Cover photo description: The photo shows a grandfather (left) and grandson (right), both with visual impairments, simultaneously using their Closed Circuit TVs (CCTVs) to complete the grandson’s homework. This image was selected for our cover because it illustrates the power of family support and having a mentor who operates in the same manner as you.

Photo credit: The cover photo was submitted by Beth Jones.
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Beth A. Jones, Ph.D.
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It is my sincere honor to serve as guest editor for this special issue focused on disseminating practical information for parents and families. In my professional life, I serve as a Professor of Special Education at Texas A&M University-Commerce, where I coordinate our graduate program. I also happen to be an individual with a visual impairment and for whom visual impairment is a family
affair. We have a condition called hereditary optic nerve atrophy in my family, with my dad and two children being affected as well. In fact, I selected the image on the cover of this issue because it is a great representation of what goes on in my family. It depicts my dad working alongside my son, both using their CCTV’s to read. This image is dear to me because it illustrates how my dad is taking a prominent role in mentoring my son. This is vitally important because everyone needs contact with someone that learns and operates in the same manner as they do.

It has been the marriage of my professional and personal life that has proved immensely rewarding. As a Past-President of the Texas Association for rents of Children with Visual Impairments (TAPVI), a current member of the Board of Trustees at the Texas School for the Blind and Visually Impaired (TSBVI), and board member of the Division for Visual Impairment and Deafblindness within the Council for Exceptional Children, I feel I am finding my purpose and avenue for significant contribution. My real-life experiences inform my professional practice now more than ever, and, through those experiences, it is my sincere hope that I can help other parents.

As both a parent and special educator, I sought to ensure that this issue would deliver information which parents and families might not be aware of, as well as offer helpful, actionable tips. Therefore, in this issue you will find a myriad
of articles, authored by an all-star cast, which I feel get to the heart of major issues parents and families face when navigating life with a child with a visual impairment or deafblindness. Included articles also give ideas for educators to facilitate collaboration with parents and families.

This issue kicks off with a focus on the prerequisite relationships that must be in place in order for learning to take place. It is written by Emily Coleman, Superintendent of TSBVI and parent, and emphasizes the importance of building trust before teaching can occur. This piece also exemplifies a mother’s need to connect with her child and the cautions we should exercise with assessments and proclamations of intelligence and ability levels. After establishing the importance of connecting, we can then focus on specific strategies; the next four pieces in this issue are devoted to sharing tools for parents and families to utilize with their children. The first article providing tips for parents, one in which I authored, is intended to give global tips for parents and families, including information relevant to service provision, assessment, and special education processes. Christopher Tabb, a Certified Orientation and Mobility Specialist from TSBVI, authors the next piece which provides practical ideas for fostering independence. The next article, authored by Dr. Belinda Rudinger, President of the Texas Association for the Education and Rehabilitation of the Blind and Visually Impaired (TAER) and certified Teacher of Students with Visual Impairments, shares tips for braille
literacy. The last article directed at providing tools for parents was selected because it addresses a topic which can be easily overlooked by families—the mental health of their children with visual impairments. It is contributed by Dr. DeMarquis Hayes, a Licensed School Psychologist and Assistant Dean at Texas A&M University-Commerce. Rounding out our issue, is a piece by Dr. Kathleen Farrand which provides educators with tools for working with families.

It is my sincere hope that you find these works informative and take away concrete ideas for implementation. Happy reading and learning!
DVIDB and APH Proudly Present

CEC Virtual Pre Conference
Tuesday, Jan. 11, 2022

9:00 AM - 12:00 PM
Functional Vision/Learning Media Assessments for ALL
(Use and alignment of the APH FVLMA, NewT and Decision-Making Guide)
with
Jeff Schwartz - APH Outreach Specialist
Southeast Region

1:00 PM - 4:00 PM
Intervention Strategies for Young Children with Cerebral/Cortical Visual Impairment (CVI)
with
Amanda Hall Lueck, Ph.D. Andrea Montaño
Elizabeth S. Hartmann, Ph.D. Kitty Edstrand
Deborah Chen, Ph.D.

6.0 ACVREP hours available Free to CEC members $60 for non CEC members

Register at this link: https://www.eventbrite.com/e/dvidb-council-for-exceptional-children-preconference-event-registration-193610623587
**Functional Vision/Learning Media Assessments for ALL**

In this presentation, Jeff will discuss the foundation of the FVLMA and how this essential assessment tool can drive quality instruction for students who are blind or low vision. Jeff will continue to explore our “tools of the trade” available from APH and how this can drive uniformity of practice in our field. Jeff will explore and offer his own “tips and tricks” to implementation of these tools to make them work for you and your students.

Session Powered by APH

Additional Support from Allied Instructional Services

**Intervention Strategies for Young Children with Cerebral/Cortical Visual Impairment (CVI)**

Cerebral/cortical visual impairments (CVI) are caused by neurological damage and are the most prevalent visual condition of children with severe visual impairment in the United States. This interactive session will inform researchers and practitioners about how CVI may influence a young child’s use of vision, development of skills, and interactions with the environment. Interventions across developmental domains that are embedded within routines to promote functional vision use and early development will be detailed through videos, discussion, handouts, and presentation of implementation research at one early childhood program.
Fall is always a fun and busy time in education. This year is even more exciting as many children are settling back into the in-person school routine for the first time in several months. The change in routine has been challenging for our students with visual impairments and trying to close the gap that was created throughout the pandemic. School and family partnerships are more critical than
ever to help students succeed. We are pleased to have Dr. Beth Jones guest edit this special issue on Parents and Families of Children with Visual Impairments. As educators of students with visual impairments, we strive to ensure our students have the same opportunities to learn and grow as their peers. Home and school collaboration is critical to ensure this is happening. Throughout this issue, I hope you find useful strategies that can cross between home and school.

I am happy to announce that the Council for Exceptional Children International Conference will be held in a hybrid model. We will be face to face in Orlando, Florida; January 16th-19th and the virtual portion will be held February 1st-4th. The Division on Visual Impairment and Deafblindness is working on putting together wonderful sessions both in person and virtually with various speakers from across the country. We hope you can attend one or both of the events! We are also holding a pre-conference day on March January 11th 2022 from 9:00 AM-4:00 PM which I hope you will attend. The preconvention will be free to DVIDB members and $60 to nonmembers. Preconvention will offer 6 ACVREP professional development hours. The morning will be on the Functional Vision/Learning Media Assessments and the afternoon portion will focus on Intervention Strategies for Young Children with Cerebral/Cortical Visual Impairments (CVI). I am so excited for this preconference day. Also, I would like to thank Dr. Amy Parker and her committee for the work on the Deafblind
competencies. This work was needed and deeply valued. In addition, I want to thank our executive board for all of your hard work and dedication to DVIDB. Please enjoy this special issue, and be sure to check our website for information on CEC 2022 convention and preconvention.
Information. Connection. Empowerment.

Information is Everywhere You Look and Everywhere You Listen.

When vision or hearing is affected, part of that information is missing. Promoting access to information connects us, it empowers us, and it promotes independence.

Promoting Access for People Who are Deaf, Hard of Hearing, Blind, or Visually Impaired is a free, self-paced, online training module. This module is designed to build confidence and comfort for anyone communicating or connecting with people who are deaf, hard of hearing, blind, or visually impaired and includes a collection of introductory information, evidence-based strategies, and scenarios at home, school, and in the community.

Explore common questions, such as:

• How do I approach a person who is blind or visually impaired in a social setting?

• How do I communicate with someone who is deaf or hard of hearing if I don’t know sign language?

• What are environmental considerations for making my classroom, organization, or community more accessible?

• What strategies can I use to increase opportunities for participation in my community?

