fulfillment of dreams and expectations that makes us happy. It is the loss of a way of life or of a dream that makes us sad, possibly even grieve. I am the mother of two beautiful children. My eldest child has dual sensory impairment and ambulatory issues. I grieve about many things. Do you?

I was watching the television show, *Bridezillas*¹. I saw women who were typically nice, reasonably likable people turn into crazed, frenzied women with no regard for others feelings. I was amazed at their transformation. Why would a nice person change so drastically? These women have expectations of exactly how their wedding day is supposed to be. They have dreamt about the dress, the flower arrangements, the decorations, and the cake ever since they were little girls. To then have a wedding that may not live up to their expectations is beyond reason. They become a person they, themselves, would not recognize. Why? Because dreams are

powerful. Fulfilling a dream means being successful and happy. Anything less means shattered dreams, disappointment, and sadness.

Loss and grieving are such complex emotions. This has become an interest of study for me. The loss of dreams/expectations is part of our everyday lives. So, that means that grieving is also a part of our everyday lives. So, how can these emotions be so foreign to us? Why do we try to repress grief when allowing ourselves to grieve may be as healthy for us as exercising? Dr. Ken Moses, PhD., a noted psychologist in the area of crisis, trauma and loss, has stated that people's dreams can be shattered, even dreams that we are not conscious of having. Having children with perfect health, or living until we are old and dying in our sleep are a part of life that many of us expect to happen. What happens when those expectations are not met? We grieve.

Grief is profound. It is life altering. It happens everyday to everyone over situations many of us don't even realize. The other day I was taking my son out to lunch. I was going to take him to a little deli that is delicious. When we got there, the deli was in the process of closing...for good. I was so disappointed. He was not ever going to taste the best meatball sandwich in the entire city of Albuquerque. It was an experience I wanted to share with him that is not going to happen. Yes, this is trivial compared to other losses in people's lives yet it reminded me of what people often say to me regarding my son, "...he never knew what it was like before, so he really won't miss it." You see, my son has a below the knee amputation, this is the ambulatory issue he lives with. A procedure was done to save his life as a newborn, but with life altering complications. A catheter was placed in an artery and because of poor circulation in a premature baby, he threw a clot. After weeks of intrusive procedures nothing could be done. At four and a half weeks old, with pulmonary problems, my son experienced a below the knee amputation. Many people have said this to me, "...oh, well, he's never known anything different so he's okay." Right? Wrong! Every time I think about the limb my son has lost, even if it was to save his life, I grieve.

How does a family react to the birth of a child that is different, a child who is not typical, a child with special needs? Ask a new dad who has already gone out and bought the little baseball glove and is dreaming of being his sons little league coach someday. Talk to a young mother who has carefully packed away her wedding gown in the hopes that someday her daughter

will want to wear it. When the baby is born and he or she is born with a disability, the future is unknown. Dreams are shattered. The grieving has begun. How does a husband react to the loss of his wife, of many years, to a disease that slowly robbed him of her? The grieving continues. What does a person do when he/she loses a job that is desperately needed to support the family? The grief is real. The stories go on, so does the grief.

How do we deal with it? The Four Stages of Adaptation is a method of understanding where a person is emotionally, some of the issues they are dealing with in that stage, and how to be more comfortable with where he or she is. The four stages are Surviving, Searching, Settling In, and Separating. Every person is an individual and can move through the stages in his or her own way and time. It is empowering to know that there is no wrong way to adapt. A person can move into a new stage and then move back into a stage they may have been in previously. They actually have more of a circular quality than a linear one. Nancy B. Miller, Ph.D. M.S.W. wrote this in the book, *Nobody's Perfect – Living & Growing with Children Who Have Special Needs*.²

The Four Stages of Adaptation are very real. Surviving is what you do to keep going when feeling completely overwhelmed because something totally out of your control has taken away your child's equal chance at life. Searching is a stage where you are looking for answers for your child. You will probably have periods of Searching during your whole life with your child. There are two kinds of Searching, outer and inner. Outer Searching is looking for a diagnosis or services while Inner Searching is trying to find your identity as the parent of a child with special needs. Settling In is another stage when the frantic pace of Searching lets up. You begin to choose your battles and balance your child's schedule and your family life. Not only has your Outer Searching subsided for a while, but more importantly, your attitude about it settles down. Separating is a normal, gradual process that occurs in tiny steps throughout childhood. When a child has special needs, the process may need to be altered or slowed down. Extra parenting may be required—you may have to initiate separation, plan it, find it, and make it happen. Letting go on your part is also necessary.

My son is 15 years old now. I move consistently between Inner Searching and Separating. I have protected him, taught him, and always tried to

foresee any obstacles in his path. I have my dreams for him and his future; yet, I struggle with the need to “initiate separation and let it happen.” I have to find my identity as the parent of a child, turning into an adult, with special needs. As I look back on all the obstacles we as a family have overcome, I realize that I can adapt my dreams to match and support his. It won’t be easy but nothing worth having ever is. Will I still grieve? Of course, every time I see the obstacles he will face for the rest of his life.

In a way, I felt like the brides that envision a perfect day; I wanted my life, and the lives of those I love, to be perfect. My perceptions of “perfect” have changed. Grieving is part of my life and so is adapting to what comes my way. I wish I could tell those brides that the wedding is just one day. It’s the marriage you want to last a lifetime. Perfection is an illusion not worth grieving over if it is not achieved. Happiness is in learning how to adapt.

¹ *Bridezillas*, where brides go from sweet to certifiable. (WEtv, Sunday 9/8c). <www.wetv.com/bridezillas/index.html>.

Taken from *Nobody’s Perfect - Living & Growing with Children Who Have Special Needs* by Nancy B. Miller, Ph.D., M.S.W., adapted by Laura J. Warren, Pilot Parent Family Resource Center, The Arc of the Capital Area, 1/96.

Siblings: Unusual Concerns ... Unusual Opportunities

By Julie and Mark Martindale, Parents, Anoka, MN
Reprinted with permission from *Deafblind Perspectives*,
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Abstract: Parents share the lessons they have learned through their children who are growing from the joys and difficulties they experience in having a sibling who is deafblind.

Keywords: Family Wisdom, deafblindness, visual impairments, sibling support, parent perspective

It was a Sunday morning, and we were frantically rounding up our four young children at church, when a few words from an acquaintance stopped us in our tracks. It was Christmas time, and all the children were supposed to sing in the school program that evening. Our son, who uses a wheelchair and is DeafBlind, was going to be part of the program with all the other

children. As this person looked down at Aaron sitting in his chair, she asked, “Is he going to be in the program? He can’t sing.” Many emotions stirred in us immediately—anger and hurt at the insensitivity of this individual and even embarrassment and self-doubt. Maybe we should not have put him in the musical.

It was our son Tyler who answered the woman simply and eloquently as we stood there still stumbling for the words to say. Tyler said with confidence and pride, “My brother can sing. He sings with his eyes.” If some day you meet our son Aaron, you will know what Tyler is talking about—because Aaron does sing with his eyes and he says more with one smile than most of us can say with a thousand words.

But it was Tyler who amazed us the most with his answer. It reflected acceptance, insight, and maturity beyond his years. This was a turning point for us. We know that in all the worrying we had done over our typically developing children, we had lost sight of the benefits that come from having a sibling with special needs. It is not an easy road for siblings, but along the way they learn skills and form attitudes that can help them throughout life. Their experiences are not really that different from ours as parents. They didn’t choose this road for themselves, and through the tough times they learn that life is not to be taken for granted. And with our help, they can emerge as stronger, more sensitive, and self-assured human beings, just like us as parents.



Aaron with his brothers and sisters. Aaron (11) is at the bottom, then clockwise are McKenna (10), Hope (8), Brennan (4). Tyler (12). and Jordan (6).

We’ve spent a lot of time worrying about the effects of the extra attention that our special needs children get. How could we possibly explain to a two year old why the physical therapist was coming to play with his baby sister, but not with him? She is “special,” but so is he. Was this going to make him feel insecure? Would he feel too much pressure to be the one to succeed

because his siblings wouldn't be able to do all that he was able to accomplish? Would he grow up resentful or angry?

In the book by Donald J. Meyer, et al., *Sibshops: Workshops for Siblings of Children with Special Needs* (Paul H. Brookes Publishing Co., 1994), the authors list some of the most common concerns that are associated with being a sibling of a child with special needs and also some of the many positive opportunities for growth that siblings have. Here are some examples:

Unusual Concerns

overidentification
embarrassment
guilt
isolation or loss
resentment
increased responsibility
pressure to achieve

Unusual Opportunities

maturity
self-concept & social competence
insight and tolerance
loyalty
vocational opportunities
pride
advocacy skills

In spite of the difficulties, there are great joys. The siblings see all of it, sometimes more than we do. We have a lot to learn from our typical kids and we are learning to listen to them more and more. We have decided not to worry so much (OK, we know it is easier said than done) about the negative possibilities that can affect our kids. We're learning to worry less and experience life more. As we seek to enjoy the little things in life and to learn from the difficult times that come our way, just maybe our attitude will shape the attitudes of our children. But most likely, it will be our children teaching us.

