

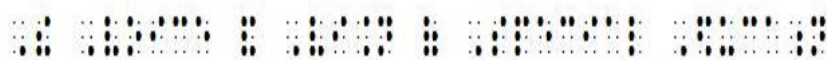
Fall 2022 Interveners Special Issue



Visual Impairment and Deafblind Education Quarterly

Volume 67, Issue 4

The Voice and Vision of Special Education



Cover photo description: A smiling female intervener sitting in a chair across a small desk facing her adolescent female student who is deafblind. They are communicating with both hands through tactile sign language while working on math. A colorful abacus and the laminated numbers one through 10 are on the desk in front of the student. The student has curly blonde hair in a ponytail and is communicating through tactile sign language with her intervener.

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Message from the Guest Editor

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By nature of their disability, children and youth who are deafblind don't have access to the natural flow of visual and auditory information, which is necessary for learning, communication and success in educational environments (Alsop et al., 2006). Helen Keller, perhaps the most well-known individual with deafblindness in the United States, had the constant one-to-one services of Anne

Sullivan who was trained in deafblindness and who provided Helen with clear and consistent access to information about people and things in her environment. This was critical to her ability to learn, communicate, develop a sense of self, and function in the world. Just as Helen Keller received this service from Anne Sullivan, so can children who are deafblind receive one-to-one services from individuals with training and specialized skills in deafblindness called **interveners**. Interveners are individuals who work one-to-one with children and youth with combined vision and hearing loss, and who have training and specialized skills in deafblindness. The role of an intervener in educational settings is to provide access to clear and consistent sensory information, facilitate communication and interaction, and facilitate social and emotional well-being for children and youth who are deafblind.

According to the most current National Center on Deaf-Blindness National Child Count (2020), there are **10,483** children and youth who are deafblind, ages birth through 21 years, in this country. Because deafblindness is a low incidence disability, it is not widely understood by educators and service providers. Educators are not generally trained to serve students who are deafblind, which results in many of these students not getting a free and appropriate public education. The National Child Count report states, "Interveners are key players in providing access to a child or youth who is deaf-blind. They provide access to

information, the environment, communication, and conceptual learning. While it is encouraging to see that 812 children and youth are receiving intervener services, it is also discouraging that this accounts for only 8% of the population” (Bull, 2020).

The role of interveners in educational settings is uniquely different from the role of classroom paraprofessionals. Unlike general classroom aides, interveners must have skills in deafblind intervention including communication methods, environmental access, sensory loss, deafblind instructional strategies, and methods to create independence rather than dependence. An intervener facilitates the student’s connection to others by explaining and modeling the student’s specific communication system, acting as a bridge to the world, and creating a safe and supportive environment that encourages successful interactions. Also, an intervener participates as an active member of the student’s team including attendance at Individualized Education Program (IEP) meetings, in order to contribute valuable day-to-day knowledge of the student (Alsop et al., 2007).

Currently, the majority of states and local school districts don’t recognize the term “intervener” and won’t support the designation of intervener services on a student’s IEP. As a result, many children and youth who are deafblind are being served by paraprofessionals with little or no training. In some cases, districts will support the services of a one-to-one aide, and perhaps agree to some type of training, but they will consider that person to be a paraprofessional who is paid and

valued accordingly. Systemically speaking, low wages, high turnover rates, and failure to consider interveners as key members of the educational team are chronic problems that have not been resolved with current practices. In some cases, parents have found themselves in conflict with their district to the extent that they have gone to due process in order to obtain intervener services from an appropriately trained intervener for their child.

Ultimately, the biggest losers in the current system are the children and youth with deafblindness who cannot learn and progress, because they don't have access to educational environments without the individualized support provided to them by trained interveners. The data on outcomes for students who are deafblind support the need for change in the delivery of services in the educational system. National statistics on outcomes for children who are deafblind in terms of employment and post-secondary education are dismal. However, there is emerging evidence that intervener services play a vital role in improving post-secondary outcomes for these students. In a study conducted in 2010, Petroff states:

This current study showed a surprisingly high percentage—nearly 40 percent—of youth that had an intervener or one-to-one assistant during the last year in school. While further analysis is required, certain areas of progress in the second group may be due to the presence of an intervener. Such findings would strongly suggest that there should be

increased attention focused on the use and training of interveners. (pp. 136-137)

On a national level, it's critical that intervener services be recognized in the Individuals with Disabilities Education Act (IDEA) as a related service for children who are deafblind, just as interpreter services are designated as a related service for children who are deaf or hard of hearing. Current legislation - the Alice Cogswell and Anne Sullivan Macy Act (H.R. 1959 & S. 813) - contains language that supports the addition of intervener services under the related services category in IDEA. Additionally, the Office of Special Education Programs (OSEP) recognizes the value of designating intervener services as related services in the IEP process. In an informal guidance letter dated August 2, 2018, Ruth E. Ryder, then the Acting Director of OSEP, addressed the question of whether intervener services could be considered related services, even though interveners are not specifically identified in the list of examples of related services in IDEA, by stating:

The Department's long standing interpretation is that the list of related services in the IDEA and the Part B regulations is not meant to be exhaustive and may include other developmental, corrective, or supportive services, if they are required to assist a child with a disability to benefit from special education in order for the child to receive a free appropriate public education (FAPE). ... If the IEP Team determines that a particular service,

including the services of an intervener, is an appropriate related service for a child and is required to enable the child to receive FAPE, the Team's determination must be reflected in the child's IEP, and the service must be provided at public expense and at no cost to the parents. 20 U.S.C. §

This journal is the first of its kind to be dedicated exclusively to interveners and their role with individuals who are deafblind. We are indebted to the *Visual Impairment and Deafblind Education Quarterly (VIDBE-Q)* for this opportunity to inform, educate, advocate, clarify, support, and validate the intervener practice as a critical individualized support for children and youth who are deafblind.

This edition is intentionally organized to begin with the children and youth who have combined vision and hearing loss, and who are at the center of all we do. It begins with a real life example of how intervener services can work successfully in the educational system, as described by IEP team members. The journal then progresses naturally, as articles are dedicated to a deafblind consumer, to families of individuals who are deafblind, to interveners themselves, to state deafblind technical assistance projects and the national technical assistance center, to higher education intervener training, and finally, to advocacy efforts. It was not possible to include all of the information that exists about interveners in this journal, but efforts were made to involve as many stakeholders as possible, with 37 authors contributing their perspectives and experiences to this edition.

In spite of many efforts over the past approximately 40 years, to establish interveners as an accepted practice for children and youth who are deafblind, there is still a general lack of understanding about what interveners do and a lack of acceptance of the importance of their role. I hope that, after reading this journal, readers will come to believe as passionately as I do, that the intervener practice needs to be more recognized, more accepted, and more implemented with children and youth who are deafblind as part of their right to access, as mandated by IDEA. Over and over again, I've seen the miracles that occur when children and youth who are deafblind have intervener services. It works! We must increase our efforts! These children can't wait!

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President's Message

Kathleen Stanfa,
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I am happy to speak to you in this special issue of *VIDBE-Q* on interveners, a timely and exciting topic. DVIDB has long championed the needs of students who are deafblind through competency development, conferences, workshops, and publications. In 2014, the Division, then known as the Division on Visual Impairment, adopted Deafblindness in its name, helping move forward the recognition of the unique needs of students who are deafblind and the professionals that serve them.

A special issue is great way to start the conversation on a particular topic in the field and in no way aspires to cover the entire area of the field in one issue. I encourage you to continue the conversation about interveners that will be started in this special issue. A better understanding of the role of interveners as well as a deeper discussion about services for students with Deafblindness is essential to advance the field. I hope you will find this special issue valuable.

I am getting excited for convention, and I hope that you will be able to join us in [Louisville, KY March 1-4, 2023](#). Our annual convention is a time to learn, network, and get inspired. DVIDB is working to put together wonderful sessions, both in-person and virtual, with fantastic speakers from across the country. We are also planning a virtual pre-convention workshop to be offered on February 24, 2023, from 9:00 am – 4:00 pm, which I hope you will attend. Pre-convention will be available free to members and for a fee to non-members. ACVREP credits will be available for participants. The focus of this year's pre-convention is English learners with visual impairments, a topic that is of critical importance to our field in the 21st century.

Please enjoy this special issue and be sure to check our website for information on the CEC 2023 convention and DVIDB's pre-convention workshop.



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Meeting the Needs of a Student with Deafblindness in the Academic Classroom: A Model That Works

Erica McKinney,

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The success story described in this article revolves around a dynamic young lady named Ivey Sirmans. Ivey is a sixteen year old student currently attending ninth grade at a high school in rural Georgia. She receives special education services in the areas of deafblindness and speech and language impairment. Ivey is a complex communicator. Ivey utilizes and benefits from different modes of communication. Her expressive means include vocalizations, body language, English-based signs (hand-under-hand/tactile, modified, coactive), some tactile symbols, and braille (Ivey will dictate what she would like to braille, by signing, and the braille itself is completed with hand under hand assistance). For receptive language, Ivey receives input through spoken English, English-based signing (hand-under-hand/tactile, modified, coactive), tactile symbols, and braille. She has

a one-to-one intervener to help address her communication and learning needs.

Ivey's intervener is Mrs. Stephanie Garrett.

Ivey is currently served in a self-contained setting primarily for students with Autism. The focus of this setting is very much academic. The majority of her classroom peers are verbal communicators working on the general education curriculum. In 2016 and prior, however, she was in a self-contained classroom primarily for students with severe and profound disabilities. The majority of her peers in that setting were non-verbal, and they were working on an adapted curriculum. Ivey's Individualized Education Program (IEP) team attempted to give her access to verbally communicative peers through many different avenues (inclusion for one class period a day, reverse inclusion where peers without disabilities would come to her for one class period a day, etc.), as Ivey is highly motivated by peer interaction. However, none of the options attempted gave her consistent access to verbal peers throughout the school day. Ivey's IEP team at that time determined that she needed to be in a setting with verbally communicative peers for the entire school day, so that she would have the consistent motivation she needed to increase her receptive and expressive language skills.

It was at this point that I met Ivey. Please allow me this opportunity to introduce myself. My name is Erica McKinney, and I have been an educator for eighteen years. I currently work as a teacher of the visually impaired, orientation

and mobility specialist, and teacher of the deaf/hard of hearing. In the Fall of 2016, when Ivey transitioned from the severe and profound setting to a self-contained classroom for students with mild intellectual disabilities, she came into my classroom. I had worked in the classroom for twelve years prior to Ivey coming, and in those twelve years I had never encountered a student with deafblindness. In fact, she was the first student with any form of sensory loss that I had ever had the pleasure of meeting. I considered myself to be a veteran teacher. I was comfortable with the IEP and eligibility process, I was skilled in selecting instructional strategies and materials to meet the needs of my students, I worked well with colleagues and families, and I had multiple degrees in the field of special education. None of this, however, prepared me to meet the very specific needs of a student with deafblindness.