2.5 Hours of Continuing Education Credit (ACVREP approved)

Get started at [www.deafandblindoutreach.org/promoting-access](http://www.deafandblindoutreach.org/promoting-access)
I am a mother to three teenage children. I have an 18 year old reluctant to plan for college, although she would love higher education if only she could make a decision on how to proceed. I have a 16 year-old who would happily listen to music all day in his room with a pile of snacks while only coming out to ask for more food. I have a 13 year-old who has somehow found a balance between wanting to be with friends and her passion for reading, which requires time alone.

It has taken me 18, 16, and 13 years, respectively, to build relationships with them and every day provides an opportunity to solidify the trust even parents have to earn.

My 16 year old, Eddie, was born with multiple disabilities. At four months, we were told he was blind with a condition called optic nerve hypoplasia. At one, he was diagnosed with panhypopituitarism. Somewhere around age two, we heard
the term “developmentally delayed” for the first time. At almost five, he was diagnosed with autism. At six, he was diagnosed with cerebral palsy and at six and a half he was undiagnosed with cerebral palsy, although he continues to have an orthopedic impairment. As a young mom, I knew the importance of building relationships with our children, but I underestimated the need to build trust for Eddie.

I was so committed to bonding with my children that I had a “baby tape” for each I played while they were in the womb. It included recording on a tiny cassette tape some classical music, talking to the baby in a sing-song voice by both Mom and Dad, and then adding a touch of something unique. For Eddie, this was “Sunrise” by Norah Jones. I would position the small recorder on my stomach with the speaker facing in and simply rest while my baby was serenaded three times a day. If their dad thought I was over the top, he never said it. He was committed, too.

Once they were born we read them books, went for long stroller walks, said “I love you” as much as possible, and played classic games like “peek-a-boo.” On top of all that, we tried to communicate with them constantly. We would tell them where we were going, who was going to be there, when we would be leaving them with somebody else, and when we would be back. As Dr. Seuss’s Horton once said, “We meant what we said and we said what we meant.” This provided an
opportunity for our children to build healthy relationships with us. We did not come up with this on our own, but attended a variety of parenting classes along the way.

We learned to say sorry because we messed up or did not follow through, which two of my three understood. This is communication and it is also building trust. What we did not understand was Eddie’s inability to comprehend verbal explanations. Saying sorry was not going to be enough for him and therefore trust was not gained as fast. To him, only actions mattered. If I said he had to do something three times, but I actually made him do it five times, it was always harder to engage him the next time. I could not say, “Sorry, I’m only trying to help you learn.” That did not matter to him. What mattered was that I kept my word.

Knowing he was a child with a visual impairment from the age of four months, we knew we had to step up really fast. We were told to talk about everything and anything to provide context to his world. I gathered up as many materials as I could from the American Printing House for the Blind. I put braille on all the board books in our house. I attended family conferences for children who are blind and brought home all the swag. I was loading up Eddie’s life with materials designed for children who are blind. I thought all I had to do was get the stuff in my house and he would learn. I never once considered that before I could really teach him, we would need to communicate on his level.
By the time Eddie entered school, I was working to become a teacher of students who are visually impaired (TSVI). I knew all of the education lingo, the individualized education program (IEP) jargon, and I knew how to describe my son to people. In pre-school, he loved Queen, and I was happy to share that detail with others. However, when I was asked specifically how Eddie communicated, I was unsure. He expressed himself through smiles, a couple words, and cries when he was upset. I used real objects for making choices, but he had no abstract tools in place. Although I was told Eddie had an extremely low intelligence quotient (IQ) when he was six years old, I also did not know how to get his answer to a question. To this day, I wonder how that assessment was done and if that professional felt good about it.

Until Eddie was well into elementary school, I was cramming our world down his throat. I wanted him to have access to everything! He should be in the classroom, he should hear the stories, and he should have all the braille. To me, his education was all about access, which is true. Yet, I was not focusing on the right kind for this stage in his life. He was getting access to braille, auditory books, and more. Everything was tactile and he had staff that loved working with him. Even as a TSVI, I did not realize that access included communication, which may have been why he exhibited more negative behaviors with age. As a newbie, I thought it
was all about altering materials. I had not even considered the importance of trust and relationships formed through communicating.

We once took Eddie to a seasoned occupational therapist (OT) for an assessment. Her office was full of toys and when we arrived she wanted to simply watch us play with Eddie for a bit. We sat with him on the floor and were immediately at a loss. I know she felt bad for Eddie as he was being raised by parents that did not seem to know how to play with him. Yet, I think she felt sad for us, too. She turned her OT assessment into a tutoring session. It was the first time I remember being explicitly told to just “do what he does.” If he makes a sound, do it back. If he touches a toy, touch it next to him so he can feel your hand...and so on. This whole time we had felt the need to push instruction on Eddie, but we had not understood where to start. We needed to have conversations around things he chose, such as a silly song or noise. We should not always have been picking the topic.

As Eddie approached late elementary, we began an important shift in his instruction. After attending an “I-M-Able” presentation by Diane Wormsley, we started presenting Eddie with words he loved in braille instead of the alphabet, days of the week, or months. Imagine that you have been subjected to tracking “September” in braille for five years and then somebody introduces the word “Yippee!” and has you track fingers over it while they say it in an excited voice.
Spoiler alert...suddenly Eddie would participate. Imagine hating to use a Braillewriter for years and then somebody sings “Rolling, Rolling, Rolling” as you wind your paper in before you begin. You guessed it, Eddie laughed hysterically at the fun. We incorporated more items of interest to him and found ways for him to communicate choices through buttons, iPad apps, and tactile symbols. Through the use of communication tools, he started speaking more words. By taking an interest in him, he was interested in us, and therefore interested in the instruction we provided.

When Eddie was entering seventh grade, we moved to Texas as I took a job at the Texas School for the Blind and Visually Impaired. As I engaged with my new colleagues, my world opened even further. I was immersed in a place where professionals had been researching building relationships with children like Eddie for years. I attended a workshop with Barbara Miles that was life-changing. I sat in deafblind team meetings with colleagues that could unwrap the topic of one student-teacher or child-parent interaction over the course of hours. They knew that every child had a lot to say and it was our job to listen and show them they are heard.

As Eddie continues to access more tactile symbols at school and concrete routines throughout his day, he is flourishing. He continues to learn braille letters and phonics and is able to associate those items with relative information at school
and at home. He is picking up job responsibilities at school and his team is allowing him to contribute which will make him successful. He uses a lot more language than ever before and is a master of communicating his wants and needs.

Eddie still has hard days where expression does not come easily. He wakes up agitated for reasons he cannot articulate and we cannot ascertain. However, we see way more of the good days, like the days he wakes up singing to Johnny Cash. The days he wants to go grocery shopping at H.E.B. with his Dad. The days he wants to pick up banana bread and a root beer from his favorite fast food restaurant, P.Terrys. The beautiful thing is that he can tell us what makes him happy and we can make it happen, while teaching him something new along the way.

A couple weeks ago, I was putting Eddie to bed and he was going through his routine. All the usual things were happening in order as promised: bathroom, medicine, bedtime stories on Spotify, and one more drink of water. As I was putting Eddie to bed I told him, “Thank you for going to the bathroom.” (As this is something I often have to talk him into.) He then stopped before lying down in bed and said to me, “Thank you for P. Terrys with me.” Not just “thank you for P. Terrys”, but “with me.” This was a first.

Eddie has always needed prompts to communicate. He needs his Dad to say, “Tell Mom goodnight.” He needs me to say, “Tell Dad thank you.” He uses self-
expression throughout his day based on wants and needs...not based on gratitude.
The night he thanked me for a drive to P. Terry’s we have done every Saturday for over a year was overwhelming. With tears in my eyes, I turned off his light and shut his door like almost every other bedtime for the past 16 years. I did not know how bad I needed a “thank you” and how much I wished for some acknowledgment of the role I play in his life. This time it was him working hard to communicate on my level instead of the other way around.