Concern for Friends and Families Affected by Hurricane Ike

TAPVI



Editor's Note: Several members of the Texas Association for Parents of Children with Visual Impairments (TAPVI) were affected by Hurricane Ike, which prevented them from making the publication deadline. Please go to the TAPVI website at <www.tapvi.org> for information about joining their organization. The Texas VI Family Network listserv will post any new developments and information. To subscribe to this listserv, family members must send an email to <txvifamily-subscribe@topica.com>. For more information contact Jean Robinson at 512-206-9418 or <jeanrobinson@tsbvi.edu>.

The Journey to Becoming a Parent Advocate

By Vivecca Hartman, Parent Leader & DBMAT Treasurer, Houston



Abstract: The parent of a child with deafblindness shares her experience in becoming a parent leader and advocating for change.

Keywords: Family Wisdom, family leadership, advocacy, leadership, family organization

I have recently been feeling a sense of awe about the words, “you have power as a parent,” and what it means to be a “Parent Advocate”.

When we first found out about our precious baby’s inability to see, and then a few months later his inability to hear, we were (and probably still are) in shock. For every family the news of any imperfection is overwhelming. Then you start having therapy sessions with Early Childhood Intervention (ECI) which you cling to like butter on toast! Then you find out about other services or groups that are more specific to your child, like The Texas Deafblind Project, and you just start calling until you find a way for you and your family to cope with the daily challenges life brings. Well that about sums up being a parent of a person with special needs. (This is a major understatement—wouldn’t you agree?)

That is how I feel about the term “Parent Advocate.” You will hear it over and over with regard to so many different areas. For me it started in ECI. They would tell me I will learn how to be a “Parent Advocate,” and I would just stare and think, “What does that mean?” Why do people put so much value to that term “Parent Advocate”? I found it quite annoying that people would say this to me with such a nonchalant expectation, and yet I had no idea what it meant.

Well, I have been “in the business” of Special Needs for 10.5 years (my deafblind child’s age), and I think I only recently caught on to some of what they really meant. At first I thought it was being at every therapy session and school meeting; constantly searching the internet (after everyone was in bed) to stay up on all the related research; reading every newsletter and just about anything you can find that is relative to your situation; keeping it all filed and organized; and contacting any services that are related and that

can help. Doing this, and all the while trying to maintain a household, be a supportive spouse, don't forget to parent the other children, and oh, if you work, do a good job at that too.

So, what I realize today is that there are differing levels or steps of being a Parent Advocate. Getting through the first phase of dealing with the news and getting services started is an important step in becoming a Parent Advocate, because you have to start somewhere.

I have been told so many things over the years and read so much, there is no way I could retain all of it. So, in some ways we do filter through all of the information and advice to find what we can cope with. For us, there was a definite stage of filtering through the information and attending seminars while trying to maintain a routine home for the family. We were in this stage for a while. Suddenly, it dawned on me that I do know my family's needs and my deafblind son's needs as well. Although, I admit I do (and did) not know everything, I knew enough to speak-up and be heard. I realized I had to be a voice for him and let others know what is important to him. As the "expert" on your child, you have that ability to express to the school (or whomever) what his or her abilities, likes, and needs are. You know what makes your child happy or upset – you are the *expert* on your child. This is what brings you forward to being a Parent Advocate.



Along with other families from the Deaf-Blind Multihandicapped Association of Texas (DBMAT), Vivecca Hartman has recently continued her journey as a parent advocate by meeting with government leaders at the Texas State Capital. She is pictured here with her children, Kaylina and Christopher, husband Chris, and Texas Governor Rick Perry.

Suddenly I found that I was taking a chance and speaking out to say what my child's needs are, and people listened!

For example, I knew he needed physical play for both his emotional and physical well being. It was imperative to me that he had it during his school day or we would be going down a very bad road of behavior issues. I took a chance and approached the school principal about a “Sensory Motor Lab” of some sort so he could play in a safe environment. Unfortunately, due to his blindness and caution on his part, he does not just run and play outside on his own, and he does not currently have enough communication to participate in regular PE. Amazingly, the principal had also been addressed by the Health Fitness Director of the school district about potentially being a pilot school for something called “Action Based Learning.”

Let me tell you, this “Action Based Learning” is a wonderful brain research based physical play program that develops the whole child. It focuses on physical actions that target certain parts of the brain for development. It was originally established to help regular education students with their mathematics and academics, but it also develops the vestibular system and so much more! You can find out more about it at www.actionbasedlearning.com.

The three of us met and devised a plan for how we were going to make this Action Based Sensory Motor Lab a reality. I had said I would do the fundraising to cover the equipment—which I am sure helped—but I think it would still have happened, just with less equipment. By working together we have been able to make it *great* for all the students in the school. Now our school district is even considering it for other schools too!

It really does mean a lot when to the school system when a parent feels strongly and is compelled to work with them in determining the means to get things done!

It has been a nice journey so far, finding out what being a “Parent Advocate” would mean for me. While I had mostly been overwhelmed with my child’s diagnosis, wondering what life would be like for him as well as us, been through our “survival and coping stage”, realized we are the “experts” on our son, and now realize we are “Parent Advocates.” What a journey...and it is nowhere near over!

Next, we (that includes you) will have to figure out the legislative processes to further improve the lives of our children. If we do not speak up for them, no one will!

So, good luck to all of you, from the new and old members of DBMAT! You are a Parent Advocate, because you do have the power to affect your child's surroundings at home and at school, or wherever they may be in life!

Steve's Rules for Self-Advocacy: Confessions of a Recovered Bureaucrat and Speed Demon

By Steve Schoen, Executive Director,
Deaf-Blind Multihandicapped Association of Texas (DBMAT), Austin, TX

Abstract: The author shares tips for working with different systems to advocate for change.

Keywords: Family Wisdom, blind, visually impaired, deafblind, self determination, advocacy

I was having consumer difficulties today (having to deal with a New York parking ticket and a rental car) and it made me think of parents dealing with "the system." Quite a few parallels (having nothing to do with parallel parking) occurred to me. So here are Steve's rules for self advocacy (which I learned from some of you when I was the bureaucrat.)



1) Get the facts.

In my traffic case I needed to call the Village of Mineola and figure out why my ticket price had grown to a scary amount. In the case of a parent, it pays to look at the system you are dealing with (school, private provider of services, state program), and educate yourself about how the system works.

2) Review the legitimacy of your claim.

In the case of my rapidly growing traffic ticket, I asked my wife Marian what she thought, and she said, "Just pay it...," which I ignored. In the case of a parent, it pays to look at what it is you are wanting, and be sure that the request is reasonable. It helps to ask a friend (who is knowledgeable about disability and special needs) to review the facts with you. Many times, parents know their children better than the professionals. They also may know about more effective training or treatment possibilities through their experience as parents and attending training from others.

3) Don't accept the first "no."

In talking to the rental car person, I found her saying the same thing over and over despite my incredibly erudite explanation of where her company was at fault. When you are talking to a professional about your claim, you may hear this type of repetitive response amounting to "No," or "The system doesn't work that way," or "We know what your child needs," or "No one has ever asked for this before." (I could go on--- but I bet most parents can create a far better list than I could.)

4) Take it to the next level.

There is almost always a next level. After hearing the rental car person tell me the same company policy 3 times, I said, "I understand what you are saying, and I understand that at your level in the organization, this is all you are authorized to say... I want to talk to a supervisor." Each time she repeated her "company policy" statement, I repeated my "supervisor" statement. After only 3 more replays of this scenario, I actually got transferred. When parents are dealing with systems, this rule is very important. The person at the first level is not the final word. And frequently, there is more than one level where you can take your request.

5) Stay calm.

My family will attest that when my volume and pitch of speech go up, I am out of control when talking to "the man." This time I focused on my breath, kept my eye on the goal I wanted, and stayed very peaceful. It helps to think of the entire process as a game, and that one rule of the game is to stay calm. I know.... I know... that the stakes parents are dealing with are significantly higher than a traffic ticket fee. But that's all the more reason to stay calm.

6) Try to identify with the person you are talking to and give them some credit.

Whoops--- To be perfectly honest, I forgot to do this with my traffic ticket. But you can do better than I. Easy things to identify with are: "I know you have a hard job.... what with all of those pesky rules and such," or "You have done a great job explaining this to me."

7) Don't gloat when you get your way.

In my case I only had to pay 58% of the original fine (but who's counting?). I thanked the supervisor for being reasonable and told him I thought this was a fair settlement. It would NOT be good to say the things that are just itching

to come off your tongue like: “Wouldn’t we have saved a lot of time if you were just reasonable from the start,” or “You people are really difficult.” Remember, you may be back soon enough on another issue.

All of these thoughts will be important as DBMAT tries to advance its legislative agenda. I hope we will be able to report on our success as the year progresses. And my last thought for now is to remind everyone to visit our newly revised website at <<http://www.dbmat-tx.org>>. You will find many new features including: online application for membership, contact information for our regional coordinators, online application for intervener scholarships, and fancy opportunity to contribute to DBMAT online and receive a premium of DBMAT cap and cup. See you online!