As per the typical model in our county in Georgia, as Ivey's classroom teacher, I was also her case manager. This means that I was responsible for coordinating with service providers, communicating with parents, overseeing the implementation of her IEP, and ensuring that due process procedures are followed. For Ivey, this also involved overseeing the work of the intervener, since interveners work under the supervision of a classroom teacher or other person responsible for implementing the IEP. I thankfully received support from many in the field of deafblindness (our state DeafBlind project, Linda Alsop from Utah

State, and Dr. Wendy Sapp) during this transition period. Even still, it was a huge learning curve, and I cannot help but feel that Ivey's growth was inhibited by this time spent in bringing me up to speed. I was in the classroom teacher/case manager role for Ivey for two school years, and then I transitioned to the role of her teacher of the visually impaired. This meant a new case manager for Ivey, which meant another year of transition and bringing the classroom teacher up to speed. It was frustrating to watch the transition unfold from my new position, because I could see that Ivey was once again in a place of limbo, which meant her educational programming was not optimized. When there is no clear "hub," or when the "hub" is not knowledgeable about the student's needs, it can be a struggle for team members to know what specifically they are expected to contribute. Mrs. Stephanie Garrett, Ivey's intervener, shared that "when the classroom teacher was the case manager I always felt caught in the middle between team members. This in turn caused tension between myself, teachers, related service providers, and the parents. This was, in my opinion, caused by the lack of understanding of the role of the intervener as compared to that of a paraprofessional, as well as the lack of knowledge in deafblind practices."

It was in this midst of yet another transition struggle that Ivey's parents met with central office level staff to request a case manager for Ivey who was familiar with her IEP and her needs as they relate to deafblindness. A case manager for a

student like Ivey should be able to provide consistency and bridge gaps when transitioning, so that her educational programming is seamless and not affected with a loss of momentum while the adults around her are learning how to meet her needs. For Ivey, that person was determined to be her teacher of the visually impaired. I was chosen because, as her teacher of the visually impaired, I would follow her from classroom to classroom or campus to campus and would thus be a consistent team member familiar with her IEP and educational needs. Given the training and support that I had received as her classroom teacher, I also had knowledge of deafblind practices. For other students and teams, this case manager may be a teacher of the deaf/hard of hearing or another team member who is likely to be consistent across setting and placements.

Having one designated person to oversee the IEP makes it easier for team members to know their roles and expectations. It is important for the case manager to have knowledge of deafblind practices, because other disciplines, even sensory loss programs including Visual Impairment (VI) specific or Deaf Hard of Hearing (DHH) specific, do not adequately address the needs in deafblindness. There simply is not enough coursework embedded in these VI or DHH programs for this low incidence area. Each of these disabilities separately impacts the child's development in a fairly typical pattern when they are the ONLY disability affecting the child. For example, a child with a visual impairment may experience

motor delays, delays in cognitive and concept development, and deficits in social skills due to not having visual access to faces and body language. When a child has multiple disabilities, these impacts begin to layer in ways that may not be typical for a child who has ONLY vision needs or ONLY hearing needs.

Therefore, these children will have much more complicated needs and cannot simply be dissected by area of disability. These children need service providers who can come to the table prepared to lap and overlay their services and expertise in order to address the needs of the WHOLE child (not JUST their vision needs, as vision also affects communication and motor development, and not JUST their motor needs, as their motor skills are impacted by a loss of auditory and visual cues, and so on). The best place to start is the document that should be the guiding force behind the student's needs-- the IEP. Ivey's IEP specifies that "Due to the intricately woven nature of Ivey's goals and objectives, ALL team members are to participate in supporting each of the goals and objectives in the IEP rather than trying to dissect them by area." When the IEP itself is structured to allow for collaborative efforts from all team members, the hardest part of the work is already done.

Ivey's IEP clearly lays out expectations for each of her team members. Because preparing materials to meet her needs requires time, her IEP specifies that lesson plans from the classroom teacher be available to team members two weeks

in advance. Once these plans are available, Ivey's intervener and service providers can begin to make adaptations to ensure that the materials are accessible for Ivey.

Questions to consider and team member contributions may include:

- Does Ivey need tactile materials (Teacher of the Visually Impaired (TVI))?
- Will she need to know specific vocabulary and/or signs (Deaf Hard of Hearing Teacher (DHH), Speech Language Pathologist (SLP))?
- What motor skills are needed to complete the tasks we're asking of her, and what supports will she need (Occupational Therapist (OT), Physical Therapist (PT))?
- What conceptual information may she need support with -- either cognitive or positional (TVI, Certified Orientation and Mobility Specialist (COMS))?
- Who is fluent in her communication and conceptual needs and can deliver the information to her (intervener)?
- What specific considerations need to be given to Ivey's needs from a deafblind perspective (deafblind specialist)?
- How can these skills be generalized and carried over into the home setting (parent)?

Once the plans are adapted for Ivey's needs, they are then implemented by the intervener with oversight from teachers and service providers as needed. Data

is collected by all, and if she is not making progress, the team can determine what support she will need to be successful next time.

Ivey has made TREMENDOUS progress under this new model. She independently contributes to conversations without prompting, her signing vocabulary has increased drastically, and she has made unbelievable academic gains as well. Yes, there are still hiccups with transitions (and likely always will be), but not to the extent that there were when training a new case manager was part of the transition. I firmly believe that having a consistent case manager who is knowledgeable about Ivey's needs, has led to continued social and academic momentum for her, which has allowed her to make a significant amount of progress.

Ivey Sirmans, High School Student

The following is a conversation with Ivey. Mrs. Smith (a teacher) is asking her questions, and Erica McKinney is interpreting.

Mrs. Smith: Do you like Mrs. Stephanie working with you at school?

Ivey: I like Mrs. Stephanie working with me at school.

Mrs. Smith: Do you like to talk to your friends at school?

Ivey: I want to talk to my friends at school.

Mrs. Smith: Can you tell me something else about high school you like?

Ivey: I like chorus. My favorite is foods class. I like to count in math with Mrs. Stephanie. I like going to class and reading books. My friends go to class with me.

Mrs. Smith: Have you made new friends?

Ivey: I have new friends in chorus and foods class. I have more friends at school.

Mrs. Smith: Is there anything else about school or Mrs. Stephanie you want to say?

Ivey: Mrs. Stephanie goes to school with me. Mrs. Stephanie helps me. I want Mrs. Stephanie to go to school with me.

Mrs. Smith: Mrs. Stephanie has an important job. Do you know what her job is?

Ivey: Mrs. Stephanie helps me. Mrs. Stephanie helps me talk to friends and teachers. I like people talking to me.

Mrs. Smith: Anything else you want to say?

Ivey: John gave me a yellow flower.

Mrs. Smith: You did good writing! Mrs. Stephanie is going to send it to Mrs. Linda. Mrs. Linda will send it to the world!

Ivey: I am excited."

On another day, as a follow-up to the conversation above, Erica McKinney and Stephanie Garrett sat down with Ivey to ask some additional questions.

Mrs. McKinney: How do you feel when Mrs. Stephanie is not here at school with you?

Ivey: I feel sad.

Mrs. McKinney: Why?

Ivey: Ms. Stephanie helps me learn and talk.

Mrs. McKinney: How do you feel when someone can't sign to/with you ?

Ivey: I feel sad.

Mrs. McKinney: Why?

Ivey: I want to sign to my friends.

Mrs. McKinney: You have Mrs. Stephanie who's with you all day and your friends don't have a Mrs. Stephanie. Do you feel Mrs. Stephanie gets in the way?

Ivey: No, I like Mrs. Stephanie with me.

**Stephanie Garrett, Deafblind Intervener Specialist, Floyd County
Schools, Rome, Georgia**

Meeting Ivey for the first time in person, I was excited and scared at the same time. I had known about Ivey since the day she was born. Her older brother was in my classroom in a weekday preschool where I taught, and I followed Ivey's

story through her mother's BlogSpot. One day I was attending the Special Olympics at the school where Ivey's brothers attended, and I briefly met Ivey there for the first time in person. A few months later, I was asked to be Ivey's one-on-one paraprofessional for the next school year. Of course I accepted, and was later asked if I would become Ivey's intervener. I completed the Utah State University Intervener Training Program and have since become a Nationally Credentialed Deafblind Intervener Specialist (DBIS).

As Ivey's intervener, I have been in several classroom settings. When Ivey was in primary school, she was in a self-contained classroom with non-verbal peers. With Ivey's vision and hearing loss and deafblind-specific needs, we had an area in the classroom dedicated to Ivey that was separate from the other children in the classroom. We essentially had a classroom inside of a classroom, that gave Ivey access to her instructional needs, but limited access to her peers. The teachers had no knowledge of deafblindness or the role of the intervener, and this created tension between the teachers and me at times.

When Ivey transitioned to a new school, she was placed in a mild to moderate classroom with verbal peers, and we were welcomed in by Erica McKinney (who is now her case manager). There were many new opportunities for Ivey to interact with peers and teachers. Ivey began flourishing and making friends. At one point, Mrs. McKinney left the classroom, and we were once again

facing the same issues as before with isolation and having a classroom inside of a classroom. I remember one day when all of the tables were set up with fun activities for the class. When I asked the classroom teacher what we were doing that day. I was told “Ivey can just chill out in her area while we do this activity”.

Image 1



Image Description: A smiling Ivey sitting in her mobility chair with her legs crossed. Ivey has blonde curly hair put up in a bun.

When Ivey transitioned to Middle School, Mrs. McKinney became Ivey’s case manager. Having the Teacher of the Visually Impaired (TVI) as the case manager, was new for the entire team. It was such a smooth transition, and there was no tension between the classroom teacher and me. Mrs. McKinney was also in

charge of making lesson plans, and with her previous knowledge of Ivey, the lesson plans were adapted to fit Ivey's instructional needs.

Having Mrs. McKinney as not only Ivey's case manager, but also as her TVI and Orientation and Mobility (O&M) instructor was a game changer. I had one person to whom I could go instead of 4 or 5 different people. Having this stability and having support from Mrs. McKinney, I could focus on Ivey's instructional needs. We were blessed to be part of a classroom where she was accepted and included. She made amazing progress both academically and socially. Mrs. McKinney was a bridge between teachers, staff, and students, which provided for many new experiences for Ivey.

Mrs. McKinney has been such a great support for me as the intervener. This year, Ivey moved to the high school, along with the friends she made in middle school. She loves the high school life with so many new things to explore. Ivey is in chorus with regular education peers, she's taking a food class, and she's enjoying making new friends.