Whether you are an administrator, a teacher, a related service provider, or a parent, you have the power to build trust in relationships with your students or children. For those who communicate verbally, spend time chatting about their interests before you engage in instruction. For those who communicate differently, take the time to learn their mode. Whether a child uses ASL, tactile symbols, gestures, or simple utterances, your engagement matters. Do what they do, or ask for guidance from a professional, but find a way to connect. You cannot teach without showing them first that you care, that they matter, that you know they have something to say, and most importantly...that you are listening. Trust comes before teaching.
Orientation and Mobility

Quick facts
- 25– to 34-credits for a graduate certificate
- 45 credits for licensure and a master's degree
- Flexible cohort model
- The only TVI and O&M training in the Pacific Northwest!

Become an orientation and mobility specialist

O&M Specialists are professionals who teach individuals with visual impairments, including those with deafblindness, how to travel safely, efficiently, and with purpose in a variety of environments. Students in the O&M program gain the professional skills and preparation to complete the international certification exam through the Academy for Certification of Vision Rehabilitation and Education Professionals (ACVREP).

The O&M program is offered as an extension of PSU's long-standing Visually Impaired Learner program that has been preparing teachers of children with visual impairments (TVIs) to work with school-age children for over 50 years.

College of Education
Northern State University

askcoe@pdx.edu
503-725-4619
pdx.edu/sped/om

Department of Special Education
I come to you bringing the shared experience of being a parent of children with visual impairments. I also am immersed in the field, working as a Professor of Special Education and serving on the Board of Trustees for the Texas School for the Blind and Visually Impaired (TSBVI). It is from the frame of my lived experiences and involvement within the field of visual impairment that I hope to share valuable information and strategies with other parents who are also navigating the often uncharted waters that come with being a parent to a child with a visual impairment or deafblindness.

**Informed Programming**

Chances are, especially if you are served by a small school district, that some school personnel (other than those with specialized training) will have limited experience working with students with visual impairments or...
deafblindness. Well-meaning staff members may try to apply what is typically done to your child’s program, not realizing that their sensory impairment may necessitate the need to think outside of the box. There are considerations for assessment, processes, and service provision which are unique to this population. The tips I mention in each of these three areas of programing are summarized in Figure 1.

**Assessment**

As Emily eluded to in her introductory piece in this issue, it can be difficult to hear definitive declarations of your child’s abilities based upon assessments that may or may have not been appropriate. It is my goal, and hopefully yours too, that my children’s abilities are never underestimated due to testing that is neither reliable or valid; nor administered with fidelity. I also want any evaluation to portray the whole picture. This means it should include an up to date learning media assessment (LMA), functional vision evaluation (FVE), and low vision evaluation. Elements of the expanded core curriculum (ECC) in which your child may need support with in order to foster their academic and overall development, should also be evaluated.
Figure 1

**Helpful Hints for Successful Programming**

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<th>Processes</th>
<th>Service Provision</th>
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| • **Formal Assessments:**  
  • Parents can decline formal cognitive (IQ) and achievement testing for a child with only a sensory disability  
  • It is possible to be eligible as VI and LD; if formal testing is needed, refer to Loftin (2005).  
  • Ensure your student has had a LMA, FVE, and a Low Vision Evaluation, as well as assessment in the areas of the ECC  
  • **Informal Assessments:**  
    • The IEP team can reduce the number of assessments (i.e. MAP testing) that are required  
    • Some assessments may not be appropriate at all; ask questions!  
| • Include your child in his/her IEP meetings  
• Make sure that time is taken to craft a comprehensive PLAAFP statement and that IEP goals are linked to data in the PLAAFP  
• Paperwork should include a VI/HI and AT supplement  
• You should receive progress updates on IEP goals at the same interval as report cards are distributed  
• You can request that a back to school orientation meeting be included in the IEP  
| • Direct service and consultation minutes should be linked to data  
• The IEP Team is a powerful group; if there is an issue, bring it to the table and ask the team to problem solve  
• Be aware that it often takes students with VI longer to learn to read and write fluently because of the use of technology; the classroom teacher and TSVI need to work together and tools such as audiobooks may need to be reserved until after learning to read |

Image Description: Figure 1 depicts three elements of programming that need to be considered: (a) assessment, (b) service provision, and (c) special education processes.
The obligation I feel to guard my children from inappropriate assessment has prompted me to decline any cognitive (IQ) and achievement testing as part of the full individual education (FIE) process. It is my opinion that this testing is unnecessary for students who are only being evaluated for needs in regards to a sensory disability. In other words, if the team does not suspect a learning or intellectual disability, this testing may not provide helpful information—and it has the potential of providing damaging information. The reason I say this is because often these formal assessments are not normed on students with sensory impairments. Thus, your child’s scores are being compared to the scores of those without sensory impairments who took the assessment in the traditional method. This is not to say that steps cannot be taken to make evaluation more accurate. If you and your child’s team do think formal assessment is warranted, please consider the framework laid out by Loftin (2005). This resource is especially helpful due to what I would classify as the limited experience of school psychologists and educational diagnosticians with evaluating students with sensory impairments. With these things in mind, I would also like to point out that it is possible for students to have both a sensory impairment and a learning disability (LD), which would be a reason for administering these test batteries. School personnel may assert that they cannot assess for a LD due to the exclusionary clause in the federal definition which states that the difficulties in learning cannot be due to hearing or
vision. However, this was simply meant to ensure students were not determined LD when their difficulties were due to vision or hearing, but it should not exclude students with sensory impairments from being appropriately identified and served when a LD truly exists.

Informal assessments (i.e. MAP testing, iStation, district benchmarks) have also proven to be an area in which I have had to advocate for appropriate accommodations and application of common sense. I have found that for these tests to be administered appropriately, it requires individual administration and considerable time out of the classroom—often at the convenience of the personnel administering the assessment instead of in a fashion to minimize my children missing instruction. Therefore, please do not hesitate to bring up these concerns during your child’s individual education program (IEP) meeting. It may be reasonable to reduce the number of assessments being required. Lastly, I would ask how the assessments are being used to drive educational programming (i.e. do they directly link to the state curriculum standards and are they analyzed according to them).

**Special Education Processes**

Other discoveries I have made along our journey have to do with basic processes. First, I have found it immensely valuable to include my children in their IEP meetings—and from an early age. There are just things that are more powerful
coming from the student rather than the parent (i.e. the small group administration for testing was distracting and I need individual administration). In addition, no one on the IEP team has to operate in the manner in which your child does. Is it not common sense to include them in a planning meeting FOR them?

The particulars of paperwork is another area in which I have had to learn the ropes, even as a trained special educator. The school personnel should first be determining your child’s present levels of academic and functional performance (PLAAFP). An IRIS Module developed by Vanderbilt University (2021) can assist you and your child’s team in knowing the components of a comprehensive PLAAFP. This should then be the basis for creating IEP goals, as they should directly link back to the areas for improvement noted in the PLAAFP. Other items to make sure are included in the paperwork are the vision (VI) or hearing (HI) supplement and an assistive technology (AT) supplement. These give specific information about your child’s needs, areas of the ECC that have been identified as requiring instruction, and recommended tools. Lastly, be aware that the school should be providing you with updates on your child’s progress on his/her IEP goals at the same interval in which other parents receive grade reports.

One final strategy I will share is one that we have both found useful is a back to school orientation meeting for all staff who will be working with your children. This meeting also serves as a time to orient your child to the building,
make decisions about the location of appropriate seating, and ensure technology is set up. It is even possible to include this in your child’s IEP to help ensure that it takes place.