Occupational Therapy and Sensory Integration for Visual Impairment

Lisa Ricketts, OTR, Texas School for the Blind and Visually Impaired

Abstract: This article discusses the impact of visual impairment on sensory integration, and how sensory integration disorder manifests in students with blindness and visual impairments. Treatment approaches and educational interventions are also described.

Keywords: sensory integration, blindness, visual impairment, motor development, tactile skills.

As an Occupational Therapist at TSBVI, I am inspired to learn all I can about the theory of sensory integration by Dr. A. Jean Ayres. As a specialist for children with visual impairment and multiple disabilities, I am studying the impact of vision loss on the other senses and overall developmental progression. I also work at a sensory integration clinic here in Austin for the treatment of autism and sensory processing disorders.

I am lucky to be surrounded by expert teachers, therapists, school psychologists, and, most importantly, by my students, whom I learn from every day. My purpose here is to share terminology, explanations, and problem solving ideas with students, parents, and teachers.

Sensory Integration and Motor Control

The author and initial researcher of the Sensory Integration Theory used in Occupational Therapy is Dr. A. Jean Ayers. Her work presents an expansive theory describing how the brain and the body processes,

organizes, and integrates the sensations received through sight, sound, touch, taste, smell, body position, and movement.

Students with visual impairment rely on hearing, touch, body position and movement sensations for everyday activities. Normally these activities are directed by vision. Sensory Integration theory provides a framework to help emphasize and explain the role of all our sensory systems.

Touch

The tactile system processes touch experiences felt through the skin as light touch, firm touch or pressure, static touch, moving touch, temperature, pain, and comfort. There are two primary functions of the tactile system. One is protection and the other is discrimination.

The protective touch function is neurologically bound to the limbic system of the brain. This system is described as the emotional control center with direct connections to the primal flight or fight responses. The protective function of the skin is reflexive and primarily unconscious with touch sensations automatically categorized into calming, soothing, familiar sensations, or into danger reactions.

The discrimination functions of the skin are conscious, cognitive tasks that are learned through experience. These include touch localization, recognition, and stereognosis. Localization refers to knowing where on the body one is being touched. Tactile recognition is required to learn characteristics of objects such as size, shape, texture, and the weight of items. Stereognosis is object recognition through touch.

Signs of tactile system imbalance:

- Reacts negatively to touch, does not like being picked up or hugged.
- Does not like being touched and may rub or press on his or her skin after being touched.
- Startles easily.
- Inability to feel touch immediately and responses are delayed.
- Extraordinarily high or low tolerance for pain.
- Does not like certain clothing or tags in clothes, and wears clothes for the wrong season.
- Does not like band-aids or stickers on skin.

- Uncomfortable wearing shoes or socks, or unwilling to walk barefoot.
- Does not like brushing hair or teeth, or cleaning and trimming nails.
- Avoids certain foods because of texture, or does not chew food well.
- Rejects touching messy materials and will not handle clay, mud, shaving cream.
- Washes or wipes hands often.
- Uses fingertips instead of the entire hand.
- Has a hard time sitting still.
- Is poorly coordinated, is a heavy walker, or walks on toes.
- Craves touch and may over-touch others or objects.
- Doesn't notice when hands or face are messy.
- Doesn't notice when clothes are twisted, or when feet are not well placed in shoes.

Body Position

Proprioception refers to body position sensation and is required to regulate movement and posture. This system allows us to feel the position of our limbs for motor control and to determine the amount of strength needed for specific actions, or graded force. It is an unconscious feedback system between the muscles & joints of the body and the brain. The receptor stimuli is the bending, straightening, pulling, and compressing of the body's joints between the bones. Proprioception is neurologically connected to both the tactile and the vestibular systems.

Signs of proprioceptive system imbalance:

- Has difficulty planning and executing motor tasks for gross or fine motor activities such as getting on or off a bike or riding toy, climbing on/off playground equipment, buttoning clothes, turning on/off a faucet, pouring, etc...
- Has a high need for jumping.
- Enjoys hanging by the arms.
- Tends to lean on or hang on people or furniture.
- Enjoys falling down.
- Assumes odd body positions.

- Is clumsy and plays roughly.
- Breaks toys often.
- Grips a pen or pencil too loosely or too tightly.
- Has difficulty with fine motor skills for picking up small objects.
- Did not crawl much during early development.
- Difficulty grading muscle force—muscle exertion is either too much or too little to manipulate objects and perform tasks.
- Puts non-food items in the mouth, chews on clothes, or grinds teeth.
- May hit, pinch, or bite self or others.

Movement

Vestibular processing refers to movement and balance sensations. These are the combined functions of the semicircular canals of the inner ear, basal ganglia, cerebellum and the cerebral motor cortex. This system regulates the feelings of motion such as balance, acceleration, deceleration, starts and stops, direction, rhythm, and creates and stores patterns of movement. The hair cells inside the semicircular canals are activated according to position and movement of the head in relation to gravity. Vestibular processing is likely to be impacted by auditory impairment.

Signs of vestibular system imbalance:

- Difficulty maintaining balance and controlling the speed and direction of movement.
- Poor balance reactions such as protective extension or righting responses.
- Poor spatial orientation and is easily confused by directions.
- Fears being upside down or tipped sideways.
- Is anxious when feet are not touching the ground.
- Is anxious about walking up or down inclines.
- Is anxious walking up or down stairs.
- Rejects unfamiliar movement activities and is afraid to move backwards.
- Is afraid of movement, or is gravitationally insecure.
- Gets motion sickness easily.

- Is anxious about swimming.
- Seeks out gross motor movement and may have a very high tolerance to spinning.
- Possible extraneous or non-purposeful movements.
- Can't sit still—craves movement.
- Likes to fall without regard of safety.
- Difficulty with self regulation.
- Needs to be moving but this may interfere with listening and interacting.
- Needs to be moving in order to listen or be attentive.
- Needs to jump or spin.
- Likes inverted upside down position.
- High or low muscle tone—the vestibular system combines with the proprioceptive system to regulate muscle tone.

Impact of Sensory Integrative Dysfunction

Sensory integration is the organization of sensation for use. Countless bits of sensory information enter our brain at every moment, not only from our eyes and ears, but also from every place in our body. Sensations are food for the brain that provide energy and knowledge needed to direct our body and mind. The greatest development of sensory integration occurs during an adapted response; this is a purposeful, goal directed response to a sensory experience. In an adaptive response, we master a challenge and learn something new. At the same time, the information of an adapted response helps the brain to develop and organize itself. The first seven years of life our brain is a sensory processing machine nourished by having fun through play and movement. The child who learns to organize play is more likely to organize activities of daily living.

If the brain does a poor job of integrating sensations, this will interfere with many things in life. The brain is not processing or organizing the flow of sensory impulses in a manner that gives good, precise information about the body or the world. Learning is difficult and a child often feels uncomfortable and cannot easily cope with demands and stress. If a child is

blind or visually impaired this difficulty is compounded when attempting to make sense of his or her world.

Complex medical problems associated with many syndromes at birth may result in delayed sensory integration development. This delay may be due to either neurological disorders or medical issues creating limitations to sensory experiences that nourish the brain. Symptoms of irregular sensory processing in the brain are different for each child. There are three basic sensory systems that impact how a child learns and behaves in the environment. They are the tactile, vestibular, and proprioceptive systems. The following outline is a brief description of symptoms observed in each of the three systems when dysfunction of sensory processing is present:

The Tactile System (Discriminative versus protective touch)

Dysfunction in the discriminative system may result in:

- Difficulty with fine motor skills impacting daily living skills.
- Problems articulating sounds due to inadequate information from touch receptors in and around the face and mouth.
- Difficulty with accurate tactual perception and basic concepts.
- Impaired awareness of body scheme.
- Inefficiency in how one tactually explores an object or the environment in order to gain additional cues which give meaning about the object and about the environment
- Contributes to somato dyspraxia – a specific disorder in motor planning

Dysfunction in the protective system may result in:

- Interpreting ordinary contact as threatening
- May be frequently in a state of Red Alert
- May react with flight/fright/or fight, either physically or verbally.
- Being labeled tactually defensive
- Some children feel too much and feel too little. Some may have a high tolerance for pain because they do not accurately feel what is happening to them.
- They may not react to being too cold or too hot because they are unaware of temperature.

Proprioceptive System

The proprioceptive system is our unconscious awareness of muscles and joint positions that constantly send information to the brain to tell us our body position and posture.

Dysfunction in proprioception results in:

- Slower body movements.
- Clumsier movements.
- Movements involve more effort.
- Difficulty grading muscle force—muscle exertion is either too much or not enough when manipulating objects or performing activities.
- Difficulty feeling the weight of objects
- Difficulty planning body movements while performing gross or fine motor activities (getting on or off a riding toy, buttoning clothes, turning on a faucet, etc.)

Vestibular System

The vestibular system responds to the position of the head in relation to gravity and accelerating or decelerating movement, and linear or rotary movement. Vestibular receptors are the most sensitive of all sense organs and are major organizers of sensations to all other sensory channels.