**Mark Dulaney, Special Education Coordinator, Floyd County Schools,
Rome, Georgia**

The role of the special education coordinator is to act as a resource and a support person, for both school staff and for families. In the case of Ivey, it is my responsibility to help ensure that all team members are equipped to fill their roles

in Ivey's educational program. While Ivey's team has been significantly "streamlined" in the past couple of years, there are still a large number of people directly involved with Ivey, and it is my role to help facilitate the efficiency and quality of the delivery of services. Most often, I communicate directly with Ivey's case manager. I also work with Ivey's school-based team and our Special Education Director on questions of resources that may be needed. Finally, should a conflict or question arise regarding Ivey's school needs, I stand ready to help facilitate a resolution.

Gwen Sirmans, A Parent's Story

My daughter, Ivey, is a 16-year old student with deafblindness in Rome, Georgia. I am Gwen Sirmans, best known as "Ivey's mom". I am contributing this article to highlight the development of Ivey's Individualized Education Program (IEP) team. And though it has been quite a journey, Ivey, because of her supporting team, is a success story. However, it is here, I must emphatically emphasize that I am a parent. One might be surprised at the events that unfold for parents behind the scenes of classrooms and IEP meetings. What you will read are clips of my experiences with having a child with deafblindness in a public school setting and my involvement as a member of Ivey's IEP team. So, let us begin.

Let me first describe my role as a contributing member of Ivey's IEP team. Educators dream of a parent like me. I know this because, once upon a time, in

another life before my daughter, I too was an educator. I am engaged in the activities of the school and classroom. I get to know teachers and service providers. I ask questions. I am the involved parent who understands my daughter's diagnosis. Most importantly, I am the parent that will go to bat for the educators on Ivey's team. Nevertheless, as with all good things, I come with a price.

I am the vocal parent with exceptionally high expectations. I am unafraid to call an IEP meeting in the middle of the year. Not only that, I can read an IEP and bank on measurable goals. I request all communication be in writing. Last but not least, I am familiar with the laws under IDEA and expect IDEA to be followed. Most people politely describe me as "transparent" because of my willingness to be frank when it comes to the topic of education and deafblindness. I have never, let me repeat, never, been willing to burn a bridge unless there was no other recourse left in an arsenal of options. My philosophy is very simple, "*We draw more flies with honey than vinegar.*" For any IEP team wanting to ensure student success, an involved parent is the key.

Actually, there is one more important component to include in this story -- my husband, Matt, aka, the voice of reason. He is my sidekick. As the handsome sidekick, his role is to remain calm, play the devil's advocate, sit across from me in

IEP meetings so we can read each other's thoughts on comments made, and ensure that we approach conflict using honey, not vinegar.

Image 2



Image Description: Ivey and Gwen are side-by-side smiling into the camera.

In a separate section of this article, Ivey's case manager, Mrs. Erica McKinney, dives into detail covering Ivey's modes of communication, academic gains, and the components of her IEP. Erica provides a model of her role as the case manager over Ivey's IEP. Readers will also hear from Mrs. Stephanie

Garrett. She will expand on her role as Ivey's intervener. I will weave the three stories into one, using the thread of a parent.

Throughout this article, I will speak pointedly about my role as a parent and as a key member of Ivey's IEP team. I have found that by applying IDEA to the needs of my daughter, her academic success is without limitations. As a parent, I also have the freedom to lead Ivey's IEP team down uncharted paths, even when administration does not agree. I am the one person on Ivey's team that knows her full story, every intricate detail. I started this journey at her birth and will remain with her long after everyone in the school system is gone.

With that, let me introduce my daughter, Ivey. Ivey was born in April of 2006. The series of events that unfolded during Ivey's birth, with the exception of her being a baby girl, was unexpected. Ivey emerged with a cleft lip and palate. After she was whisked to the Neonatal Intensive Care Unit (NICU), it was discovered that Ivey had bilateral anophthalmia (no eyes). From that moment forward, Ivey's list of medical complications compounded. Within the first day, we were told to be prepared, because Ivey would most likely not live through the night. Three weeks into Ivey's NICU stay, we had her transported down to the hospital chapel and baptized, while still preparing for her never to come home. Yet, she defied the odds. Sixteen years ago, Ivey decided to live. Today, I call that need to defy odds - her stubborn streak.

Ivey has a rare genetic diagnosis that results from a deletion to the q-arm of her 21st chromosome. As a result, Ivey is deafblind, has agenesis of her corpus callosum, an obstructed airway, heart defect, epilepsy, and is tube fed. For the first two years of Ivey's life, she had a tracheostomy. She has endured major craniofacial surgeries. She is a patient of the Medically Complex Care Program at Children's Healthcare of Atlanta (CHOA) and has spent a large portion of her childhood within the walls of Scottish Rite.

Upon exiting the NICU, Ivey entered into Babies Can't Wait and Georgia PINES. At the age of three, Ivey transitioned into the Floyd County School system in Georgia. She has attended McHenry Primary School, Alto Park Elementary, and Model Middle School. Currently, Ivey is a Freshman at Model High School. Here, I must add, we have gained much experience navigating the trials and tribulations of transitions.

Through each transition to a different school, new classroom teachers/case managers, service providers, and administrators appeared. In almost all instances, none had taught a student with deafblindness. In the primary and elementary schools, through each transition, no matter Ivey's progress, we were thrown back into Deafblindness 101. Through each new transition, the brakes were applied, and Ivey was forced to sit idle until the classroom teacher and any new team members were up to speed in the basics of deafblindness. No matter where Ivey was in her

academic advances, all gears grinded to a halt. Ivey's education was impeded due to educators lacking the experience and training needed for a student with complex learning needs due to multiple disabilities, including deafblindness.

It is important to note that as Ivey transitioned from Babies Can't Wait to McHenry Primary School, we secured a one-to-one paraprofessional to assist Ivey in the classroom. The paraprofessional faced incredible resistance from many of Ivey's service providers and administration. And even though the Georgia Sensory Assistance Project (GSAP), Georgia's deafblind project, was coming to the school periodically to train the paraprofessional and staff, it was not enough to keep up with Ivey's pace. In addition, the paraprofessional, whom we highly respected, was not the right fit for Ivey. With the assistance of Linda Alsop and GSAP, midway through Ivey's time at McHenry Primary, we made the official push for an intervener.

It is at this point that Mrs. Stephanie Garrett entered Ivey's world. Stephanie served as Ivey's one-to-one paraprofessional while she completed the Intervener Training Program through Utah State University. The moment I signed my name to the IEP upon Stephanie completing her coursework to be a nationally credentialed intervener, angels sang with joy and trumpets sounded. That day, the key players at the IEP table all understood the significance of the moment. Yes, there were even a

couple of individuals at the table who were dragged to this moment kicking and screaming. Yet, we were all there - together - to celebrate the moment.

Stephanie was a first for Georgia, and a feather in the cap of Floyd County Schools. She was one of two interveners to complete coursework through Utah State and be employed in a public school in the state of Georgia. We quietly made history and progress for all to follow in our state on that miraculous day.

Nonetheless, our joy was short-lived. We bumped our way through the remainder of McHenry Primary School and on into Alto Park Elementary. There was a brief two-year stint during elementary school when Mrs. Erica McKinney resided as the classroom teacher/case manager. Then once again, as Erica exited the classroom, Ivey transitioned to a new teacher/case manager where we bumped along a little longer. To say the least, our bumps were turning into deep bruises. The repeated cycle back to Deafblindness 101 was making greater waves in Ivey's progress.

Ivey's IEP clearly defines the role of an intervener. We based the intervener description from the handbook Interveners in the Classroom Guidelines for Teams Working With Teams Who Are Deafblind, which can be found on the website intervener.org. I spoke often with Linda Alsop. I also relied heavily on the knowledge and guidance of Dr. Wendy Sapp. By using their expertise, we molded Ivey's IEP to support the intervener and reflect best practices in teaching

specifically to Ivey's dual sensory loss from the context of IDEA. Still, there was constant conflict between Stephanie, new classroom teachers, and service providers (and at times, an administrator).

Classroom teachers were not filling their roles and responsibilities as designated in Ivey's IEP. Stephanie was attempting to apply her knowledge of deafblindness to Ivey's daily activities. Depending on the classroom teacher, Stephanie was often left to her own accord to figure out how to address accommodations within the classroom and modify materials. This configuration often left Ivey and Stephanie isolated and alone, literally detached, from the rest of the class. The alternate option was a classroom teacher who refused to acknowledge Stephanie as an intervener, expecting Stephanie to carry out the responsibilities of a paraprofessional, in addition to her role as Ivey's intervener. It was a hostile and resentful environment, not suited for learning. One classroom teacher literally said to me in a meeting, "*She's just a glorified parapro.*" This came from a classroom teacher who started her career in special education as a paraprofessional. In that moment, enough was enough. I had a daughter in need of serious and competent educators.

Even with the intervener designation in the IEP, Stephanie was constantly wedged between a school system and parents. She was being pushed by me and the inner workings of Ivey's IEP to execute a job, while simultaneously being rejected

by a majority of her IEP team. Let us not forget that Ivey was not being served appropriately.

This petty nonsense circling the role of the intervener has been a common denominator in a majority of our IEP meetings. When filtered out, the outcome is an IEP that is not being executed due to team members refusing to comply with the IEP. That is against IDEA. This is where I, as a parent, come into play, and schools find themselves in a very gray area.

I have sat through too many heated meetings, with Ivey's IEP in hand, reciting the role of the intervener. One specific example is as follows: We had a meeting with a service provider who actually said, *"I have a degree and have been doing this for over 20 years. She (the intervener) doesn't even have a college diploma."* And when I asked the service provider, *"Okay then, in those 20 years, how many students have you worked with, like Ivey, who has bilateral anophthalmia (no eyes) and hearing loss, is nonverbal, uses a wheelchair, has seizures, and has an intellectual disability? And, Ivey communicates using touch cues, tactile symbols, and tactile sign language. Do you know Ivey's touch cues and how to use the tactile symbols? Do you sign?"* Her response was, *"Ivey is my first student 'like this'. No, I don't know the tactile things and I don't sign. But, I don't like being told what to do by 'her'."*

Let me be very clear. Nowhere in Ivey's IEP does the role of the intervener include *"telling others what to do "*. The intervener's role is quite the opposite actually. The IEP does clarify Ivey's communication modes. Consequently, if a classroom teacher or any service provider cannot communicate using Ivey's modes of communication, then the intervener is to be present to facilitate communication and to assist in accommodations to make lessons accessible. When a teacher or service provider decides they do not like working alongside the intervener, then Ivey no longer has access to communication. Not having access to communication is a very big no-no in the words of IDEA. Each and every time this general recap comes from the lips of a teacher or support staff pertaining to issues revolving around Stephanie's role as the intervener, I look to whoever is taking notes during the meeting and ask, *"Did you write that down? I will want a copy of the meeting notes before I leave today."* Documentation is everything when basing your child's special education career around IDEA.