Service Provision

I have been asked, “How do I know my child is getting the appropriate amount of service minutes?” I would recommend that you simply ensure that this recommendation be based on data. If you do not feel that your child’s needs are being met, you can call an IEP meeting to evaluate the appropriateness of their allotted schedule of services. Along the same vein, it is important to remember that the IEP team is a powerful resource at your disposal. We recently had an issue with our son’s technology (as he entered middle school and is changing classes each period) becoming too cumbersome to allow for easy portability. It took his entire team being creative to get his number of devices reduced and utilizing some stationary equipment to relieve his frustration. The last thing I will note here is that it has taken both of our children longer to master learning to read and write fluently. Given that they are having to do so in a non-traditional manner using technology, and often different technology depending on the task, this is only reasonable. However, it was easy for me as apparent to become a little panicked about their rate of progress in this area. As a parent, as uncomfortable as it was at times, I felt it was important to give our children the additional time they need to
develop these skills. It also necessitates the need for the classroom teacher and the teacher of students with visual impairments (TSVI), each with their own specialized training, to work together to ensure as much access and progress as possible.

**Preparing for a Successful School Year**

As you may already be aware, even when the above variables have been considered and implemented, each school year brings new personnel and presents new challenges. The back to school meeting I mentioned previously is a way to combat this issue. In preparation for this meeting, you should consider compiling folders for each staff member. These folders help ensure that each person has the information they need and that you get the chance to help paint the picture of your child. Take this opportunity to brag on your child! Make their strengths explicitly clear and document them with pictures. Also, providing helpful resources, such as information specific to your child’s particular eye condition and strategies for general education teachers, can prove instructive (TSBVI, 2010, 2016). Figure 2 provides ideas for the relevant information to include in the folders.
Figure 2

*Items to Include in Beginning of the Year Folders*

- **Individual Education Program**
  - Provide the most current paperwork with goals and accommodations
  - Include VI and/or HI and assistive technology (AT) supplements
  - Highlight areas of importance

- **Vision/Hearing Information**
  - Provide information specific to your child's vision or hearing condition, such as:
    - Specific Eye Conditions, Corresponding Impact on Vision, And Related Educational Considerations (tsbvi.edu)
    - Provide any helpful hints for teaching, such as:
      - Classroom strategies for Regular Education Teachers who have students with visual impairments (tsbvi.edu)

- **All About Me**
  - Help your child create a one-page flyer about themselves
  - Detail their likes and strengths, including corresponding pictures

- **Contact Information**
  - Include a business card or information on your preferred mode of communication

Image description: Figure 2 depicts the four pieces of information that should be included in folders for all new teachers: (a) Individual Education Program paperwork, (b) information specific to the vision or hearing condition, (c) All About Me page on the student, and (d) contact information.
Remember to include any specials teachers (i.e. art, music, and physical education) and any related and instructional service providers (i.e. occupational therapist, etc.) in this meeting. It is also crucial that your child’s strengths are conveyed in your message. This can be accomplished by allowing your child to facilitate the meeting to the greatest extent possible. In addition, ask the team to have high expectations and relieve their anxieties by giving them permission to not have all the answers. Simply request that they reach out for help (to either you or the TSVI) when they do not know the best way to proceed. Having team members participate in a simulation of your child’s vision loss and a demonstration of the technology utilized may also prove beneficial. A good way to do this is to simply ask the group to access the built in accessibility (i.e. hitting the Windows and + keys simultaneously and repeatedly) on their electronic devices and perform a task (i.e. send an email). Conclude the meeting with a tour of your child’s classrooms, following their daily schedule. This will serve to orient him or her to the school environment, but will also provide an opportunity to think through the logistics of seating arrangements and technology requirements for each class.

**Conclusion**

I have attempted to organize some notes regarding the way I approach programming for my own children with visual impairments. Although I have attempted to provide global information, the tips I shared reflect my perspective
and opinions and may not all be applicable to your child’s specific circumstances. However, I urge you to identify one idea mentioned here and explore it further and/or use this as a discussion piece for collaboration with other parents and families, as well as your child’s IEP team.
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https://www.tsbvi.edu/eye-conditions
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As a Certified Orientation and Mobility Specialist at the Texas School or the Blind and Visually Impaired (TSBVI) who is involved with family engagement, I have noticed some common themes among the questions parents and families have about how best to help their children with visual impairments and deafblindness.

The common denominator I find at the root of all the questions is a desire of parents and families to help their child become as independent as possible. This article will highlight some ways that you, as a parent, can facilitate your child’s development of skills for life. There are sections for young people at various levels of functional ability (feel free to jump to the sections that best align with the present needs of your child). This article is not intended as a complete set of answers, only a launching pad for more learning, engagement, and interaction with your child as they grow, learn, and develop. Hopefully you will seek out other resources in your communities, communities that now extend all over the globe...
with the help of technology. Collaboration can occur with other families that are going through the process of developing independence, those that have traveled the road already and whose children are now adults in various settings, and professionals interested in helping children and families with every area of the Expanded Core Curriculum (ECC).

Questions to Consider

1. **How can we know it all or do it all?**

   In isolation, we can do only so much, but together we open all new avenues for learning for our children and young people. Fortunately, we all have access to information from proven strategies, as well as communities of experience and communities of practice worldwide. Whether you learn from a book, blog post, YouTube Video, or one to one communication, there are answers available. Some online resources are now produced by young people who are blind, low vision, or deafblind as a way of sharing their own experience in order to help others. As an example, Challenge Solutions describes its blog as “Lessons About Life and Technology for the Blind and Visually Impaired”. Their blog is at [https://challengesolutions.org](https://challengesolutions.org) and their YouTube channel is titled “Challenge Solutions”, it can be found at [https://www.youtube.com/channel/UC-81CIyq-qUETEW-G46Hf0Q](https://www.youtube.com/channel/UC-81CIyq-qUETEW-G46Hf0Q)
On Facebook, there are lots of relevant groups. There is a group focused on Expanded Core Curriculum (ECC) called 9 More Than Core. Their “About” section shares that “9 More Than Core is all about the Expanded Core Curriculum for students with vision impairments. Share ideas, lesson plans and pictures OR ask questions and get support for teaching the Expanded Core Curriculum.” There are also organizations that are specifically for parents of children who are blind and visually impaired. The National Organization of Parents of Blind Children has a website at https://nopbc.org. Many states also have their own chapter of the Association for Parents of Children with Visual Impairments, such as the TAPVI (Texas Association for Parents of Children with Visual Impairments), http://www.tapvi.org.

2. **What can I do to help my child develop skills if I never grew up learning how to do things non-visually, with low vision, or tactually?**

Taking family trips together and using public transportation, is a tremendous way to increase understanding of what life will be like as an adult for a non-driver. This is true for college life, working years, and into retirement. It is about getting where you need to go. Try using the bus together in the city; practice using Uber and Lyft (even for short trips near home).
Install an accessible GPS app on your phone so your child can hear the streets near your home, on the way to the grocery store or church, etc. Lazarillo and Goodmaps Explore are both free GPS apps that can give information about where you are, what is around, and can even name each street as you cross it (for those who are deafblind, there is the option of using a refreshable braille display to make the output of the smartphone accessible). As an example, you could launch the Lazarillo app on your phone as you head to the grocery store or the school, and the app will read the street names as you drive by each street. There is nothing technical needed in terms of knowing how to use GPS, the app just knows you are driving and begins reading the street names once you launch the program (at installation you will give it access to your location so it can know where you are as you travel). This process of hearing the street names as you go about your regular travels builds a cognitive map in the mind of your child. Much of what we learn is through incidental learning; hearing street names and points of interest along regular routes creates incidental learning through the auditory channel. Your child will eventually become familiar with the street names near home, school, the store, etc. They will eventually begin to anticipate those streets in order. Developing the sequential memory of the streets is the same skill they will use when using public transportation and remembering how close they are to their station or bus stop, keeping oriented with landmarks through spatial updating, and more.
Take sensory walks together in different seasons to learn what you can notice through all of your senses: what do the leaves sound and feel like in different seasons, can you tell when you are on a hill without looking? What part of your body helps you know?