The location of the vestibular system is in the inner ear called the “labyrinth.” Abnormalities of the ears and hearing loss are common features in many syndromes, the influence of this system plays a major role in the developmental milestones of sensory processing and gross and fine motor skills.

Influence of vestibular system on eye and neck muscles:

- Ability to visually follow objects.
- Ability to move eyes from one spot to another.
- Ability to interpret—is it an object, our head, or our whole body that is moving?
- Ability to interpret—is our head moving or tilted?
- Ability to maintain a stable visual field.

Influence of vestibular system on muscles of the body:

- Generates muscle tone.

- Helps us to move smoothly, accurately, and with proper timing.

Influence of vestibular system on postural and equilibrium responses:

- Maintains balance.
- Controls spontaneous body adjustments.
- Facilitates co-contraction of muscles.
- Elicits protective extension and other balance reactions.

Other areas influenced by the vestibular system:

- **Reticular Interactions** – responsible for arousal of nervous system (calming effects vs. arousal effects); the vestibular system keeps the levels of arousal balanced.
- **Relation to Space** – perception of space; position and orientation within that space.
- **Auditory Processes** – helps the brain process what is being heard; vestibular disorders slow down speech development.
- **Emotional Development / Behavior** – for emotions to be balanced the limbic system, which generates emotionally based behavior, must receive well modulated input from the vestibular system.

Two types of vestibular disorders

Under-reactive vestibular system:

- Child may tolerate an enormous amount of movement (merry-go-round, swinging, spinning) without getting dizzy or nauseous.
- Has poor integration of the two sides of the body.
- Is easily confused by directions or instructions.
- Hands and feet do not work well together. Poor bilateral coordination and upper/lower body coordination.

Over-reactive vestibular system:

Child is hypersensitive to vestibular input resulting in:

- **Gravitational insecurity** – a feeling of anxiety or stress when assuming a new position, or when someone else tries to control movement or body position; swings, merry-go-rounds, and other playthings that move the body in non-ordinary ways may feel terrifying.

- **Intolerance to movement** – discomfort during rapid movement; the child is not necessarily threatened by movement, but it causes uncomfortable, or possibly nauseous feelings.

Evaluation and Intervention

If there is suspicion that a child has dysfunction with sensory motor processing, an evaluation can be conducted by either an occupational therapist or physical therapist. Evaluation consists of both standardized testing and structured observations of responses to sensory stimulation, posture, balance, coordination, and eye movements. The therapist who conducts the testing may also informally observe spontaneous play, and may ask the parents to provide information about their child's development and typical behavior patterns. A report will follow the evaluation that provides test results and interpretation of what the results indicate. The therapist will then make recommendations regarding the appropriateness of therapy using a sensory integrative approach.

Providing intervention based on the principles of sensory integration theory requires that the therapist be able to combine a working knowledge of sensory integration theory with an intuitive ability to gain a child's trust and create the "just right" challenge. Therapy will involve activities that provide vestibular, proprioceptive, and tactile stimulation, and are designed to meet a child's specific needs for development.

Activities will also be designed to gradually increase the demands upon a child to make an organized, more mature response. Emphasis is placed on automatic sensory processes in the course of a goal-directed activity, rather than instruction on how to respond. Parent or teacher involvement is crucial to the success of a child's development and improved sensory processing. The therapist may make suggestions to the parent and teacher about how to help a child in the home and school environment.

Sensory Integration and Sensory Motor Activities

Tactile Play Activities

Try the following ideas for tactile stimulation. If your child or student will not touch materials with their hands and fingers, don't push. Try letting them touch with a spoon or fork or straw, or try wearing dish or other gloves to get started. Keep soft cloths and water ready for clean up. Provide wash cloths for frequent hand wiping as needed. If touching bath foam or finger paint is

too stressful, put a small amount into a zip lock bag and hold and squeeze the bag. Begin play with dry textures if wet, messy materials are too stressful.

- Try **water play** outside of demanding situations such as bathing and tooth-brushing. Use various textures of washcloths, sponges, water toys, squirters, water guns. Water plants with a spray bottle. Clean and wipe tables or floors with sponges and a bucket of water. Play with cool and warm temperatures. Help wash dishes in warm water and rinse in cool.
- Fill large **storage bins with dry beans or rice**, encourage play in the bin with hands and feet. Hide small toys for searching, use cups and coffee cans for pouring, stir with large spoons, play with funnels and other kitchen toys. Pour beans or other textured material outside on the sidewalk and try to walk across.
- Use lotion for **firm touch massage**. Teach self massage. Remember that firm, deep touch is calming and organizing.
- Consult an OT or PT familiar with **skin brushing and joint compressions**. This is a technique recommended to help reduce tactile defensiveness with frequent, structured tactile and proprioceptive input.
- **Art** activities: finger paint, modeling clay, glue and glitter, glue and sand. Make art with pasta and glue or string and glue. Glue designs on paper.
- Create **feely boxes** or bags with a variety of textured materials and various textured toys. Fill with fabric swatches to discriminate, label or match. Fill with items to identify and describe, like wooden puzzle shapes, beads, etc.
- For **hand fidgets**, keep a fanny pack available with a variety of textured items inside. For squeezing try stress balls, thera-band, thera-tube, and stretch toys. Use noisy squeeze toys for play.
- **Cooking** activities – mixing and stirring cookie dough, pushing cookie dough into cookie cutters. Measuring and pouring ingredients. Make pudding and jello. Sift flour.
- Carefully introduce **various textures** for exploration and play. Place materials on a cooking sheet or plastic placemat – shaving cream, bath

- **Play dough** – use rolling pin, cut dough with safe/dull scissors, practice cutting with knife and fork, use cookie cutters and molds, hide items to search for (coins, marbles, pebbles, or small toys).
- **Sand play** – use cookie sheet, cover table with plastic, or play outside. Use clean dry sand and a spray bottle with water for added moisture. Play with cookie cutters or toys, such as plastic dinosaurs or cars. Write in sand, or build shapes or a sand castle.
- **Fabric** and texture play – use carpet squares for walking on; space out squares to find with toes. Use swatches of various types of fabric (corduroy, satin, velvet, fake fur). Play and walk on egg crate foam; also use foam to roll up inside “taco or hot dog game”
- Trace raised lines of **tactile maps**.
- Any pushing through the hands will help. Such as on the tummy over a yoga ball holding body weight through arms and hands. This “**prone weight bearing**” is very helpful for tactile tolerance, general strength, postural control, and proprioceptive/vestibular input.
- **Theraputty** is a resistive exercise material used by therapists. Colors vary according to resistive strength. Hide toys, coins, or buttons inside for tactile searching. Keep in a sealed container and be careful not to get on clothes or carpet. (It will stain and stick!)
- Try **vibration** with massagers or vibrating mats or toys, squiggly pens, or electric toothbrushes.

Proprioceptive Play Activities:

- **Move** as much as possible! Jump on a trampoline or a mini-tramp. Bounce on yoga balls. Outside play on all kinds of equipment for supervised climbing and up and down a slide.
- **Prone weight bearing** – such as four-point crawling or on the stomach over a therapy ball holding weight through arms and upper body. If strong enough, try “wheel barrel walking.” (Prone weight bearing is very important for postural strength, upper body and arm/hand strengthening, and reflex inhibition).

- **Scooter board activities:** for small size scooter boards sit cross-legged and propel with hands. Ideally have long size scooter boards available for riding on the tummy to propel with arms. Add wrist weights for increased proprioceptive and pressure sensation. Try all directions, forward backward turning full circles left to right. Push off from a wall to propel backward. Crash into cardboard brick walls or stacked boxes. Ride scooter board down a ramp to crash into toy bowling pins or crash into a large pillow. Ride a scooter board short distances to search for and pick up toys or bean bags and return. Try prone on a scooter board with a large rope to pull forward for hand over hand reach.
- **Add weights** to items for more feedback. For example add weight to a cane or pre-cane to help keep it in the correct position and to provide greater pressure feedback. Small size wrist and ankle weights are available – these can be worn for extra proprioceptive feedback and can also be added to other items. Ask OT/PT if a weighted vest might be helpful. Weighted blankets are available or try heavy quilts. Neck and shoulder wraps are available in drug stores sometimes designed to go in the microwave for heat – these can be used without heating around the neck or held in the lap. Weighted sweatshirts can be made easily by sewing seams shut after filling with dry beans or rice or sand. Wear loosely over the shoulder and back or on the lap.
- **Hang from a trapeze bar** or chin up bar – if this is too scary have a step stool to stand on and feel the pull through the arms and hands without having to support full weight.
- Teach simple **isometric exercises** such as wall push-ups and chair push-ups. Teach modified push-ups and sit-ups.
- Practice **pouring** over the sink or outside from heavy containers – gallon and ½ gallon jugs. Practice pouring with pitchers filled with sand or other dry materials.
- Use **squeeze** horns such as a bike horn. Have a variety of stress balls—there are many different types and interesting toys for squeezing. Wring water from sponges and cloths. Squeeze bottle glue and squeeze bottle puff paints for art. Use spray bottles to water plants or keep spray bottles at sinks or in tubs for play.