This same general conversation became redundant during IEP meetings through a succession of years during the primary and elementary school years. Similar words emerged from classroom teachers, vision teachers, deaf and hard of hearing teachers, and speech-language pathologists. At times, the conversation was actually supported by various administrators, and we were pushed to the point of involving the school board.

As mentioned, in the midst of the ebb and flow of animosity, for a brief moment during Ivey's time at Alto Park Elementary, the heavens opened up once more and the angels sang as Mrs. Erica McKinney entered Ivey's world as her classroom teacher. For the first time, the role of the intervener and Ivey's IEP was supported, as written, by the classroom teacher/case manager. Erica was a veteran teacher with much experience under her belt, but she had not taught a student with deafblindness. Erica embraced the challenge of pursuing Ivey's sensory losses and multiple educational needs, as she navigated the newness of the role of the intervener in her classroom. After two years, Erica left the classroom. She would reemerge later as Ivey's TVI.

Then, in preparation to transition from Alto Park Elementary to Model Middle School, we hit a very hard, and hopefully final, brick wall. Transition plans, which excluded the IEP team, swirled with contentious meetings with central office administrators. The reason -- a special education administrator made unilateral decisions without consultation or confirmation from the IEP team, including the parents. At the behest of this administrator, decisions were being made from the determination of Ivey attending middle school in our district, classroom placement, ability to access communicating peers, and renewing service providers under contract, to the now quintessential issues centered around

transition and the intervener. The superintendent had to step in to resolve matters. Because we utilized IDEA, all issues were reconciled in Ivey's favor.

Transition plans from within the IEP team from Alto Park Elementary to Model Middle School became more cohesive with less disruption to Ivey's academic progress. We removed the responsibilities of being the case manager of Ivey's IEP from the classroom teacher. We requested that Erica, the teacher of the visually impaired, take over the duties of the case manager. This adjustment allowed someone with prior knowledge of deafblindness and Ivey's specific educational needs to be at the helm of her IEP. A new special education director was put into place during this time, and made it all possible. By him simply saying, "Yes", everything fell into place. As mentioned, Erica reemerged as Ivey's teacher of the visually impaired, and became the case manager over Ivey's IEP. Having one person to oversee the IEP consistently, provided stability to the team as a whole.

This year, the transition to Model High School has been near seamless. A new special education administrator resides. Still, communication between the team and administration is open and encouraged. As the case manager, Erica facilitates collaboration between classroom teachers, service providers, and the intervener. For the first time during transition, we did not travel backward into the throes of Deafblindness 101. Gears kept grinding. Within the new framework,

teachers and service providers work together with the intervener to ensure that materials are prepared in advance and accommodations are considered across all disciplines. Stephanie is no longer wedged between me, the classroom teachers, and administration. Floyd County recognizes Stephanie as an intervener. Erica has become the thread needed to weave together the intervener, teachers, administrators, and *parents*.

With the case manager residing as a consistent person, one less likely to change during transition, the classroom teacher has headroom to gain experience in developing classroom instruction geared toward a student with deafblindness. Assignments are dispersed to the IEP team in advance for consultation. Space is available for the intervener to execute her responsibilities, with support from the IEP team. Having a person familiar with sensory loss overseeing the IEP, helps the team to navigate Ivey as a whole student. We have successfully assembled a model IEP team with a framework that can be replicated for future IEP teams of students with deafblindness.

Today, Ivey exceeds all assumptions based on her medical history. She loves going to school. When I ask her (using tactile sign language), “*What do you like about school?*,” she typically has one response. “*My friends*. Ivey is quick to tell Stephanie she is “*finished*” working, and she’d rather “*talk*” to her friends. Ivey is proof that interveners are a necessity for students with deafblindness. Without

Stephanie, Ivey would not have developed sophisticated communication. Ivey's IEP team is a shining example of collaboration and of a team bringing the best versions of themselves to the table. The frustrations of the past are a mere reflection in the rearview mirror. I am honored to be a part of *this* team.

As for my thoughts on our history with Floyd County Schools, I would not want Ivey in any other system. It takes pressure and time to make diamonds. The team that has emerged is full of diamonds. Our family truly loves the Model School District. Behind the scenes, it has often been relentless. And in all honesty, exhausting. But, there is always a silver lining. My silver lining is Ivey and her successes. The best part is I am getting to be “Ivey's mom” for a bit, not *the* parent. Because of persistence on our part as parents, Ivey is surrounded by educators with a purpose. She is supported by administrators who want her to succeed. Actually, they expect her to succeed.

In honor of one of Ivey's favorite songs, I can best explain our journey in terms of a rowboat. There have been team members who stayed on the dock and never got in the boat, and others who jumped ship mid-journey. On occasion, I have been known to push a team member or two overboard. These days, we are all in the same boat, a team, together, rowing to the same destination with Ivey as our captain.



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Andrew's Perspectives as a Deafblind Consumer

Andrew Prouty,
Deafblind Consumer

Hello! My name is Andrew Prouty, I am deaf and have low vision, caused by CHARGE syndrome. My parents have been my best supporters. They wanted my life to be as rich and fulfilling as my two siblings. This required full access to communication and to the world.

One of many things they did was learn American Sign Language (ASL), so they could communicate with me. (Unlike many parents who tried to make their deafblind or deaf children learn how to speak orally, which can cause language deprivation.) My parents also pushed schools to provide me access to deafblind teachers and interveners. In this article, I will discuss my perspectives on interveners.

Interveners were absolutely critical to me experiencing the world as much as possible. I had interveners before the term became popular in the United States. My parents met and became friends with the Canadian educators John and Jackie McInness, who wrote the book "Deaf-Blind Infants and Children: A

Developmental Guide”. The McInnesses motivated my parents to do all they could to advocate for me, and that included interveners. My family moved often, searching for appropriate educational and medical services for me. By the time we arrived in Minnesota, I was 7 years old and had already lived in four states.

I got my first intervener when I was 2 years old. In preschool, Donna worked with my teachers to support my sign language and mobility. She taught me how to move around the classroom and school building safely, and helped me with my balance. She reinforced what the physical therapist, occupational therapist, speech therapist, vision teacher and Orientation and Mobility (O&M) instructor worked on.

Image 1



Image description: Andrew, a light skinned toddler, is holding his left hand on the railing of a small sized set of stairs used for physical therapy. Looking at his intervener, he wears glasses, grey overalls and a striped long-sleeved shirt. Kneeling and at eye level is his smiling intervener signing hand as to hold the railing. The intervener has shoulder length brown curly hair.

I met one of my best interveners in third grade when my parents convinced the IEP team I didn't have the same access as other kids. At that time, I was in a neighborhood elementary school that included a program for deaf children. Most of my classes were with deaf kids, but we were also mainstreamed for a few classes.

Carol was an interpreter who was trained to meet my needs. She helped me with many things during my elementary and middle school years. She signed clearly and at a distance I could see. She copied on a small white board anything teachers wrote on the chalkboard and copy-signed what everyone in the class signed. If a teacher or the principal stood in the classroom doorway and signed something, Carol would sign it for me. She made me be aware of my surroundings and people in it. She helped my vision teacher with technology like a CCTV. When my classmates were watching a captioned video on the ceiling TV, they set up my own TV monitor at eye level and right in front of me. Carol reinforced daily what all the other specialists did weekly. For example, my O&M instructor was great because she used ASL, but when she wasn't around, Carol encouraged me to use my monocular for seeing long distances and for crossing streets carefully. Before Carol, I missed a lot of what happened in my classroom and environment.

When I first met Carol, I was unaware of her role as an intervener, and I didn't understand why she did what she was doing. So I ignored her, which made one of my teachers angry at me. I was confused as to why I was the only child getting this kind of treatment. With help from my parents, I eventually understood why she was helping me. For example, I realized that I couldn't see small details on the chalkboard, as well as teachers' and my classmates' sign language. Thanks to the access Carol provided, I was able to learn in a classroom of deaf kids. I didn't even realize I was missing anything until I got an intervener.

During my high school years things changed. I transferred to a deaf program in another school district, but Carol didn't come with me. Since I was very accustomed to an intervener, I was confused and upset about the changes I faced, including no interveners in high school. For example, when I misunderstood or missed something, I directly asked an interpreter for clarification. She made me ask the teacher. I was very confused and upset because I assumed that interpreters were like interveners. (I didn't fully understand the different roles of interveners and interpreters yet.) Eventually, the district had some training on interveners, and I got an interpreter who was interested in learning about deafblindness and my needs. And, just like Carol, she helped me with note taking, and writing down what the teachers wrote far away on the chalkboard.

Because there were no trained interveners in my high school years, I began to learn to advocate for myself. For example, I requested and sometimes insisted that teachers provide me with my favorite ASL interpreters and note takers, because they understood my needs. I was able to graduate from high school with honors, thanks to my interpreter and my ability to advocate for myself. I became more self-sufficient through my college years. (More on that later.)

Apart from school, I also had three community interveners. In Minnesota, we are lucky to have state funding for a home and community intervener program through DeafBlind Services, Minnesota. These community interveners included MaryJo, Kevin, and Anna. I'll discuss each of them below from my childhood to teen years.

MaryJo, who was in an interpreter training program, was my first community intervener when I was 12 years old. She took me out into the community, including stores such as Target. We made several trips to learn the layout of the store together and I learned that many Target stores are arranged the same way. For example, after we learned the layout of the store and when my shoelaces needed replacing, we spent at least an hour learning all about shoelaces and where to find them in the shoe department. MaryJo showed me things like the different sizes, styles and colors available. We discussed everything including prices, and then I chose what I needed and went to the checkout where I

communicated with the cashier and used my own money to buy them. I interviewed MaryJo for this story, and she told me one scary but a little funny story. One day we went on a field trip to a playground near a marsh. I was very curious and wandered off, and she thought she had lost me. That caused MaryJo to panic, but I ended up fine. (Smile.)

A couple years later, I met Kevin, who is deaf like me. He taught me independent living skills, such as shopping and showed me the best ways to communicate with hearing people in a variety of situations like stores, restaurants, museums, and outdoor events. My family became good friends with Kevin and much later after he moved to New York, I visited him. While seeing the sights in New York City, we met two deaf Japanese men at the Statue of Liberty, and we learned a bit of Japanese sign language. It was a fun experience! (Too bad Spider-man wasn't there, smile.)