You, as a parent, can order a white cane for yourself from Ambutech, National Federation of the Blind (NFB), Amazon, MaxiAids, etc. This may encourage and empower your child to use their own cane if you are willing to practice with them. Adventures together might begin with simply taking family walks around the block together. There are many different perspectives on cane length. Technically, you would not want anything shorter than two inches above your sternum (shorter than that and your stride length will generally extend beyond where the cane can preview your next step); and on the flip side, some people prefer canes that are taller than they are. You can check in with your orientation and mobility specialist for greater details about why a longer or shorter cane might be recommended. As a general guide, measuring for cane length to match the height somewhere between your armpit and your nose is a good rule of thumb. For some young people, knowing that you as the parent are comfortable using a cane, will greatly increase their willingness. It validates the use of the cane and helps them know you support them in what they are learning about. It is as simple as practicing throwing a baseball back and forth to help them prepare for little league,
or doing drivers training activities together for a teen beginning with their permit. Whatever encourages them to begin practicing their skills in the community is creating benefits that pay dividends through their entire lives. While you are walking, the cane is extended in front of you and sweeps back and forth in an arc pattern, like radar on the ground. As described in the next section, if you solicit instruction from your child (or your child’s Orientation and Mobility Specialist) you may also inspire them to demonstrate their own mastery.

3. **Are there places for me to practice non-visual or low vision skills?**

You can reach out to your child’s Orientation and Mobility Specialist and or your child’s Teacher of Students with Visual Impairments (TSVI) to see if they are willing to have you practice some skills under blindfold or a low vision simulator. If this is not an option, you can try certain activities in the home or outdoors with the help of another person to monitor your safety as you learn. Here are some examples of simple activities to try. The activities will help you understand the adaptive strategies involved that can help them be successfully accomplished. Remember that this is all about fun learning; it is a new way of doing things, and like doing any new thing, they will likely take some practice. Learning through experience is a most excellent way to learn! If you are comfortable having your son or daughter show you how they go about doing things, this can be a terrific
opportunity for them to demonstrate all they know and are learning. This gives your child an opportunity to share what they know, to be the expert for a moment.

- Set the kitchen table while under blindfold or simulator
- Try unlocking the front door with your keys.
- Put a windchime in the backyard and another at the door returning to the house; try to walk between the two sound points.
- Gather clothes from the dryer, fold them, and try to put them away (was it challenging to locate which clothes go where? Would labeling drawers or cubbies make it easier?)
- Walk to the mailbox to retrieve the mail or newspaper (please remember to have an assistant with you as you learn what to be aware of, such as traffic, drop offs, uneven walking surfaces, head level obstacles, etc.)
- Have your child teach you how they use their device(s) such as a white cane, monocular telescope, magnifier, etc.
- Tie a plastic grocery bag around a soccer ball or playground ball and have some fun kicking the ball back and forth.
- Fill up a cup with water (best to keep this over the sink while you learn to listen to the sound of water changing as it fills, or become practiced at having your fingertip over the edge of the cup to clue you into the water reaching the top of the cup).
• Visit a public restroom and try to find the toilet, sink, soap, and wastebasket.

• Walk around the block and see if you can locate which house is yours when you come back around. (Lots of good conversations here with your child about landmarks, clues, and clues.)

Considerations for Various Levels of Development

Sensory Motor Level

There are tremendous resources available through Active Learning Space at https://activelearningspace.org, to meet the needs of children at very early levels of development. In addition, learning about basic interaction concepts and about being in the moment together with your child are very helpful. The process of shared attention and meeting your child where they are, whether sitting and rocking or lying next to them on the floor is the foundation of relationship building. Sharing these experiences through presence and imitation begins the bonds of connection, trust, and expression. There are many strategies developed for young people who are deafblind that are very helpful in increasing communication and engagement in activities; these same strategies are also helpful with young people who are primarily non-verbal, though they may not be deafblind.
Routines are also excellent opportunities to engage in meaningful interaction with your child. Mealtimes, changing routines, dressing, etc., are all places where predictable activity occurs with opportunities to “listen” for your child’s communication through behavior as well as to introduce symbols for communicating what is happening and to aid in choice making. You can learn more at the Texas Deafblind Project website, https://txdeafblindproject.org/.

**Functional Level**

This is a very large category of developmental level, and there is likely much overlap with the previous section. Developing concepts that will be utilized and built upon throughout the lifespan are areas of high need. When concepts can be reinforced across settings, both school and home, there is much greater likelihood of assimilating and generalizing knowledge and experiences. Examples include: rough and smooth, inside and outside, more and less, fast and slow, and even characteristics of materials, such as wood, metal, glass, and plastic. These material concepts will help in discerning landmarks and clues when traveling along routes. It is best to present these in natural settings wherever possible such as finding the rough brick next to the smooth glass in the hallway while transitioning to an activity. Feeling the hot glass on the door before heading out into the warm
sunny day, etc. The more concepts that are developed and used in varied settings, the greater the power and connection of the concepts.

Routines and simple chores are again tremendous opportunities for learning. Everything from setting the table for dinner and gathering clothes to bring to the laundry, to picking up mail from the mailbox and bringing in the groceries, are activities that occur regularly and provide opportunities for young people to begin developing skills and extending conceptual understanding. The grand perspective is to do with, not for; and also, to look for opportunities to pull back supports so that when a young person is able to do something independently, we allow that to happen.

**College and University Bound**

Visiting colleges and universities together to get a sense of what a large campus and a small campus feel like are great places to start. Finding out about the school’s office of disability services, what they offer, how to access services, etc. will be very helpful and informative. There is no IEP process at the college and university level and students will be required to be the squeaky wheel to get their needs met. This can be quite an awakening for some students who have had very involved teams in their middle school through high school years. While visiting campuses, also consider what independent travel will be necessary. Is there a
grocery store nearby? Are there public transportation options? Is the neighborhood surrounding the school conducive for living off campus?

It is also a good plan to begin establishing the use of a bank account with a debit card connected to it. Many of the services that will be used on campus as well as some forms of public transportation will require access to a credit card or debit card, such as Uber, Lyft, taxis; even some transit companies are moving to fares provided on smart phone apps. One very helpful book is *Finding Wheels: Strategies to Build Independent Travel Skills for Those with Visual Impairments* available through Texas School for the Blind and Visually Impaired (TSBVI) publications at [http://www.tsbvi.edu/store/](http://www.tsbvi.edu/store/).

### Conclusion

Looking for ways to go about a day in the way you anticipate your child needing to conduct themselves will help them know you are interested in their unique needs, help them know you are eager to support them, and that you are willing to learn, too. The time you invest now will bring benefits to them throughout their lives. As they prepare to enter a world with very few examples in the mainstream media, you can create a positive learning environment in which independence is nurtured. If you are looking for some role models, there are a few shared in the LiveBinder on Role Models for Students who are Blind and Deafblind, [https://www.livebinders.com/b/2697227](https://www.livebinders.com/b/2697227).
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College of Education

Department of Special Education
Learning to read is commonly a shared experience between parents and children. Bedtime stories, magnetic letters, trips to the library, and favorite books passed down through generations all form the framework for early literacy. What happens when children use a different literacy medium than their parents? How can parents support their children who will use braille as their gateway to books? While it may seem intimidating at first, there are many ways that parents can support their children on this journey. The fields of applied behavior analysis, embodied learning, and multi-sensory instruction offer some helpful guidelines for the path forward.