- “**Zoomball game**” is a toy with a plastic ball strung on two ropes. The ropes have handles on both ends and the object is to pull arms apart quickly to send the ball to your partner. Arms are spread quickly and closed quickly for a successful pass.
- Try using **tools** with supervision – hammer, screwdriver, pliers, or sanding wood. Use dull/safe scissors to cut heavy paper or cardstock.
- Pull with a partner for **tug-o-war** games. Pull a friend in a wagon or push/pull a laundry cart.
- Roll in foam pad or quilt for **deep pressure games**—“the hot dog”, the “burrito”, or the “enchilada.” Use rhythmical touch with hands or roll over with a therapy ball. Try weighted balls such as a medicine ball (weighted PE ball).
- **Climb and lie under large pillows**, bean bags, mattresses, or cushions. If other students are available have them try to crawl across and then take turns being underneath.
- **Throw** balls against a wall. Throw to the left and right sides, forward and backward and overhead.
- Vestibular Play Activities:
- **Sit and bounce on yoga balls.** Try prone (on the tummy positions) and supine (lying on the back). Give support to lie back and stretch the back and hang the head backward.
- **Stationary bike and treadmill exercise.** Ride tandem bikes. Help a younger child ride tricycles and bikes with training wheels for left/right integration and reciprocal control.
- Ride stand up **scooters** (with handle bars) and support. Roller skate with hand hold support or put a large belt around the body to hold on to.
- **Bouncy shoes** or “moon shoes”—these are large toy shoes that fit over regular shoes to bounce, jump, and walk with.
- Try as many types of **swings** as possible—standard playground swings, platform swings, bolster swings, pogo swings (a bouncy and rotational swing) and hammock swings.
- Use **rocker boards and spin boards.** Both are low to the ground and the rocker board can be used in sitting or standing with support. Try

- Try a **T-stool**. Try to keep balance while throwing a ball against the wall.
- **Rolling** games or races; rolling down or up hills outside. (Rolling is terrific for tactile, proprioceptive, & vestibular input and reflex inhibition).
- Practice **balancing on one foot**. Hop with feet together and hop on one foot. Jump one foot to the other. Practice marching, running, or stomping in place.
- Try very low **balance beams** or tandem walking in a straight line (heel toe, heel toe). Use hand hold support, hold onto a hula hoop, or dowel – add a bean bag to balance on the head for greater challenge. Place a ladder on the floor and try to step across separate rungs.
- Use an **inner tube** to step or hop inside and walk around the edges for balance.
- Balance in **tall kneel** position or half kneel. Toss a ball against the wall while holding balance or keep a bean bag on the head.
- For smaller feet, **place feet in shoe boxes** to slide along the floor. Try walking with swim fins.
- **Directional movement practice** – use a heavy wooden chair for sit/stand commands, in front/behind move to the left/right sides, circle the chair, three steps forward/backward from chair. Add music, slow and fast movements. Combine with Simon Says and Red Light Green Light games. Practice directional controls for facing the front of the room, the back, & either wall. Practice facing north, south, east, and west. Try quick change games for moving from sitting to standing to four point to stand on one foot, etc. Practice turning toward sound.
- **Parachute** games for up/down arm movements and shaking. If a group is available try having kids crawl under to the other side. Add a light weight ball and bounce the parachute to toss the ball over the side.

Heavy Work Activities:

Heavy work tasks are any activities that require whole body movement and resistance such as carrying heavy objects or carrying large size boxes;

pushing through heavy doors; pushing a grocery or work cart; pushing a laundry basket; pulling a friend in a wagon; helping to move furniture; vacuuming—any activity that requires resistance with movement.

Heavy work activities are thought to provide the longest sensory effect with combined benefits of proprioceptive and vestibular stimulation (heavy work routines potentially have a calming effect on the nervous system for 4-6 hours).

Employment ReFocus Remains Our Focus

by Barbara J. Madrigal, Assistant Commissioner, Division for Blind Services

Abstract: this article discusses programmatic continuity between services for young consumers and successful employment outcomes for adult consumers

Key Words: blind, visually impaired, employment, Blind Children’s Program, Transition Program, Vocational Rehabilitation (VR) Program, Division for Blind Services (DBS)

A successful outcome for an adult consumer in the Division for Blind Services Vocational Rehabilitation (VR) Program is generally defined in terms of matching each consumer’s individual skills and abilities with an employer’s need for those same skills and abilities. A successful match between a business need and a consumer who can meet that need results in a well-placed employee who can look forward to a long-term, satisfying career.

But how does that interaction happen and what does the process mean for young consumers in the Blind Children’s Program or young adults in the Transition Program?

All of these issues are being addressed as part of our current Employment ReFocus efforts. As we move forward with the development of an improved service delivery system that better meets the needs of our dual customers—the VR consumer and the business that is looking for a competent, qualified employee—we are also placing a renewed emphasis on creating a strong foundation for even our youngest consumers that will facilitate and strengthen the acquisition of workplace skills as they grow into adults.

The specialists in our Blind Children's Program and the counselors in our Transition Program are integral partners in our Employment ReFocus efforts. They continually look for ways to incorporate the development of skills that are directly related to the qualities an employer looks for in a good employee into the scope of services for our children and youth.

Skills development begins at a very early age by working with parents to ensure they have the same high expectations for their child who is blind or visually impaired that they have for the child's sighted siblings. Parents who have high expectations for their child encourage the development of new skills and, as the child acquires new skills, his or her achievements generate increased self-confidence.

To reinforce parental expectations, we structure our services to encourage our children and youth to be curious about their world and to take advantage of opportunities to grow and learn. We also stress independent living skills so our consumers acquire the confidence they need to explore new opportunities, identify and develop their personal interests, and benefit fully from their academic endeavors.

Group skills training in the form of workshops for children and interactive seminars for youth is an excellent example. Group activities allow young consumers the opportunity to practice existing skills while challenging them to explore new skills. And, as every parent of an inquisitive child or young teenager knows, the camaraderie of a group of their peers frequently acts as an extra incentive to try something new or different.

As the child matures, increased emphasis is placed on employment-related interests and options. Each year, Transition counselors offer as many teenagers as possible an opportunity to explore the workplace through local summer programs such as "World of Work." These programs let youngsters explore vocational options by working at a paid position, gaining hands-on experience as a volunteer, or "shadowing" an established employee who serves as a mentor and role model while demonstrating the day-to-day job tasks associated with their chosen career.

Our goal is a seamless delivery system that ensures age-appropriate development of independent living and vocational skills, so that each child we serve is fully prepared to enter the work force as a competent adult with marketable skills and abilities.

If you would like additional information about the Division for Blind Services programs available to Texas children and youth who are blind or visually impaired, please contact the DBS office that serves your local area.

The Lone Star State Has Got It Going On

By William “Bill” Daugherty, Superintendent,
Texas School for the Blind and Visually Impaired

Abstract: Superintendent Daugherty describes his first year back in Texas.

Key Words: Texas School for the Blind and Visually Impaired, TSBVI, Superintendent Bill Daugherty, blindness, visual impairment, News & Views, Texas Focus

I have been back in Texas and TSBVI for over a year now after a 14 year stint in the Midwest, and much like Dorothy—or Ashley for fans of our school’s hit production of Oz—I know I’m not in Kansas anymore. It seems I’ve experienced more in the past months than I did in all my time up I-35 North. Much of this has to do with my adjustment to a new organization that is undergoing a lot of changes, but also to the extremely dynamic and diverse nature of our state’s many early intervention, K-12, higher education, and adult services shareholders in Blindness and Visual Impairment. Simply put, Texas has got it going on like no place else in the country, and I have to run hard to keep up.

Attendance at this past summer’s Texas Focus conference of over 300 parents and professionals would be more than Oklahoma, Kansas, Nebraska, Iowa, South Dakota and North Dakota combined. That’s the pasture from the Red River all the way to Manitoba. But it was the quality of the presentations as much as the size that was impressive. There were great opportunities to hear from out-of-state guests like Tanni Anthony and Barbara Miles—the two I was able to catch—and our homegrown leaders with so much knowledge to share that showcased how lucky we are and how hard we have worked to get our state to this state of excellence and promise. Walk out in the hotel lobby and advocates like Marty Murrell were organizing legislative efforts that benefit us all. Yes, the place was hopping.

As a returnee to Texas it is clearly visible that there is a solid and growing network of families, educators, consumers and service providers who are

meeting together with the goal of ensuring that visual impairments and blindness, and disability in general, not be barriers to the good life. I point out this observation as a one-time Texas itinerant TVI/COMS working in relative isolation in the late 70's and 80's, and as a person who has had the chance to visit many other states, as a reminder and encouragement to the many of you who have been or will be instrumental in the uncommon success our field enjoys here at home. Progress over the past 30 years has been remarkable, and a child with a visual impairment born today, or a professional just now entering the field, will have many opportunities that developed from the daydreams and discussions and efforts of past decades.