My third and final community intervener was Anna, who is also deaf. She was my intervener when I joined the “DeafBlind Teen Group” where we met and planned our activities during my high school years. Organized by the Minnesota DeafBlind Project, we had guest speakers and fun educational outings. Anna was somewhat similar to Kevin, and I learned much about being deaf and I could identify with them.

With the help of interveners at the two week long Summer Transition Program (STP), I learned more independent living skills, such as cooking, cleaning and laundry skills as well as riding public transportation to work experience sites. This was led by the Minnesota DeafBlind Project the summer after my junior year in high school.

Thanks to all of those interveners and support from my parents, as well as skills I learned from the STP, I am able to live on my own in an apartment and hold down a full-time job as mail clerk with the U.S. Fish & Wildlife Service regional office!

Regarding my career, my dad helped me understand the process of applying for a job. I started as a part-time employee at the U.S. Corps of Engineers when I attended the Vector Transition program while taking some college classes. Eventually, I became a full-time employee, and I put my college studies on hold. Years later, my dad told me that in order to advance in my career, I needed a bachelor's degree. So I decided to enroll as a part-time student, and after 18 years of being a part time college student, I finally earned my BA degree in 2018!

As valuable as interveners are, it is also important to educate the Individualized Education Program (IEP) team about interveners. In high school, some of my teachers didn't understand the role of the intervener and we had some bad experiences. For example, one of my teachers was signing to a student across the

classroom and I asked my interpreter what they were talking about. The teacher yelled at my interpreter for conveying the message, but I should have had the same access as my deaf peers.

Image 2



Image description: A smiling adult with brown hair, Andrew sits at his corner desk with two computer monitors in front of him in an office. He faces the camera wearing glasses, a red dress shirt and dark superman tie.

My best interveners had training. My first two school interveners were trained by the deafblind specialist on my IEP team (one of the reasons we moved often). In high school, the school district decided they would create their own deafblind specialist by sending a teacher of the deaf back to the university to get

vision training. Deaf + blind does not equal deafblind. For that reason, I did not have a positive experience in my early high school years.

As an adult, I now realize how important interveners are to children who are deafblind. So I would do anything I could to ensure that interveners are accessible to deafblind children everywhere. For example, during and after my college years, I worked to support the Cogswell-Macy bill to make interveners more accessible to deafblind children. I testified to include the definition of intervener in Minnesota state law. I have also created a PowerPoint of my life growing up with interveners and given several presentations live and on Zoom around the country. All of this wouldn't exist without my parents. Thank you two SO much!

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Parent Survey and Vignettes

Sally Prouty,

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In August 2022, a parent survey was developed to capture the current state of intervener practices through the eyes and experience of parents across the United States. The intervener practice has increased, from several states embracing interveners in the 1990's, to now, with OSEP having directed each state's deafblind project to address the intervener practice. Parents are often the first to see the results of an intervener with their child in school or the home/community, and they are the ones who consistently see the long-term impact on their child. Intervener services impact the whole family.

Purpose

The intent of this survey was to capture the level of awareness that parents have about interveners, and how interveners can or have impacted their children. The survey was not intended to measure the general public's level of understanding of interveners.

Methods

The survey was developed by the author and reviewed and finalized by the National Intervener & Advocate Association Advisory Board. Responses were limited to yes/no, multiple choice, check list, Likert scale, and open-ended questions. The survey was distributed via two parent mailing lists and seven Facebook pages that focus on interveners, deafblindness and parent support. The survey was open to parents or family members of children with deafblindness. To encourage response to this survey, respondents who completed the survey were entered into a drawing for a \$50 gift certificate. The survey accepted responses from August 8 -17, 2022, providing a relatively short window to complete the survey.

Results

The targeted responses came from 107 parents/family members of a individual with deafblindness in 30 states. Children represented all ages, from toddler to young adult.

The following states are listed in alphabetical order and show the number of parents who responded to the survey.

AL - 2, AZ - 2, CA - 5, CO - 8, FL - 3, GA - 1, IA - 1, IL - 3, IN - 1, KS - 2, KY - 3, LA - 3, MD - 2, MI - 13, MN - 7, MT - 1, NC - 2, NE - 1, NJ - 1, NY - 9, OH - 1, OK - 9, OR - 1, PA - 4, SC - 1, SD - 2, TX - 12, VA - 1, WA - 1, WI - 5

The parent/family comments asked at the end of the survey are so profound that, after compiling the results of the survey, it became clear that these sincere remarks must be shared first. The specific statistics in the survey will follow these remarks.

Q: Would you like to share how your child has benefited from an intervener?

What progress has your child made?

The answers to this question vary. Respondents repeatedly used descriptors such as: exceeding expectations, better engaged, significant progress, happier, better communication, maximized potential, involved, effective, success, critical, improved significantly, very beneficial, confidence, quality of life and support.

Additional comments included:

“Without a trained intervener, my child would be completely lost in the classroom -- no different than a hearing and sighted child trying to understand what is happening in a classroom if they had their ears plugged and had a blindfold on all day long.”

“The consistent support and understanding of deafblind practices and instruction was so valuable. He had an advocate at school that encouraged him to be as

capable and independent as possible, and a person who spoke up to support him in his learning needs and goals.”

“When she had a trained intervener she excelled and then she was given someone with no experience and she went backwards.”

“Our daughter graduated from high school and is headed off to college. We feel she is prepared to go and a lot of the reason why is because of the work of her teachers and intervener. I think an intervener is a special relationship that requires a person who can read the needs and provide access to the deaf-blind student.”

“My child more fully maximized his potential because of the vital role his intervener played in his educational journey. The Intervener made a tremendous difference especially in helping my son acquire tools and develop hard and soft skills in his vocational toolbox.”

“She loves her intervener and feels confident and comfortable with her. Her intervener has helped her bond with peers and really develop her social emotional skills as well as be a motivator for my child in having interest in learning new

things.”

“My child is so much happier & his mental health has improved more than I could have ever hoped! He is understood & knows how to show & communicate his wants & needs without getting upset, frustrated & used to end up in self abusive tantrums. I can't say enough about his intervener who he's had for 3 years.”

“Our son has made significant progress, especially at a critical time post virtual learning which was inaccessible for him. His intervener has facilitated communication progress that we as parents cannot do.”

“When our son has had an effective communication partner in the educational setting, he has done better in building relationships, completing tasks, and mastering skills.”

“My son has a very engaging daily routine that he enjoys, thanks to his Intervener and Day Habilitation Program.”

Summary: From these comments, it's overwhelmingly clear that the responding parents have seen their children benefit from and make significant progress with intervener services.

Q: At this point, what would help you the most related to intervener services?

“Advocacy to have Intervener Services in the Regulations.” Proper training and more awareness in the education realm of the role of an intervener.”

“Many teachers somehow see interveners as ‘know all’ and expect them to do all the curriculum related enlargement, vision modification in lessons, inclusion support, teaching and tutorials. It’s a lot of teaching work along with support work, all falling on the shoulders of interveners.”

“The security of keeping my intervener without the worry of losing them from year to year.”

“Interveners seem to be viewed as paraprofessionals, not as critical professionals on the IEP Team. Intervenors need to be recognized as professionals, be paid accordingly, and be routinely included in the IEP process.”

“While we have an amazing Deafblind Project, they are not allowed to advocate for interveners but can push training. When they join in meetings, they take an unbiased approach rather than truly advocating (in a professional manner) for the needs of the child. It was mentioned once in a meeting that it is up to parents to do so... what happens when we have done all we can do and are purely exhausted from it all? To the point of wanting to wash our hands of it all and do it without because we are done getting the runaround. What about those that don't know any better and that their kids could have so much more than the crumbs offered? Overall, we have had more good than bad experiences, but the truth remains, it has been a constant fight. When we had a small reprieve, it was only because our daughter has a teacher risking it all to advocate for her needs. She knew the laws, took the training, didn't take no for an answer, took the time to understand the child's unique needs, and had a fire within her to make sure her students had all they needed and deserved as a human being!”

“I find it ridiculous that we have to ask permission for the state to recognize interveners. They don't work with these kids, they don't understand them, and they don't take the time to make it of importance. When those working with our students stop thinking of the child first and put administrative politics, the bottom dollar, and only data above the child, that's where we lose it all.”

“Nationwide recognition of the intervener's unique role and training needs.”

“Having an opportunity for this kind of support in the home and for community events would be wonderful.”

Summary: It is a daily struggle for parents to get their educational team to understand the unique needs of their children. Parents believe interveners should be recognized as an integral member of their child’s IEP team and feel interveners should be available beyond the school day.

The following are the survey questions asked, the parent responses, and the author’s summary.

1. Do you know what an intervener is:

Yes - 95

No - 12

Summary: Almost 89% of all respondents know what an intervener is. Of those who did not know, the majority are interested in learning more about interveners and how an intervener can benefit their child.

2. Briefly describe the role of an intervener for a child who is deafblind (open ended question).

The majority of parents stated that interveners provide individuals who are deafblind with access to:

- language
- visual & auditory information
- instructional curriculum
- the environment
- peers
- incidental Information
- social Interactions

Many reported the intervener as being:

- a bridge between the child and the hearing and sighted world
- their child's trusted advocate
- the eyes and ears of their child
- critical to their child achieving independence

Additional verbs used to describe what interveners do include:

- advocate, navigate, bridge gaps, facilitate, assist, communicate

Summary: The majority of the respondents who replied “yes” to question #1 clearly describe the role of the intervener in positive terms, and affirm the benefit of intervener services on their children.

3. Does your child have an intervener in the school or the home/community?

Yes - 54 (these respondents were directed to continue, skipping questions 11, 12, 13)

No - 53 (these respondents were directed to proceed to question 11)

Summary: Of note, is the fact that of the 107 parent respondents, approximately half of their children have intervener services in the school, home, or community, and approximately half of the children do not.

4. Does your child have an intervener for the deafblind in school and/or home/community?

Only school – 28

Both school and home/community - 18

Only home/community - 8

Summary: While the majority of interveners are used in schools, a few states have established home/community intervener programs. In other states, parents have utilized outside funds to provide an intervener in their home/community. For

those who report having home/community interveners only, most have young adults who have transitioned out of school. Because of the success these parents saw having intervener services for their children in school, they sought funding for interveners after graduation.

5. If you were successful obtaining the services of an intervener, what changes in your child have you seen as a result? (Respondents were allowed to choose more than one answer).

- More included in the classroom/community - 48
- Increased communication - 46
- Less stressed and happier - 40
- Progress on IEP goals - 33
- Decreased behaviors - 29

Additional comments related to the child showing more:

- independence
- self-efficacy
- better social skills
- engagement
- exploration and relationships

Summary: Results show that families have seen multiple positive changes in their children as a result of intervener services.