**Five Areas of Reading**

Parents of budding braille readers can start by familiarizing themselves with two of the National Reading Panel’s five key concepts: Phonemic Awareness and Phonics (National Reading Panel, 2000). Phonemic awareness involves the ability...
to name and experiment with individual sounds in spoken words. Parents can support the development of this skill orally, by adding and deleting sounds from the beginning and end of words. A tactile element can be added by clapping out syllables or tapping fingers on a surface while segmenting sounds in a word (such as three taps for the word “c/a/t”). Phonics builds upon phonemic awareness by connecting sounds to the letters with which they correspond. Parents of beginning braille readers can support their learning by fostering these letter-sound connections in simple ways, such as braille letters labeled on blocks that can be arranged to create different combinations of words.

**Applied Behavior Analysis**

In building a child’s early experiences with braille, parents can use several principles from the field of applied behavior analysis. Positive reinforcement, behavioral momentum, shaping, errorless learning, overlearning, and conditioning can all promote learning (Cooper et al., 2020). Both learning to read and learning braille take time and practice, so making the experience positive can set children up for long term success. Discrimination training is another ABA method that can support early braille learning. As little fingers start recognizing different symbols, plenty of practice is necessary. Always starting with symbols that are very different from one another makes it easy for children to be successful, and limiting the number of choices until mastery and automaticity builds a strong foundation.
Figure 1 shows a picture of a braille writer that has been decorated by a child. This shared activity builds a sense of ownership and pride in having a braille device to use at home, and the decorations can help establish the braillewriter as a fun, enjoyable activity.

**Figure 1**

*Decorated Braillewriter*

Image description: Picture shows a Perkins Braillewriter with tactile princess stickers: bling, crowns, a wand, a castle.
Multi-Sensory Literacy Instruction

The Orton-Gillingham method, also known as Alphabetic Phonics, provides a multi-sensory approach to the explicit instruction of reading (Sayeski et al., 2019). Often used with students with dyslexia, this method combines the instruction of letter attributes including their shapes, names, and sounds along with direct instruction in basic rules of reading. As Saveski et al. wrote, “the underlying principle of OG is to systematically build students’ understanding of word parts.” (2019, p. 244).

These include instruction in different syllable types (open, closed, CVC, CVCE, etc.) as well as explicit instruction in digraphs, trigraphs, combinations, and diphthongs. There is a guide to the order of introduction of these different concepts, and a “key word” is assigned to each letter name (examples include “igloo: i” and “iris, i”). This can be adapted to a tactile picture or an object, and practicing the key words with the letter names, shapes, and sounds reinforces the sound-symbol correspondence. Children also practice the sequence of the alphabet through a “touch and name” activity that involves using the left hand to touch and name letters a-m, and the right hand to touch and name letters n-z. Parents can support children using games involving the letter name, shape, and sound. Children can practice reading poems, nursery rhymes, reading in different areas of the room can all be fun ways to mix it up. Figure 2 shows how a braillewriter can be used to
make Valentine cards to share with others. This activity provides a meaningful, engaging way to practice braille reading and writing.

**Figure 2**

*Making Valentines*

![Image description: Picture shows a Perkins Smartbrailler being used to type braille on a Valentine’s Day card.](image)

**Embodied Learning**

Children learning to read need consistent repetition and structure balanced with room for play and discovery. Embodied learning is a field that considers how a learner’s body and environment relate to their development of cognitive
processes (Skulmowski & Rey, 2018). Children need to experience the *feeling* of writing, the *feeling* of reading, and the *feeling* of tactile pictures. Braille reading practice doesn’t always have to take place sitting at a table with a book. It can be embedded in in fun surprising places: on the wall (see Figure 3), in rooms around the home, in the car. Items with braille letters can be hidden and children can find them! Practicing braille writing also does not always have to be done at a desk or table. One component of writing involves finger strength and finger isolation, which can be built on a piano, with finger puppets, with sensory materials such as shaving cream, sand, paint. Figure 4 shows a picture of a child’s hands with tiny shoes on four fingers. These shoes are on the specific fingers that need to be pressed in tandem to create the braille letter “P” (dots 1, 2, 3, 4.) Taking one’s fingers for a walk is a great way to practice the feel and the shape of the letter P!

**Conclusion**

Even when parents may have learned to read using a medium other than braille, there are many ways they can enjoy shared literacy and promote the reading development of their children. Time spent reading is a powerful connection that families share. Using interdisciplinary techniques and principles from applied behavior analysis, multi-sensory literacy instruction, and embodied learning can support parents and children along this shared journey.
Image description: This picture shows an assortment of braille literacy skills posted on the wall of a classroom. Reading with fingers doesn’t mean a child has to always be seated!
Figure 4

The Letter “P”

Image description: This picture shows the letter “P” being created with a child’s dot 123 and 4 fingers, wearing finger sneakers.
References


The intended purpose of the Spring 2022 convention issue is to provide manuscripts aimed at practitioners about presenter contributions to the CEC 2022 program and work related to the field of visual impairments and deafblindness. This issue will allow those who were unable to attend your session to know more about your work.

Guidelines:
- 3-5 pages
- Tables, images and/or figures should have a text description
- References
- APA formatting (7th Edition)
- 12 point, Times New Roman font
- Author information for title: Name, affiliation, highest degree earned, and email address
- Please identify target audience

Email your manuscript submission to Kathleen.Farrand@asu.edu

Deadline for submission: April 1, 2022

VIDBE-Q

Volume 66

Issue 4
Children with visual impairments often have hidden disabilities that are not so easily seen. Not only must they deal with the physical and practical challenges associated with their visual impairments, but they also often must contend with the difficulties associated with increased emotional and/or psychological problems that arise from their visual impairments. Research frequently suggests that children with visual impairments have more emotional problems than do their sighted peers (Brunes et al., 2015; Harris & Lord, 2016). Chief among these are increased levels of anxiety and depression (Augestad, 2017). Anxiety is the most common emotional difficulty experienced by both children and adults (Loftin, 2016). According to the National Association of School Psychologists (NASP) 2% - 27% of school age children have significant difficulties with anxiety. In 2017 the National Institute of Mental Health (NIMH) reported that approximately 13.3% or 3.2 million adolescents ages 12 to 17 had a major depressive episode in the past...
year. Data from the Centers for Disease Control and Prevention (CDC), indicate that 7.1% and 3.2% of children ages 3-17 have a diagnosed anxiety or depression disorder, respectively. In fact, rates of being diagnosed with either anxiety or depression among children increased from 5.4% in 2003 to 8.4% in 2011-2012.

**Reasons for Increased Mental Health Difficulties**

There are several reasons why children with visual impairments may be at-risk for increased mood disorders. One major reason is the lack of opportunities they may have in forming and maintaining social relationships with peers. Huurre, Komulainenm and Aro (2001) suggested that young people with visual impairments often had fewer opportunities to make friends and because of this risked facing social isolation. Children benefit from friendships as they help create a sense of belonging and serve as means to reduce stress. Friendships also help children adjust to changes within their environment. It has been suggested that the greater difficulty in making friends for children with visual impairments are in part because youth with visual impairment spend more time in solitary and parallel play rather than engaging in social interactions with their sighted classmates (Celeste, 2006).

Another risk factor for children with visual impairments is the potential for them to be bullied more often than their sighted peers in the school environment (Rosemblum, 2000). Children who are bullied can experience negative physical,
social, emotional, academic, and mental health outcomes. As it relates to mental health, children who are bullied are more likely to experience depression, anxiety, increased feelings of sadness and loneliness. According to Jessup, Bundy, Broom, and Hancock (2017) feeling of loneliness is common among children and adolescents with visual impairments. High levels of loneliness among students with special educational needs in mainstream schools may indicate that these students are at risk of lifelong socioemotional problems if they do not receive the appropriate support (Schwab, 2015).