An educational and medical mission to Nigeria in March—my first real trip out of the USA—was a jolting reminder of how good we have it here and how important it is to protect and grow what has been built. With all that we have, there are still individuals with visual impairments and blindness who will be needlessly burdened by institutional and societal barriers, and many educators and service providers who will not enjoy the professional development and sense of community that comes through opportunities like the TAER and Texas Focus gatherings.

One of the primary keys to our common success is coming on strong and with increased clarity: families. No one and no group can advocate for the achievement of our common goals quite like parents can. Have the TSBVI Superintendent go before the legislature to push for this or that to improve our statewide situation, and there will be polite interest; have a parent tell their story and suddenly there is the type of empathy and connection that leads to results. I encourage all of us promote the power of parent partnerships as the Way to raise all boats.

To end on a personal note, it is so great to be home. The food, the music, the Hill Country, and just the style of the place is scratching an unconscious itch I've had for the past 14 years. People have been so kind and welcoming, including the legions of folks who have made it their personal mission to get me some company in the form of a dog. TSBVI is rebuilding its campus, developing many fine new initiatives, and improving on what is in place. Our state system as a whole is in its best shape ever, and I couldn't be more pleased to be working with all of you to move the agenda forward.

Special Needs Parent Toolkit

Excerpt from the Military Homefront Parent Toolkit Web Page

Abstract: a description of resource information for families with special needs children.

Key Words: blindness, special needs, resources, military, special education, Parent Toolkit

The DoD Special Needs Parent Toolkit has comprehensive information and tools that are geared towards helping military families and others with special needs children navigate the maze of medical and special education services, community support and benefits and entitlements. The Toolkit is broken down into six colorful modules that can be easily downloaded and printed. IT includes important facts, records, tools and sample letters.

Whether you need to learn about early intervention services or want to learn how to be a more effective advocate for your child, you will find the information you are searching for here!

http://www.militaryhomefront.dod.mil/portal/page/mhf/MHF/MHF_DETAIL_1?section_id=20.40.500.570.0.0.0.0.0&content_id=218947

Guidelines and Standards: a new resource for administrators and parents

By Cyral Miller, Director, Texas School for the Blind
and Visually Impaired Outreach

Abstract: A new document outlines current legal and state standards and national guidelines for quality VI educational programs.

Key words: Guidelines, Standards, VI programming, administrators, parents

The Texas Education of Blind and Visually Impaired Students' Advisory Committee, established in 2005, has developed a brand new resource, *Educating Students with Visual Impairments in Texas: Guidelines and Standards*, to help administrators and others understand both legal requirements and quality standards to meet the unique needs of students with visual impairments. There are comparatively few students with visual impairments in Texas. Although in the 2007-2008 school year, there were

more than 4.67 million students enrolled in Texas schools (retrieved on October 6, 2008 from <www.tea.state.tx.us/adhocrpt/adste08.html>), only 8,040 of them were registered as having visual impairments. These children are scattered across the state and range in age from infancy through age 22. In January 2008, half of the school districts enrolling students with visual impairments had fewer than four VI students in their entire district and nearly a quarter (24%) of these districts had only 1 student. (Data on VI student enrollment is from the 2008 Annual VI Registration, compiled by the Texas School for the Blind and Visually Impaired for the Texas Education Agency.) Administrators need information on how to help their students with visual impairment have access to the general curriculum as well as learn VI specific skills to become independent, productive citizens to the greatest degree possible.

This new resource provides a reference on components of a quality program, based upon current laws, rules and regulations in the state of Texas, divided into sections with explanatory text and citations for each component. The document is available free to download from the TSBVI website at <www.tsbvi.edu>, and is linked from the Texas Education Agency special education website as well. A primary goal is to “provide decision-makers with a set of guidelines and standards by which they can determine the quality of their programs serving students with visual impairments” (page 7, Purpose of this Document). In addition, this resource was designed to give parents and caregivers tools to help them advocate for appropriate services. The 12 Guidelines/Standards are listed below.

The Advisory Committee that created this resource includes VI professionals from local districts, local and regional special ed administrators, TEA IDEA coordination staff, consumers, parent organizations, TSBVI, DARS–Division of Blind Services representatives, university personnel, ESC VI consultants, DARS–Early Childhood Intervention staff and related groups such as the American Foundation of the Blind (AFB) and the Alliance of and for Visually Impaired Texans (AVIT). The committee will maintain this reference and update it on an annual basis. Please feel free to share a copy with others, and let us know if there is information that you feel needs to be added for the next edition. You can contact <cyralmiller@tsbvi.edu> with your suggestions.

List of Guideline/Standards:

1. Eligibility is determined by an individualized family service plan (IFSP) or an admission, review and dismissal (ARD) committee, based upon a medical report, functional vision evaluation and learning media assessment.
2. Vision professionals provide expertise specific to visual impairments prior to and during the full and individual evaluation.
3. Evaluations of all areas of the expanded core curriculum are used to determine individual student programs.
4. Appropriate instructional time, accommodations and modifications are provided to meet all identified areas in individual student programs.
5. Certified teachers of students with visual impairments perform required evaluations and instruction.
6. Certified orientation and mobility specialists perform required evaluations and instruction.
7. Written job descriptions identify comprehensive roles of paraprofessionals supporting instruction of students with visual impairments, including deafblindness.
8. Families are active members of the instructional team.
9. Vision professionals are members of the instructional team for all birth - two year old children with visual impairments and available for services 48 weeks a year.
10. An array of services and placement options are available based on individual student needs.
11. Times for specialized instruction by certified teachers of students with visual impairments and by certified orientation and mobility specialists are determined by appropriate evaluation in all areas of the core and expanded core curriculum for each student.
12. Written caseload guidelines are used to evaluate caseloads of vision professionals.

Assistive Technology: Device Reutilization Program

Reprinted with permission from Texas Parent to Parent
Newsletter (7)1, Spring 2008

Abstract: this article describes two programs, one that provides refurbished equipment to persons who demonstrate financial need and another that provides an “auction” site to match donors and sellers of assistive technology devices and services.

Key Words: blindness, assistive equipment, assistive technology, device reutilization, Project Mend, AT-Match

Project Mend

The first part of the new device reutilization program is a collaboration with Project Mend, Inc., an organization with a medical equipment reutilization program operating in San Antonio, Texas. Project Mend, Inc. provides refurbished equipment through long-term loans to persons with disabilities who can demonstrate financial need. The loan period is set for a period as long as the individual continues to need the equipment.

Items normally available include regular and quad canes, Hoyer lifts, regular and rolling walkers, shower chairs, trapeze bars, forearm crutches, scooters, transfer boards, bedside commodes, electric hospital beds, elevated toilet seats and manual and electric wheelchairs. All items are evaluated, sanitized, refurbished and repaired before being loaned and reutilized.

To contact Project Mend: 888-903-6363; 210-223-6363; Toll Free FAX 866-514-0876; FAX 866-514-0876; 1201 Austin Street, San Antonio, Texas 78208; Website: <<http://www.projectmend.org>>.

AT-Match Auction Site

The second part of the new device reutilization program will be an Internet “auction” site for reutilization of assistive technology devices. The Internet site, called ATMATCH.com, is an “auction” site that serves as a comprehensive Internet access point for obtaining assistive technology devices and services - a marketplace where donors and sellers can locate buyers for a wide range of assistive technology and durable medical products. The site provides users with links to regional and national resources in a variety of related fields. Users will find specific assistive

technology devices at reasonable prices, post equipment for sale and locate assistive technology resources in Texas and beyond. Assistive technology providers may advertise equipment at the “AT Store” link on the ATMATCH site. All of these activities will be possible from one Webpage.

AT-Match Web Site <www.atmatch.com>

K-NFB Reader: A Cell Phone for the Blind

Excerpt from KNFB Reader Website

Abstract: this article describes new cell phone that incorporates screen reading technology into a multifunction cell phone.

Key Words: blindness, visual impairment, National Federation for the Blind (NFB), cell phone, screen reader, character recognition technology

knfb Reading Technology, Inc. is pleased to announce the latest breakthrough in print accessibility. We have developed software which places the functionality of a reading machine into a multifunction cell phone. The Mobile Reader products can be activated and ready to use with the touch of a single button on the phone. The user takes a photo of the print to be read and the character recognition software in conjunction with high quality text-to-speech will read the contents of the document aloud. At the same time, it can display the print on the phone’s built-in screen and highlight each word as it is spoken.

The Mobile Reader Product Line:

- Reads most printed documents, from letters and memos to pages in a book
- Reads address labels and package information and instructions
- Easily recognizes U.S. currency
- Displays each sentence visually and highlights each word as it is read
- Stores thousands of pages using easily obtainable flash memory
- Transfers text files to and from computers or Braille note takers
- Adjusts reading speed to suit user’s preference.

In addition, with the use of a screen reader, the user can access the other functions of the phone device including making and receiving phone calls, personal information management such as contacts, calendar, etc. Also

contains ability to run accessible GPS programs, access to Adobe PDF files, voice recorder, music player and much more.