6. How difficult was it to receive intervener services for your child? (Likert scale with number 1 equaling very difficult and number 5 equaling very easy)

- Very Difficult - 8
2 - 13
3 - 10
4 - 11
- Very Easy 5 - 12

Summary: The number of respondents who reported more difficulty in getting an intervener for their child is very close to the number of respondents who reported it was not difficult.

7. Is the term “intervener” listed on your child’s Individualized Education Program (IEP)?

Yes - 41

No - 13

Summary: 76% of respondents have the term “intervener” listed in their child’s IEP, while 24% do not have the term “intervener” listed in their child’s IEP.

8. If yes, where in the IEP document is the intervener listed?

- Related Services - 18
- Accommodations - 10
- I don't know or don't remember -8
- Multiple places - 2
- Supplementary Aids & Services - 2
- Modifications - 1

Summary: It is concerning that interveners are listed in many places within the IEP document.

9. If your child has an intervener, but the word “intervener” is not included in the IEP, what was the title given to the person working with your child?

- paraprofessional or 1:1 aide - 8
- interpreter - 2
- instructional support staff - 1

Summary: These numbers represent 11 respondents whose children have an intervener, but the service is not listed on the IEP.

10. What training has your child's intervener received?

- University trained - 24
- Open Hands Open Access (OHOA) modules - 12
- Workshops - 9
- I don't know - 6
- Hands on/self/life experience - 3

Summary: The majority (or 44%) of respondents who report that their children have an intervener, say that the intervener received training through a university, and 22% report that the intervener was trained through the Open Hands Open Access modules. Seventeen percent report that their child's intervener received training through workshops, 11% don't know the type of training that was received, and 6% report self/hands on/life experience training.

The following three questions were answered by those respondents whose children do not have an intervener.

11. If you were unsuccessful obtaining the services of an intervener, please indicate why. (Respondents were allowed to choose more than one response, and they could also comment in the "Other" section.)

- The school can't find a trained intervener - 14
- The school can't find a person willing to go through training to become an intervener – 11
- The school is strictly for those who have deafblindness -2
- The school said we don't do that here - 8
- The school said interveners are not listed as a related service in IDEA - 6
- The school doesn't think my child needs an intervener - 6
- The school said they didn't have money for an intervener - 2
- The school said, if we do it for your child, every child in special education would want one - 2

The following are comments made by respondents in the “Other” category, along with respondent numbers for the first four comments.

- Intervenors are not recognized in our state/Department of Education - 2
- I don't have enough information about intervenors - 3
- Haven't tried / asked - 10
- The school is strictly for those who have deafblindness - 2
- They were concerned if the intervener took a day off, no one would be able to work with her.
- Didn't try because I wasn't sure an intervener was appropriate for a child who uses oral spoken language.

- My child's paras are well trained in adapting and assisting him.
- School doesn't want to acknowledge her deafblindness because she has CVI and auditory processing disorder.
- Initially unsuccessful, but my daughter's school has a new Director of Special Ed, so we're working on securing one now. I'm hopeful that it will work out this time.
- It has never been proposed or mentioned to me. My child has Deaf Hard of Hearing services, audiology, Vision Impairment services and Orientation and Mobility services on the IEP.
- I had an advocate present for my young son, and when it came up it wasn't elaborated on its effect for my son, specifically.
- I haven't asked, but they don't want to provide anything else. They want to "wait and see" and "can't fix" my child because "there are a lot of kids".
- The school stated that they were not concerned about the impact of a dual sensory impairment on our son because he was using his residual hearing better than his vision and shut down the conversation. A year later, we learned that our son had been registered on the deafblind child count for a decade, unbeknownst to us.

Summary: A large number of reasons are identified as to why intervener services are not made available to students who are deafblind. Collectively, these reasons

represent significant challenges to having intervener services available for these students. It would appear that school teams are still generally uninformed about interveners and the impact of deafblindness in learning.

12. If your child does not have an intervener, what title is given to the person working with your child?

- 1:1 aide - 16
- paraprofessional/paraeducator - 15
- interpreter - 5
- nurse - 3
- no title given because no specific person is assigned to the child- 14

Summary: When a child doesn't have an intervener, two thirds of the children have either a para or 1:1 aide working with them. Of concern is the fact that almost a third of the children not only do not have an intervener, but also do not have a specific person assigned to them.

13. Are you aware of these intervener training options? (respondents' children do not have an intervener)

- OHOA modules - 10
- State Deaf-Blind Project Workshops - 9

- University training - 4
- All of the above - 6
- Not aware - 24

Summary: Of those respondents whose deafblind children do not receive intervener services, almost half are unaware of any intervener training options.

The following questions were open to all respondents.

14. In your opinion, how important is the training level of the intervener who works with your child? (Likert scale with number 1 equaling a paraprofessional level and number 5 equaling a university level)

- paraprofessional level 1 - 2
2 - 1
3 - 28
4 - 38
- university level 5 - 38

Summary: The majority of respondents report that university level training is important. Very few respondents report that paraprofessional level training is important.

15. Would you be interested in any of the following?

Receiving training about interveners and what they do - 42 (39%)

Participating in advocacy efforts on a national level - 44 (41%)

Summary: Forty-two participants said they would like more training and information on interveners and what they do. Thirteen of those report having questions about interveners and the services they provide, even though their child already has an intervener. Related to advocacy efforts, of the forty-four respondents who want to be involved, half report having an intervener for their child and the other half do not have an intervener for their child.

Conclusion

In summary, interveners are perceived by parents to be a critical support for their children who are deafblind. The consensus is clear that interveners must be recognized as an integral member of the IEP team, and be trained and paid appropriately. Additional themes emerged in the survey, and are summarized below.

Short Survey Response Time

The survey was open for 10 days, and it represents a relatively short snapshot in time. The short turnaround time reduced the opportunity to find parents of children who are deafblind and to invite them to participate. The results of the survey show that the majority of these parents not only know what an intervener is,

but also have a thorough grasp of the role of an intervener, and they perceive interveners as necessary for their child's development and learning.

Parental Exhaustion

Woven throughout the responses is a theme of parent exhaustion caused by raising and advocating for a child with deafblindness, as well as by the frustration of working with an IEP team who does not understand the unique needs of their child.

Resources

Many respondents express their high regard for the knowledge and skills that state deafblind project staff bring to their local education teams. These projects tend to be a lifeline for families, since most educational teams do not understand deafblindness and the supports that are needed by children who are deafblind in order to access educational environments. Parents list a host of resources related to interveners that are helpful to them. These include their [state deafblind project](#), the National Intervener & Advocate Association [website](#), Interveners and Deafblindness [Facebook Page](#), the National Family Association for Deaf-Blind ([NFADB](#)), the National Center on Deafblindness([NCDB](#)), and their state's [Parent Training and Information Center](#). Several parents state they have received intervener training through the university training programs or the Open Hands, Open Access (OHOA) modules.

Varied Access to Interveners

The survey shows a disparity regarding families' access to trained interveners. The survey also shows variability in intervener training opportunities. One parent states, "when my child had a trained intervener she excelled, but when she was given someone with no experience, my child went backwards." Several families express their frustration and disappointment when moving from a state with a history of recognizing and training interveners to another state that did not have the same recognition or training available. There is also variability around families' knowledge of training and understanding of the role of an intervener.

Lack of Recognition of Interveners

The understanding and acceptance of trained interveners as an educational support varies within the education community. Students often enter schools without an intervener, and consequently, precious time is wasted because they don't have the access to learning that an intervener provides. As shown by the survey results, parents believe interveners should be accepted as an integral member of their child's IEP team. This is concerning because interveners are often not recognized as such by school systems. Also concerning, is the fact that, since interveners are viewed as paraprofessionals, they receive lower pay and no incentives to stay in the field.

Family Vignettes

The following vignettes come from families from across the country who have graciously agreed to share their journeys about advocating for their children who are deafblind to have intervener services. These stories are similar to hundreds of other stories from across the country. These families were quick to learn that their school teams didn't understand the unique learning needs of their children. They trusted the education system to provide appropriate services, only to discover the lack of personnel trained in deafblindness, which put them in the position of having to not only educate their child's team, but also to be their child's constant advocate. It's important to note that because of their struggles, each of these parents hope for better things in the future for children who are deafblind.

Educating the IEP team about interveners is the first step in advocating, and in some cases, that alone is sufficient. However, in other cases, due process has to be pursued. Thanks to parent advocates like these and professionals who support the concept, the term "intervener" has become slightly more accepted and utilized. Systems are changing (see advocacy article) and there is a glimmer of hope. (Please note there is an additional parent story by Gwen Sirmans in the article, "Meeting the Needs of a Student with Deafblindness in the Academic Classroom: A Model That Works.")

Jodi Anderson, Wisconsin

Having an intervener for my son has been the best thing to assist him in reaching his full potential. Before he had access to communication with tactile sign language, braille, and information about his environment, he was easily frustrated, and this frustration came out in challenging behaviors. When his intervener implemented a calendar system early in his schooling, he was able to anticipate his day, and that really made a difference in his behavior and comfort level. He is happier being able to connect more with his peers and has made friends. His intervener has been very instrumental in his success in band. She has worked on adapting the materials and providing him with the music in a manner which is appropriate for him and his skill level. Her ability to connect him to fellow students is amazing. Everywhere we go, students greet Liam and fist bump him, which is his preferred method of saying "hello". There is no longer isolation at school.

In 2012, I had the opportunity to go to a conference in Texas, where I met so many moms whose children had interveners, and I really learned this was exactly what my son Liam needed. The process to obtain an intervener for my son began in Early Intervention 4K, but it was not easy. After I brought up the request for intervener services, his team was very skeptical. No other student in his class had a one-on-one paraprofessional, so they didn't see why Liam needed one. I don't think they really understood the difference between a paraprofessional and an

intervener. They said “no”. I asked for another IEP meeting. I had to explain that none of the other students had combined vision and hearing losses. I gave them examples of how an intervener would benefit Liam.

Unfortunately, I still had to go above his team and meet with the director of pupil services for the district to plead our case. I used the parent booklet, [A Family’s Guide to Interveners](#), to ask her questions such as: “How is Liam going to have consistent access to the visual and auditory information and instruction needed for learning?” and “How will Liam know what is happening around him and who is present?” I also arranged for the deafblind consultant from the state deafblind project to give a presentation about interveners. In addition, I let the IEP team know that I was going to be asking for mediation if they continued to refuse. I believe I wore them down, and they finally agreed to give Liam an intervener when he was in first grade. That same intervener has worked with Liam for 9 years. Also, we have a wonderful substitute who is an interpreter and who understands deafblindness and is willing to learn.