**Recognizing Symptoms**

When dealing with the emotional difficulties of children with visual impairments a primary way to intervene is for parents and teachers to become aware of symptoms of anxiety and depression. Huberty (2008) summarized the major signs of anxiety and depression in children. The major signs of anxiety can be represented as thinking/learning, behavioral, or physical signs of anxiety (see Table 1).

Children and adolescents can demonstrate depression in cognitive, behavioral, and physiological behaviors or patterns (see Table 2). As with anxiety, not all children will show all signs, or the signs may vary in frequency and duration. For both anxiety and depression, it is important for parents and teachers to notice patterns and observe changes in behaviors that may interfere with student
performance. By being knowledgeable about these potential sings will allow for early intervention to help reduce the negative impact of adverse mental health functioning.

**Table 1**

*Signs of Anxiety*

<table>
<thead>
<tr>
<th>Thinking/Learning</th>
<th>Behavioral</th>
<th>Physical</th>
</tr>
</thead>
<tbody>
<tr>
<td>Concentration problems</td>
<td>Restlessness</td>
<td>Stomach discomfort</td>
</tr>
<tr>
<td>Memory problems</td>
<td>Fidgeting</td>
<td>Rapid heart rate</td>
</tr>
<tr>
<td>Attention problems</td>
<td>Task avoidance</td>
<td>Flushing of the skin</td>
</tr>
<tr>
<td>Problem-solving difficulties</td>
<td>Rapid speech</td>
<td>Perspiration</td>
</tr>
<tr>
<td>Worry</td>
<td>Irritability</td>
<td>Headaches</td>
</tr>
<tr>
<td></td>
<td>Withdrawal</td>
<td>Muscle tension</td>
</tr>
<tr>
<td></td>
<td>Perfectionism</td>
<td>Sleeping problems</td>
</tr>
<tr>
<td></td>
<td>Lack of participation</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Failing to complete tasks</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Seeking easy tasks</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Stomach discomfort</td>
<td></td>
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<tr>
<td></td>
<td>Headaches</td>
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<td></td>
<td>Muscle tension</td>
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<tr>
<td></td>
<td>Sleeping problems</td>
<td></td>
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<tr>
<td></td>
<td>Nausea</td>
<td></td>
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</tbody>
</table>
### Table 2

**Common Signs of Depression in Children and Adolescents**

<table>
<thead>
<tr>
<th>Cognitive</th>
<th>Behavioral</th>
<th>Physiological</th>
</tr>
</thead>
<tbody>
<tr>
<td>• “All or none” thinking</td>
<td>• Depressed mood</td>
<td>• Psychomotor agitation or retardation</td>
</tr>
<tr>
<td>• Catastrophizing</td>
<td>• Social withdrawal</td>
<td>• Somatic complaints</td>
</tr>
<tr>
<td>• Memory problems</td>
<td>• Does not participate in usual activities</td>
<td>• Poor appetite or overeating</td>
</tr>
<tr>
<td>• Concentration problems</td>
<td>• Shows limited effort</td>
<td>• Insomnia or hypersomnia</td>
</tr>
<tr>
<td>• Attention problems</td>
<td>• Decline in self-care or personal appearance</td>
<td>• Low energy or fatigue</td>
</tr>
<tr>
<td>• Internal locus of control</td>
<td>• Decreased work or school performance</td>
<td></td>
</tr>
<tr>
<td>• Negative view of self, world, and future</td>
<td>• Appears detached from others</td>
<td></td>
</tr>
<tr>
<td>• Automatic thinking</td>
<td>• Crying for no apparent reason</td>
<td></td>
</tr>
<tr>
<td>• Negative attributional style</td>
<td>• Inappropriate responses to events</td>
<td></td>
</tr>
<tr>
<td>• Negative affect</td>
<td>• Irritability</td>
<td></td>
</tr>
<tr>
<td>• Feelings of helplessness</td>
<td>• Apathy</td>
<td></td>
</tr>
<tr>
<td>• Feelings of hopelessness</td>
<td>• Uncooperative</td>
<td></td>
</tr>
<tr>
<td>• Low self-esteem</td>
<td>• Suicide attempts</td>
<td></td>
</tr>
<tr>
<td>• Difficulty making decisions</td>
<td></td>
<td></td>
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<tr>
<td>• Feels loss of control</td>
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<td>• Suicidal thoughts</td>
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What Do We Do?

Knowing the signs of anxiety and depression is not enough. Below are ways we can help children with visual impairment reduce the number and severity of their emotional problems?

• **Build a trusting relationship.** When support is offered by someone they know and trust, youth are more likely to consider suggestions, try new strategies, and successfully develop the skills needed to manage their mental health.

• **Connect students to peers and adults who have a vision loss.** Anxiety about the future can be reduced by providing youth with opportunities to connect with both peers and adults with vision loss who are living, learning, and working independently.

• **Help students learn skills to initiate relationships that will lead to friendships.** Students must master typical tasks of childhood adolescence like forming close friendships and navigating how to gain access to peer groups rather than engaging only in solitary and parallel play.
• **Ensure students develop appropriate coping strategies.**

Students need opportunities to learn and fail in ways similar to their sighted peers.

• **Include the student in decision making and goal setting.** Student involvement encourages a strength-based approach that promotes overall wellness and increases the young person’s confidence and self-determination skills.

• **Ask “Why can’t…” instead of “Why won’t…”** For example, if a teen is refusing to go a job interview, asking “Why won’t you go to the interview?” implies that the student is choosing to be noncompliant. Asking instead, “Why can’t you go to the interview?” provides the adult with an opportunity to help the young person identify the source of their anxiety and determine strategies to overcome it.

• **Provide guidance and instruction.** It’s important to build self-confidence by offering a step-by-step approach that leads to a long-term solution to the anxiety-driven behaviors. Remember that changing behavior takes time. In much the same way that students with learning disabilities need incremental
interventions and goals for reading instruction, youth with
vision loss and anxiety will likely need incremental benchmarks
to manage their anxiety and reach their goals.


Submit an Article for 2022

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Email the editor - Kathleen Farrand
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One of the common questions I get from educators is, “how can I involve families in what students are learning?” Creating and supporting a home and school connection can be a daunting idea for new and seasoned educators. Creating a home and school collaboration has come to the forefront in recent years due to COVID-19 and the increasing use of online and hybrid learning models. I am a former classroom teacher and a current associate professor that educates future early childhood special educators at the college level. One of my main areas and passions is working with in-service and pre-service educators to conduct research to identify strategies and resources for improved social and academic success for students. This work has led to a focus on ways to involve families. In this article I will share some relevant literature on ways that school and home collaborations are being created and why they are important. Then, I will share some strategies for
creating home and school collaborations to involve families, as well as the benefits of these collaborations.

**Literature**

There is a growing body of literature on the benefits and challenges of home and school collaborations. Much of this research has focused on general education and students with specific disabilities. The following two studies provide a brief glimpse into some of the current research being done to support home and school partnerships.

A pilot study explored the school involvement experiences of 25 fathers of children with deafblindness (Pancsofar et al., 2020). Pancsofar and colleagues identified that fathers were less inclined to be involved in informal school activities and communication, than formal discussions with school personnel. The results indicated that fathers lack of engagement was due to lack of time, lack of knowledge about how to volunteer at school or support their child with school, as well as decreased knowledge of how to communicate with their child. The authors analysis indicated that fathers of children with deafblindness that were more involved with school had “more time, energy, and resources” (Pancsofar et al., 2020, p. 11).