For more information about the K-NFB Mobile Reader and its specification, go to: <www.knfbreader.com/products-mobile.php>

What's So Special About "200"?

KC Dignan, Ph.D., Professional Preparation Coordinator,
Texas School for the Blind and Visually Impaired

Abstract: There is a significant need for new teachers of students with visual impairments and orientation and mobility specialists to work with students in public schools. This article encourages current professionals working in the field of visual impairment to consider the need and recruit others, especially current teachers, into the field.

Keywords: Visual impairment, blindness, personnel preparation, teacher training.

So, what's so special about "200"?

It is the number of VI professionals needed within the next 3 years, just to maintain current level of services. More will be needed to improve services for your child or caseload.

Who Are VI Professionals in Texas?

TSBVI has conducted a statewide annual needs assessment since 1996. This assessment surveys each education service center (ESC) about the VI professionals in the region and anticipated need. This descriptive data is used for numerous purposes when data about VI professionals is needed. These include grant applications, planning for the future, and responding to inquiries from various sources.

In October 2007, Texas had 857 full- and part-time VI professionals to serve the 7,967 students identified in the 2007 Annual Registration of Students with Visual Impairments

Texas employs 72 people who function as dually certified VI professionals, providing both O&M and VI teacher services. Many more people hold both certificates, but only those who provide both services are counted in this survey. Dually certified professionals can provide a district with greater

flexibility, although additional administrative and service delivery challenges also exist.

Direct Service Providers

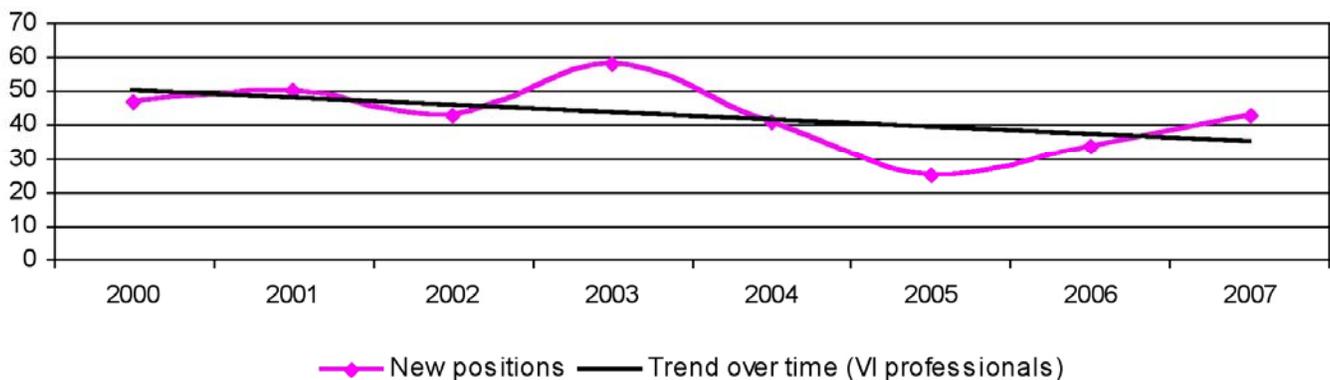
<i>VI Teachers</i>		<i>O&M Specialists</i>	
Individuals		Individuals	
Full-time	476	Full-time	111
Part-time	<u>147</u>	Part-time	<u>104</u>
Total VI Staff	623	Total O&M Staff	215
VI Teachers FTE*	549.5	O&M Specialist FTE*	163

*FTE = Full-Time Equivalent. FTE totals represent part-time x .5 + full-time. (Numbers include 72 dually certified VI professionals)

New Positions, Attrition, And Projected Attrition

Each year the number of students with visual impairments increases by 3% (on average). Sometimes a student may be added to an existing caseload without much of a change in services for the rest of the students. However there comes a point when any additional students affect the quality of services for all students. As a result, we are in constant need for new VI professionals.

New Positions for VI Professionals



In 2007, Texas added 43 new positions, a significant increase from 2005 when only 25 new positions were added. The chart above shows the trend for new VI professionals since the data has been collected. During that same time, the number of students with visual impairments jumped from

6,002 to 7,967, or about 33%. The number of VI professionals increased by 4.8% during that same time period.

A possible factor for the lack of advocacy for and filling of new positions is the administrators' confidence that the position can be filled. In 3 separate surveys over a 9 year period, administrators have told us that their willingness to advocate for a new or additional VI position is directly related to their confidence they can fill the position.

You can help administrators, and your students by being an active recruiter. Each year VI professionals leave this field, either for other jobs or retirement. Much has been written about the increasing trend for educators to retire. The annual needs assessment collects data about attrition within the last year and projected attrition over the next 3 years. In 2007 the data showed a marked increase in both areas: attrition and projected attrition.

Actual and projected attrition

Attrition within past year		Projected attrition within next 3 years	
VI Teacher	33	VI Teacher	87
O&M Specialist	6	O&M Specialist	13
Dual Certified	1	Dual Certified	13
<u>Total</u>	40	<u>Total</u>	113

Of concern is reflecting on the actual versus the projected 3-year attrition. This data has been gathered since 2000. A review of the actual versus the projected shows that, on average, the VI consultants at the ESC under-project by 21%. So in fact we may need closer to 137 VI professionals.

In addition, we will also need 80 full-time-equivalent (FTE) VI professionals to serve the anticipated annual increase of 3%. If allowing for part-time professionals, we will need even more. Combined, we will need 193 VI professionals just to maintain current services.

In the meantime, we are consistently hearing anecdotal reports of increased caseloads and significant difficulties in meeting students' needs. We also hear services for many caseloads are far from ideal, and that administrators have difficulty hiring new or additional VI professionals.

By becoming a more effective and active recruiter, *you* can make a difference for students beyond your caseload—beyond your child.

Identified need for VI professionals

The VI consultants also identify a need for VI professionals in the shorter (12-24 months) and longer range (24-36 months). When asked about projected need, they consider factors such as growth within the region and projected attrition.

Need for VI professionals within:

	12-24 months		24-36 months
VI Teacher	68	VI Teacher	133
O&M Specialist	23	O&M Specialist	40
<u>Dual Certified</u>	<u>18</u>	<u>Dual Certified</u>	<u>26</u>
Total	109	Total	199

How can I use this information?

Each of us who are concerned about students with visual impairments are recruiters. However, knowing who to talk to and what to say can be a challenge.

Research done in 2003 has given us hints on likely targets and effective messages to share with them.

Likely VI professionals

According to the research, the most likely future VI professionals include the following individuals who have had contact with a child or adult with a visual impairment:

- Special education teachers
- General education teachers
- People involved in disability-related work, such as O.T.s, social workers and others
- Parents and other caretakers, including paraprofessionals.

Think about those people who have asked you questions, who have challenged you to provide better services. This may include the science teacher who asks about teaching the circulatory system or wonders how to translate images seen under a microscope. Or the paraprofessional who provides exemplary services, acting as a bridge to independence, not a barrier or personal servant. It may also include the P.E. teacher who is

concerned about teaching and using spatial or environmental concepts effectively. These people may be future VI teachers or O&M specialists.

What to say to my candidates

Knowing what to say is just as important as knowing to whom to say it. Research shows us that there are 4 areas that current VI professionals identify as important. Each of these areas is followed by sample ways to incorporate the concept into everyday conversation.

Working in a non-traditional job and/or with non-traditional students

- “When I was a reading teacher, I had to focus on the curriculum; now the needs of each of students are my focus.”
- “Because I work with my students one at a time, during our O&M lessons I get to function as a life-coach for my students.”

Making a difference

- “When I was teaching 135 students at the middle school, I began to feel like I was ‘renting’ the students for 50 minutes; now I get to focus on each of my 14 students, and really get to know them.”
- “I know that I will be working with a child for years, and that what I do will really shape that child’s life.”

Stimulating, challenging

- “When I was a science teacher, I knew exactly what I would be teaching during the 2nd week of each November. It was getting monotonous. Now each week and each year is different. I love it.”
- “A change of even two students can change my whole caseload. It’s great! I never get tired of what I do.”

Leadership

- “When I was in the classroom I felt like I was one of many, that there was nothing special about me as a professional. Now parents and administrators look to me for advice and leadership.”
- “I wanted more. I was considering getting my mid-management certification, but didn’t really want the headaches of managing a building. Now, I get to model my leadership skills to my students, and help them become the leaders of their own lives.”

These sample phrases can help you think about what to say when you next meet a future VI professional.

The next step...

Making a mid-career change is a big deal. Don't worry if it takes your candidate a year to make the change. That is typical. You can shorten the time, and make sure they don't lose interest by volunteering to be an "application buddy." An "application buddy" helps the candidate to find his or her way through the application process, which can be complicated. In education in general, 50 – 75% of interested applicants drop out at this stage. Don't let it happen to your candidate. Just volunteer to meet with them at the coffee shop for a coffee and cookie while you complete the applications together.