It’s been 9 years since my son first received the services of an intervener, and it has been one of the proudest accomplishments in my advocacy efforts for him. Because of our advocacy and Liam’s success, the district decided that any deafblind child must have a nationally credentialed intervener. Now other students

with combined vision and hearing losses don't have to fight the same fight we did. We've made believers out of the IEP team and the district.

Jay & Teri Bidwell, Oklahoma

We were so unaware of what Brooklyn, our deafblind child needed when she entered the public school system at age 6. We believed in the system, but soon found out that our child's needs were not being met. We had no idea that this would be an ongoing struggle or that we would have to constantly advocate for her needs. We are so grateful for the National Center on Deaf-Blindness, National Family Association for Deaf-Blind, Helen Keller National Center, Perkins School for the Blind, our State Deaf-Blind Project in Oklahoma and Linda Alsop, Director, Deafblind Programs at Utah State University. These resources have guided us, given us wisdom, and provided much needed support through the years.

Brooklyn was born deaf-blind, is developmentally delayed, nonverbal, has albinism and has sensory processing disorder. She has a lot going on. From day one, we realized she would need extra help. The school did provide paras in the classroom, but they did not want her dependent on one person. They would constantly move paras in and out of her day. After doing research, we realized she needed an intervener who would work consistently one-to-one with her. The school had never heard of an intervener, and they did not think our child needed one.

As the years passed, Brooklyn was placed in multi-handicap classrooms, but she was always the only deaf-blind child there. We always felt she could do more, learn more and become more. The school felt like she could not learn sign language or braille because of her sensory issues. We applied for her to be admitted to our state blind school and our state deaf school, but she was not a fit for either program. Both schools denied services for Brooklyn. We continued to advocate for an intervener in the public school classroom to work with her.

When she entered middle school, we had her evaluated at Perkins School for the Blind. We felt that if anyone could evaluate her needs properly, they could. The evaluation said that Brooklyn needed total communication, through signing, tactile signing, object cues, tangible symbols and speaking. With that evaluation and assistance from disability lawyers, the school district finally got on board with providing an intervener. It took years to get the word “intervener” listed under related services in her IEP. We asked for a Nationally Credentialed Intervener, who was trained to work with the deafblind, but they hired a para who was willing to do the coursework and become credentialed. Unfortunately, this para had no sign language skills.

Image 1



Image Description: Standing in the checkout lane of a grocery store are an intervener and teen-age student putting items on the conveyer belt.

When she entered high school, we asked for someone proficient in sign language to be her intervener, but then COVID hit. Distance learning came into our world then, but a deafblind child cannot learn that way. Brooklyn lost valuable time, and it was like starting over again. The school then hired another person, proficient in sign language to become trained as an intervener for Brooklyn. However, it has been a slow process, and she has made with very little progress in sign language and communication skills. We remain hopeful that she can communicate before she graduates.

If our child had had an intervener when she first entered school, she would be in a better place. Our hope is that every child who is deafblind will be given the opportunity to have an intervener who consistently works one-to-one with that child to facilitate the gathering of information, the developing of communication skills, and the establishing of relationships. It has been an uphill journey with many twists and turns for us. We hope school districts will recognize the need to have trained personnel in place to meet the needs of children who are deafblind before these children fall behind in their learning and development.

Anonymous

I have an 11-year-old daughter who is congenitally deafblind. We have known of her vision and hearing loss since birth, but she was classified in the category of multiple disabilities with additional sensory losses. It was not until recently that we learned that she should be considered deafblind, because her vision and hearing losses are concomitant, resulting in major impacts to her learning and communication. She has had a TVI but has not received any instruction in braille, despite being seven times the legal limit for blindness. Her IEP team has never included a teacher of the Deaf/Hard of Hearing who could have taught her the meaning of sounds and how to use her residual hearing effectively. Not being identified as deafblind has had a devastating effect on our child and her quality of life.

Additionally, in my experience, the experts in the educational system have lacked the expertise to accurately identify and educate my daughter. She was identified as multiply disabled, which in my opinion, seems to act as a ‘catch all’ for students who are not well understood.

What I have learned from navigating through this experience is that deafblindness is a disability with limited awareness and available resources. The school district has been very reluctant to acknowledge and serve our child’s unique and individualized needs as a deafblind student. In our case, it has fallen on us as parents to go out and find the experts at our own expense who can properly identify how our child learns and communicates.

We have been advocating for over 4 years to obtain services in order for our child to make educational gains. After several contentious reevaluation and IEP meetings, filing due process each year, and going through an administrative hearing as a pro se parent, we were finally able to get the word “intervener” added to the IEP. However, without there being a universal understanding of the role of an intervener, and of how an intervener should be trained, it’s been extremely difficult to get intervener services.

In the two months since an intervener began working with my daughter, we’ve immediately seen positive changes. She is connecting to her environment, using tactile sign language, engaging in learning concepts, forming sentences with

signs to express herself, and more able to build relationships with others. The intervener has provided a bridge of access for our child, and we are so grateful.

Vivecca Hartman, Texas

Our son, Christopher, is deafblind and we spent years advocating for an intervener in school. We were fortunate to have administrative support and got approval for one while he was in preschool. It was exciting and we were so hopeful! We quickly realized that we needed to get the appropriate training for the intervener, and that even then, a trained intervener can leave, resulting in the process having to start all over again. Since then, we spent years working with the school district to get people hired and trained. As parents we've learned to stay the course, and continually remind those around us of our son's needs.

We learned the importance of exposing our son to as much as possible when he was young and willing to learn. He needed a vast variety of experiences to build his repertoire of knowledge and language. Christopher spent approximately 20 years in the school system, and needed to utilize the school resources as much as possible. With the support of an intervener, he had experiential learning paired with language he would use for life. His intervener knew his language, and provided him with access to information, support for incidental learning, and a connection to people and things in his environment. The Intervener also helped Christopher interact with those around him and build relationships.

The use of interveners goes beyond the classroom. The school years are important, but individuals who are deafblind keep learning after they age out of the school system. They continue to need intervener services in order to have access to experiences safely, paired with language that builds on their communication abilities, and supports their participation in life around them. An intervener needs to be competent in tactile learning and to have the patience to expose the individual to tactile experiences. Life beyond the school system can last for possibly 40+ years.

In Houston, Texas, my husband and I co-founded Touch Base Center for the Deafblind with another family. This is a day activity center that carries forward life skills teachings, provides safe access to organized outings, and consistent communication modeling. The Coordinator organizes activities in the community, encouraging engagement in the basic activities of living healthy daily lives, while seeking to have moments of joy along the way. All who attend come with an intervener who supports them in an environment that is conducive to their language and individual needs. We know the value of an intervener in the life of a person who is deafblind.

Image 2



Image Description: A teenage male student is standing outside facing his intervener. The student's right hand is holding a white cane and his left hand is on his male intervener's right hand as he signs. They are standing near the wing of a small airplane parked on the tarmac.

There are a wide variety of activities available at Touch Base Center for the Deafblind to allow individual interests to be pursued with the support of interveners who model language along the way. There is a kitchen, laundry facilities, an exercise room, a music and sensory motor room, a life skills room, and an arts and crafts area with space for 1-on-1 collaborative activity engagement.

The Touch Base Center for the Deafblind is also open to school age children for summer and holiday breaks. This allows them and their families to see that

happy engaging lives can be achieved, and that they can then be full of hope for their future.

The establishment and maintenance of this Center has been made possible through the Texas Deafblind Multiply Disabled (DBMD) Medicaid Waiver, and this provides the ongoing financing needed to sustain the Center as an operating business. (See section titled Advocacy at National & State levels.)

We need more of these day activity centers around the state and the nation for those who are deafblind once they have aged out of the school system. Parents shouldn't have to worry about having to quit their jobs to care for their adult children, and they should have the comfort of knowing that their children are engaged in the community and have richer lives.

Sally & Mike Prouty, Minnesota

Our son was born with CHARGE Syndrome in the early 1980's, and soon after his birth he was diagnosed as deafblind. We learned of the intervener concept from Canadian educators, and became strong proponents of the concept in the United States. We moved to access an intervener program when our son was a toddler. We also hired college students to work as interveners with him during summer vacations. The intervener concept was an obvious solution to provide our son with access to learning. More than forty years later, it's astounding that children who are deafblind today do not automatically have access to interveners.

Image 3



Image Description: A smiling male college graduate is wearing a black cap and gown with an orange stole, multicolored cord, and medallion around his neck. Standing next to him is his smiling sister.

Some progress has been made in that the U.S. Department of Education started to include interveners in a 2008 Request for Proposals (RFP) related to funding the state deaf-blind projects. Within the field, the first national intervener competencies were developed in 2004 and updated recently to include 75 competencies. “Recommendations for Improving Intervener Services” was published by NCDB in 2012. As a parent, I appreciate the recognition and progress that has been made, but it is frustrating knowing that every day, children in the world’s richest country sit in classrooms without access to communication around them. EVERY CHILD who is deafblind should be considered for intervener services.

My hopes for the future include a recognized intervener profession, with well-trained interveners available for children and those adults who need them in schools, homes, and in communities. Just as interpreters provide a least restrictive environment for some children who are deaf, I envision a future with interveners who are trained through higher education programs, who have degrees, and who are available to provide a least restrictive environment for students who are deafblind. If interveners were included under the definition of related services within IDEA, they would become a viable option for students with deafblindness in school. Adding intervener language to IDEA would require that states formally recognize interveners. This will help reduce the frustration and struggle parents often experience in advocating for intervener services for their children.

VIDBE-Q 2023 Convention Issue



The intended purpose of the Spring 2023 convention issue is to provide manuscripts aimed at practitioners about presenter contributions to the CEC 2023 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 7th Edition)
- 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
- Provide tips or strategies

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

Deadline for submission: April 1, 2023

Interveners Making a Difference

Stephanie Garrett,

Floyd County Schools, stgarrett@floydboe.net

In 2013, a panel of interveners presented information at the National Resource Center for Paraeducators Conference in Salt Lake City, Utah. At that time, they held a special meeting to establish the National Intervener Association (NIA). This organization included an Intervener Leadership Team and a national network of credentialed interveners. In 2020, NIA became the [National Intervener & Advocate Association](#) (NIAA), which expanded to include interveners, parents, professionals, and others. This larger group continues their ongoing efforts to have interveners recognized as related service providers under IDEA.

The Mission of NIAA is to:

- Promote quality intervention services for individuals with deafblindness
- Promote recognition of interveners at local, state, and national levels
- Promote the acceptance of the term “Intervener” as a unique profession requiring specialized training in deafblindness
- Promote awareness of the positive impact an intervener can have on a child’s learning, communication, and overall development

- Provide interveners with support and opportunities for networking with others in the field
- Advocate through the legislative process to promote national systems change and have interveners recognized as related service providers under IDEA

The following vignettes are shared by the current National Intervener & Advocate Leadership Team.