Josilowski (2019) conducted qualitative research with teachers of students with Autism and identified benefits for students and families, while also
identifying challenges that educators may face. The research indicated that students felt emotionally supported and benefited from having both their teachers and family members actively involved in their education. Parents and were found to benefit by sharing and learning strategies, such as behavior supports, as well as information about what is being taught in the classroom. This home and school collaboration led to instruction that was designed to meet the specific needs and abilities of the child in the classroom. Josilowski reported challenges, such as lack of interest from parents and a lack of time in a teachers already busy schedule to establish a home and school collaboration.

There is a need for more research that examines the home and school collaboration of students with visual impairments and deafblindness and their families. Below are some strategies to support educators with engaging families to strengthen and/or develop home and school collaborations.

**Involving Families**

**Strategy 1: Ask Families for Ideas and Feedback.**

The best place to start is talking with families and getting to know more about their interests and needs. One of the major findings from the Pancsofar et al. (2020) article was that many fathers of children with deafblindness identified that they did not have a lot of knowledge on how to communicate with their child and they needed more information to support their child with school. As educators, we
need to make sure to ask families what they need and/or want to inform the
information we share. This can be done anonymously through an online or paper
survey or it can be done through virtual or in-person conferences. Families will
have different comfort levels when it comes to sharing things that they need, so
you want to provide options for how families provide this information. This
feedback is so valuable and will allow you as an educator to design the resources
and supports to meet the individual needs of your students and their families
throughout the year.

To do. Create a survey that includes multiple choice and open-ended
questions that ask families about what types of resources and strategies they are
interested in learning more about. Remember to include a range of topics and
ideas, such as using assistive technology, reading with your child, and utilizing 3D
printed objects and tactile graphics at home. This is also an opportunity to ask
families about ways they would like to be involved with their child at school, in-
person and/or virtually. Open-ended response questions provide families with an
opportunity to share ideas and information that you may not have identified.
Include an additional section that asks families about the best ways and times to
communicate.
Strategy 2: Identify Community Partners.

Learning does not just happen at home and school. There are lots of rewarding and engaging ways for families to extend learning with their child outside of the classroom and into the surrounding community. One way that educators can support learning outside the classroom is by identifying community partners that have accessible options for engaging students and their families. Educators, this is a great way to explore community partners in your community for families and identify ones that can provide in-person and virtual support in your classroom. For example, I identified a local museum in my community that provided educator days for free. Educators could explore and learn more about the museum, museum resources, and ways that students are able to engage at the museum. Part of the museum was accessible for all children and encouraged children to touch, climb, and explore as they were learning. This is important information that you as an educator can identify and share with families, so they are aware of accessible places where their child is encouraged to touch and explore.

To do. Review your content and subject areas that you will be exploring during the school year. Complete a search within your community of community organizations, such as museums, parks, zoos, libraries, etc. Research virtual accessible resources as well as in-person opportunities for families. You want to do
the leg work for families and identify what the organization has to offer children with visual impairments and deafblindness, where it is located, potential options for public transportation, and how much it costs to attend. Many community organizations have family days that provide reduced priced options for families. I also recommend contacting the community organizations to identify ways they can partner and contribute to the home and school collaboration. By identifying a variety of community organizations in advance, you can share this information with families throughout the school year when you explore a specific topic connection in the classroom. Identify must see and explore experiences for families and highlight the areas of the community organization that provide accessible spaces, such as touchable exhibits and audio and braille resources and information. Parents will appreciate the time you spent identifying accessible experiences for their child, while also considering transportation and cost hinderances for families.

**Strategy 3: Identify and Share Resources and Strategies with Families.**

Now that you have asked families about areas they want more information about, identified ways that they want to communicate and engage at school, and identified community partners; it is time to identify and share these resources and strategies with families. Correa-Torres & Bowen (2016) identify some important online resources you can share with families of students who are deafblind and emphasize the importance of involving all family members, including siblings.
Make sure that you make this information accessible for all families, which means you will need to create different formats to share with families. Encourage families to provide feedback and share what they are doing and using throughout the year.

**To do.** Review the information you collected from families about how best to communicate with them. Use this information to inform the different formats for sharing information. Remember, you can involve your students in the creation of materials. Families will love having a personal connection to their child in this information. Examples of formats can be a newsletter (online and paper copy), a brochure, audio, and even video. Ask your students to create content and information that can be included, such as pictures, audio, braille and print captions, etc. to highlight their capabilities and connections to the classroom. I also encourage you to share the information in print and online, so that families can access websites, audio, and media at the click of a button from home. I recommend separating information to share throughout the year to highlight different themes you are exploring in the classroom, and also to highlight different topics that parents identified they want more information about.

**Strategy 4: Provide Opportunities for Families to Participate with their Child.**

Developing and strengthening home and school collaboration with families hinders on providing numerous varied opportunities to engage families in person and virtually. Think about opportunities that allow families to participate in their
child’s learning inside the school setting. For example, Dr. Karen Koehler and I worked with teachers of students with visual impairments (TVIs) and pre-service TVIs on a weeklong summer camp where the students designed a culminating event for their family members (Farrand, 2021). Family members, including parents, grandparents, and siblings, attended and engaged with their child in a student created accessible museum, where they shared what they learned and created throughout their time at the camp.

To do. Come up with a list of potential ways to engage families throughout the school year in volunteer opportunities and authentic learning experiences alongside their child. Remember most of these experiences for families can be done in person and virtually. Make sure to observe your school district’s policy when designing these opportunities. This can be a great way for parents to observe what their child is learning and ways that their child learns best, while also collaborating to make meaning with their child. You also want to plan professional development opportunities for families to learn more information about strategies and content that families identified as an area of interest or need. This can be an opportunity to bring in community organizations and resources that provide additional supports for families of students with visual impairments or deafblindness.
Strategy 5: Reflect and Share Best Practices with Colleagues and School.

Identifying best practices for involving families with learning is a great next step and allows you as an educator to reflect on strategies that worked and the circumstances that supported positive family involvement. You also want to consider expanding the home and school collaboration from the classroom to the entire school.

To do. First, make time to review resources and strategies that were utilized by families for supporting their child. You will want to review parent and student feedback about strategies and resources they used at home and why. I also recommend looking at resources and strategies that families did not use at home and consider challenges that families may have faced with access, content, or accessibility. Next, reflect on the various opportunities your provided for families to engage in person or virtually with their child and/or you at school. Examine what experiences promoted the most family involvement and why, and then look at what roadblocks families may have faced that hindered their involvement in certain events. Then, set goals for what you would like to accomplish in the future for strengthening current home and school collaborations and continue to develop new ones with future students and their families, as well as those families that you were unable to engage with the previous year. Lastly, find time to share your best practices, challenges, and future goals with your colleagues and administration to
take home and school partnership from the classroom level to the school level. This is a great opportunity to begin to think how you and your school colleagues can collaborate to identify best practices and ideas to strengthen home and school collaborations at the school level.

**Benefits of Involving Families with Learning at School and Home**

Educators that ask families about what they want to know more about and how they want to engage at school are able to personalize information, resources, and experiences to meet the varying needs of their families. You as an educator have expertise about how to make content accessible for children and you know quality resources that can support families in learning more about specific topics and ideas to support their child. Families will feel validated in being asked about their opinions and students will benefit from the support of their teachers and families at home and at school. Developing a strong home and school collaboration can increase student understanding of content in the classroom and reduce student anxiety, while also creating partnerships with parents to support learning outside of the classroom (Jосilowski, 2019).
References


Farrand, K. M. (2021, April). *Including families: Developing family school partnerships with dramatic inquiry and 3-D printing.* Presentation at the AERA Annual Meeting, Virtual, United States.


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For those who do not have a Facebook account, you can view our page by going to the following URL: https://www.facebook.com/pages/Division-on-Visual-Impairments-and-Deafblindness/248244976215
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