More information and help is available

Contact KC Dignan, PhD. for more information about:

- effective recruiting techniques;
- tools to assist you as a recruiter;
- training programs for VI professionals, including costs and timelines;
- general information about being a VI professional; and
- being recognized as a recruiter in Texas through our Texas Fellows program

You can reach KC at <kcd@TSBVI.edu>, or 512-206-9156. Information is also available on our website: <www.TSBVI.edu/pds/index.htm>.

Website Review: Guided Tour of the Body

By Beth Dennis, Children's Consultant, DBS

With everything you wanted to know about your health, this website is pretty cool! It has sections on the brain, heart, skin, muscles, bones, feet, waist, joints, back, ears, eyes, and more! The section on the eyes includes vision loss simulators. There are interactive games and quizzes! Really, it's pretty cool (did I already say that?). Check it out:

<www.nytimes.com/interactive/2008/05/13/health/20080513_WELLGUIDE.html>.

TEXAS FELLOWS Announces Changes to the Program!

By KC Dignan, TSBVI Outreach

TEXAS FELLOWS is a program that recognizes and applauds those who have been instrumental in helping someone to become a VI professional: either certified as an O&M specialist or to teach students with visual impairments. A TEXAS FELLOW can be a parent, teacher, rehabilitation specialist or another VI professional.

People are eligible to become recognized as a TEXAS FELLOW if their candidate started their first VI-related training program after May 15, 2008.

It is easy to join the TEXAS FELLOWS. Just complete the application form you receive by calling KC Dignan at 512-206-9156, emailing <kcd@TSBVI.edu>, or by downloading an application from our website <www.tsbvi.edu/pds/index.htm>.

TEXAS FELLOW and their candidate each receive the following benefits:

- special recognition at all statewide functions sponsored by TSBVI;
- recognition for 1 year in *TX SenseAbilities*; and
- a \$50 Gift Certificate redeemable at the TSBVI Curriculum/Publications site. <www.tsbvi.edu/publications/index.htm>

Texas School for the Blind & Visually Impaired Outreach Program
Honors **Texas Fellows**
Recognizing VI Professionals in their Role as Recruiters

Texas Fellow	Candidate
Mary Beth Bossart	Kristin Preston
Judith Nugent	Jennifer Orenic
Debbie Louder	Pam Yarbrough
Dalia Reyes	Rachel Sepulveda
Peggy Burson	Heather Dyer
Mary (TeCe) Stark	Vanessa Perkins
Elizabeth White	Linda Washburn
Terry Gaines	Cindy Harber
Terry Gaines	Monica Campbell
Diane Sheline	Monica Johnson
Brenda Jackson	Lisa Gray
Anita Pineda	Alma Soliz
Susan Butler	Julie Moyer
RosaLinda Mendez	Carolyn Metzger
Brenda Snow	Alice McCollum

Bring a Fella' to the Dance -
Recruit a VI Professional

Together we can
open new lives

For more information about becoming a Texas Fellow or working as a VI professional contact KC Dignan at kcd@tsbvi.edu

Bulletin Board

Announcements / Regional, State, and National Training and Events

Mail or email your item for the Bulletin Board to Beth Bible:
TSBVI Outreach, 1100 W. 45th Street, Austin, TX 78756 or
<bethbible@tsbvi.edu>

An up-to-date Statewide Staff Development Calendar is posted at
<<http://www.tsbvi.edu/Outreach/vi.htm>>



2009 Texas Symposium on Deafblindness

**Purpose, Satisfaction, and Joy in the Lives of Students
with Deafblindness and the People Who Care**

February 13-14, 2009

Austin DoubleTree, Austin, TX

This event will feature multiple speakers and topics on a broad range of issues important to students with deafblindness, including those with additional disabilities.

Pending approval continuing education credit will be offered for Teachers of the Visually Impaired, Paraprofessionals, Foster Parents, Sign Language Interpreters (BEI), Physical Therapists, Physical Therapist Assistants, ECI, Occupational Therapists, Speech Therapists, and Audiologists. ACVREP certificates (CLVT, COMS, RTC) will also be offered.

Early Registration Fees: Family Members – \$175; Professionals – \$175; Intervener/Paraprofessional – Free; Out-of-State Participants – \$225. Early registration will continue until 12-18-08. Registrations will be accepted until January 19, 2009 for an additional \$50 fee.

Register early and save!

Early Registration Deadline December 18, 2008

All registration ends January 19, 2009!

The Texas Deafblind Project presents

The 2009 Texas Symposium on Deafblindness

Some of our featured topics include: Encouraging Effective Interactions; Families Working with Medical Professionals; Technology that Brings Joy, Purpose, and Satisfaction; Deafblind Teens and the American Association of Deaf-Blind; Orientation and Mobility Issues and Strategies for Students with Deafblindness; Access to the General Education Curriculum; Using Video to Support Transition Planning; Using Drawing with Deafblind Students; Interveners in the Classroom; and Customized Employment

Hotel Accommodations: This year's Symposium will be held at the DoubleTree Austin Hotel located on IH-35 North between Hwy 290 and St. John's near Highland Mall. For reservations call: 1-800-222-TREE and use the code DBS

Texas School for the Blind & Visually Impaired has a block of rooms for the following nightly sleeping room rates: \$85.00 per night for single occupancy, \$135.00 per night for double occupancy, \$155.00 per night for triple occupancy; and \$175.00 per night for quadruple occupancy. Rooms are available at this rate until the room block is reached or January 22, 2009 which ever comes first. Make your reservations now!

Limited registration and/or assistance with travel and child-care costs may be available for families attending this year's symposium. Please find out what travel assistance your DARS–Division for Blind Services caseworker can provide before requesting assistance from TSBVI Outreach. An outreach staff member will contact you to discuss what assistance we will be able to provide.

For more information, contact:

Brian Sobeck

Texas Deafblind Project

Texas School for the Blind and Visually Impaired

1100 West 45th Street

Austin, Texas 78756-3494

Phone: (512) 206-9225

FAX: (512) 206-9320

Registration materials are online at: www.tsbvi.edu

The Game of Life Ready for Life After High School?

This by-invitation-only training is for students ages 14-22, their parents, and VI staff. Participants will attend two face-to-face workshops at the AFB Center for Low Vision in Dallas as well as distance learning training activities. A series of “reality challenges” will focus on career skills, daily living skills, and skills needed to apply for and attend college. Once committed, the student and a parent are required to attend all live and distance networking meetings.

There are limited number of slots available. Open to applicants from Texas ESC Regions 7, 8, 9, 10, and 11

Prerequisite Skills

- College or vocationally bound
- 14 years old or older
- Student must fill out the application and get a parent signature.

Challenge Agenda

- January 17-18: Orientation/Tour/Training
- February 4: distance networking, updates on the challenges and sharing
- April 1: distance networking, updates on the challenges and sharing
- May 16: final meeting, End of Game celebration, wrap up and future planning

Location of the first and last meetings will be
AFB Center On Vision Loss-Dallas
11030 Ables Lane Dallas, TX 75229 - Tel: (469) 522-1803

Sponsored by The American Foundation for the Blind and Texas School for
the Blind and Visually Impaired.

Travel costs will be covered by
the Texas School for the Blind and Visually Impaired.

Contact Carrie Keith at 512-206-9314 or
<carriekeith@tsbvi.edu> with questions.

Literacy and the Student with Deafblindness - TETN #30913

Holly Cooper, Deafblind Consultant, Deafblind Outreach

March 4, 2009 1:30-3:30 PM

All students with deafblindness should have a meaningful literacy medium whether it is Braille, pictures, print or even objects. This broadcast will explore the range of literacy media for various levels of learners and discuss instructional strategies that can be considered for the student with deafblindness.

Please contact the Distance Learning Consultant at your local education service center to access this broadcast.

Hands-on Learning Stations for Teaching Math to Visually Impaired Students

Susan Osterhaus and Other TSBVI Outreach Staff

Texas School for the Blind & Visually Impaired, Conference Ctr, Austin, TX

February 27, 2009 9:00 AM-4:30 PM

Credit: ACVREP 6, CPE 6 / Registration Fee: \$50

In this workshop participants will learn to identify and use a variety of adaptive math tools and technology, which will allow their students with visual impairments to draw, construct, measure, and graph independently. They will also learn to identify and perform basic functions on an accessible scientific calculator, an accessible graphing calculator, and other math technology software and hardware.

In this "hands-on" workshop, participants will rotate through learning stations and have ample opportunities to ask questions and practice using the tools and strategies that are shared. This is ideal for a TVI and math teacher to attend as a team. For more information, please contact Carrie Keith at 512-206-9314 or CarrieKeith@tsbvi.edu.

TAER 2009 / Piecing the Puzzle Together

March 25-28, 2008 Sheraton Gunter Hotel, San Antonio, TX

Keynote Speaker: Bill Daugherty, Superintendent,
Texas School for the Blind and Visually Impaired

Registration materials available at: <http://www.txaer.org/Conferences.htm>

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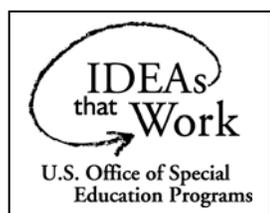
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