Chris Jay, New York

What is an Intervener? I had no idea what that was when I started to work with a kindergarten student who was deafblind. After working with him for a time, his team and I learned about the Intervener Training Program through Utah State University. I decided to embark on a new task, and I enrolled in the intervener training in 2008. What a huge difference it made in my student's education! When I started working with my student, I did not know how to help him, but after taking the intervener training classes, everything totally changed, and my student started to thrive. He learned his schedule and how to sign words that had meaning to him. Communication made a big difference for him, and he showed many indications of understanding. I helped him gather information and communicate through sign language. I provided him with support to enable him to have access to his environment. I was his "eyes" and "ears," helping him access his environment and giving him a connection to others. In all honesty, his behaviors were not good all

the time, but I knew how to work through those behaviors and turn them around, so they didn't interfere with his learning. I was able to share information with my student's team, and they adjusted his programming, which allowed for so much learning. His world opened up and he had access to the information he needed to learn and understand what was happening in his daily life.

One particular day, we had an outing planned to go for breakfast at a local restaurant. We had practiced signing the foods and looking at the menu in braille, and he learned the signs for the foods he wanted to order. He was so happy that day when he was able to order his own pancakes and bacon. Just to see the smile on his face made me realize the importance of the training I had received.

Being his intervener helped us both. We had a trusting relationship, and I supported him in developing appropriate social and emotional skills while he was in school and at home. Throughout the six years I was with him, he learned to communicate simple requests such as using the restroom and saying he was hungry. He was happy in school and that made my job as an intervener so much better. I cherish the time I spent with him, teaching and guiding him through life. He has since moved to the Perkins School for the Blind and is doing very well there.

The National Intervener and Advocate Association (NIAA) has been a huge part of my life. I continue to serve on the Leadership Team which keeps me up to

date with all of the important aspects of intervening. I served as the first chairperson of the Leadership Team for several years, working with the other interveners to enhance our practice.

As a group, we have been supporting the intervener practice by writing a universal job description, generating surveys to understand what's happening in the field, offering mentoring opportunities to new interveners, and helping interveners in general. We are working on making intervener services a related service in the Individuals with Disabilities Education Act (IDEA.) NIAA has worked tirelessly for the practice of intervening and will continue to do so for many years to come.

Stephanie Garrett, Georgia

I have been a credentialed intervener since 2014, and have since become re-credentialed as a Deafblind Intervener Specialist (DBIS). I have been with my student for the past 12 years. In my district I am the only intervener, but I'm considered to be at a paraprofessional level (currently in my state, interveners are not recognized and we are still considered paraprofessionals). Although I am highly trained in my field, my pay is not reflective of my competency level.

Recently, I have requested a pay increase to reflect my competencies as a highly trained intervener. I'm competent in American Sign Language (ASL), Pidgin Signed English (PSE), Signing Exact English (SEE), Tactile sign language, and Unified English Braille (UEB) Grade 1 and 2. This request was unfortunately

denied with no explanation. Beyond earning the National Intervener Credential, I saw what my student needed, and took the initiative to take courses on my own. To better serve my students' needs, I took courses over time to learn Braille so my student could have better access to her learning environment. I often ask myself why I take courses like these to only be recognized as a paraprofessional. I've attended additional training over the summer and during beach vacations. I do all this for my student. As a highly trained intervener, I am required to engage in continuing education to maintain my credential. Yet currently, in my state, neither teachers nor paraprofessionals are required to have any credit hours to keep their certifications.

As someone who serves in a school district where I am the only intervener, I've experienced some ups and downs. I struggle to get others to understand my role as an intervener and how that benefits my student. Struggling to make others aware of the benefits of intervener services becomes overwhelming and frustrating at times.

In addition to my role as an intervener I now serve as Chairperson of the Leadership Team for the National Intervener & Advocate Association, and I work closely with other interveners and professionals. Our goal is to educate and work toward getting intervener services recognized as a related service in IDEA. We

know interveners are critically important for children and youth who are deafblind.

Terry Robinson, Virginia

I became “Kenny’s” intervener when he entered 6th grade. He communicated mainly through behaviors. Through the Intervener Training Program at Utah State University, I learned to develop and implement the use of calendar systems, set predictable routines, and make visual lists and charts that incorporated time and anticipation. Once Kenny grasped these concepts, he began to flourish. Calendar systems and routines were only the jumping off place, and Kenny continued to make progress. All of the interventions that I used with Kenny were a direct application of strategies and skills I gained from my intervener training coursework. I received the National Intervener Credential and consider myself to be a competent and successful intervener.

Amie Abernathy, Texas

Since 2016, I've had the pleasure of working with my student who is deafblind mainly in her home environment, as a one-on-one home health aide. The deafblind world was something very new to me, and I learned while working with her. I attended all of her therapies and doctor's appointments, gathering information along the way, and learning something new about her each and every day. From

this, I came up with my own plan to do with her in the home. Over the years we have developed a strong and trusting bond with each other.

During that time period, I was going to school in child development and general studies. Upon completing my degree, I was intrigued with the deafblind world and wanted to know all about it. I wanted to better myself for my student and help her grow without adding stress to her life. In 2020, I learned about the Deafblind Intervener Training program at Utah State University. I had so many questions such as, “What is an intervener” and “How do I become one?” Before I knew it, I was accepted for the Deaf-Blind Multi-handicapped Association of Texas (DBMAT) intervener scholarship and was able to begin my schooling to become an intervener.

As of December of 2021, I’ve completed my schooling and am now a Nationally Credentialed Deafblind Intervener Specialist. As a result, I’ve developed competencies and know how to work with my student’s specific needs related to her deafblindness. For example, I have learned she has no peripheral vision, and can’t see things unless they are within six feet of her or closer. I have slowed my pacing down when I am talking with her, supporting her in different activities, and even when I play music with her. Before my training, I had never realized how fast I was speaking or playing with her.

Her grandfather once told me that I now have a “perspective of knowledge versus previously having a natural instinct of what to do.” He also said, “since you became an intervener, my granddaughter's language and communication has moved forward.” Over the years, we have both grown tremendously. I have learned so much, and I am eager to learn even more!

Cassandra Waterbury, Colorado

If there is one thing I have learned as both an intervener and an interpreter, it is that access and having the ability to communicate are **powerful**. My job is to make sure my students have that power. Over the past 10 years I have had the chance to work with a variety of deafblind students with varying levels of vision and hearing loss, and with additional disabilities. Each student is unique and requires an individualized support and communication system.

I took an intervener position for a preschooler with deafblindness who was in school for half days. Then the educational team asked me to also support another student named Daisy for the remainder of the school day. In addition to being deafblind, Daisy had CHARGE Syndrome and Dandy Walker Syndrome. She was in second grade and had been communicating with her peers and providers by pushing and pulling them to the things she wanted. They used hand over hand methods to get her to complete her schoolwork, and they pulled her along with the rest of her class to other activities. She often resisted by pushing, scratching or

kicking. She lived her life at the mercy of others, with no idea of what was happening, where she was, or why she was there. She needed a way to communicate. I immediately started exposing Daisy to tactile sign language and worked with the vision teacher to create 12 tactile symbols to indicate destinations around the school. Within a few days, Daisy knew what each symbol represented, and she started to bring symbols to me to ask to go places. For the first time in her life, she had some control and structure to her day.

Daisy continued to make strides in communication and started signing independently without modeling or prompting. She needed a fulltime intervener who was fluent in sign language and I requested that intervener services be added to her IEP. Instead of hiring another intervener, however, both students with deafblindness were placed in the same classroom with the expectation that I would work with both of them at the same time. Daisy needed constant access through tactile sign language which only I could provide. This put me in an impossible situation.

Realizing they would need to hire multiple interveners, the administration had the classroom teacher remove “intervener services” from both of the students’ IEPs. At the end of the school year, when both students lost intervener services, their access, and their voices. It was 4 years before the school district would post

an intervener position for Daisy, after she had shown enough regression. She finally received her first full time intervener in late middle school.

Daisy reentered my life this year thanks to a community intervener pilot program. She now receives 10 hours a month of community intervener services from me. When I enter the house, she grabs my hand and drags me to the door signing, “swing”, “ready”, and “shoes” and wants to go to the park.

Until interveners become categorized as related service providers there is very little to ensure that children who are deafblind will receive intervener services. These students are often not able to progress because of the limited training and skills of the educators who work with them. It takes someone with specialized training in deafblindness to fill the role of an intervener. Unfortunately, paraeducators are often expected to fill these roles instead of a trained intervener. When this happens, schools must require that paraeducators achieve intervener status through completing a higher education intervener training program, and then offer them competitive pay that reflects their expertise.

Because of Daisy’s deafblindness and additional disabilities, others had limited expectations for her. She should have been given an intervener when she first entered school at five years of age. Instead, she had to wait until she was 12 years old to receive a full-time intervener. She lost seven years of access to education, access to her environment, and access to relationships with others. Like

Daisy, every child who is deafblind deserves to have the support of an intervener who can provide access to the world and facilitate learning, communication, and overall development.

Image 1



Image Description: A smiling intervener, Cassandra, with long wavy hair sits in a chair opposite another student - a boy in a power wheelchair with knees closed. The rosy-cheeked boy is looking at the intervener. The intervener is holding an object so the boy can feel it with his right hand. A drum is in the foreground within reach of both.

Tricia Houlihan, California

I completed the Deafblind Intervener Training Program at Utah State University and received my National Intervener Credential in 2017. I worked as an intervener in the schools for many years until I started my own business several

years ago, and started working as a freelance intervener in schools, homes, and the community.

It is with great pleasure that I share the experience of working with my young friend and student Stevan and his wonderful family in their home. Stevan is a beautiful 12-year-old boy who comes from a loving and active family.

Stevan is a very happy and expressive child who has CHARGE Syndrome. He is totally blind, and has a severe to profound hearing loss, and he primarily connects with the world through touch and his residual hearing. I have had the honor to interact and work with him as his intervener since he was two years old. Due to a location change as well as COVID, we were apart for about two and a half years. Fortunately, we were able to reconnect at the beginning of 2021 and pick up where we left off.

Having worked as an intervener for over 20 years, I have considered it a privilege to get to know the families of the children whom I have served. Stevan's mom has often expressed her need for more home support, and we've talked about how that could possibly happen. We were excited when we were asked to participate this year in the summer intervener home pilot project through the CHARGE Syndrome Foundation. Stevan's mother had a long-time goal to increase her knowledge and use of the foundational deafblind communication practices that are used with Stevan at school. This included tactile signing and braille. She

looked forward to getting some favorite books in braille and print to read with Stevan and his brothers. She also wanted him take part or vote in family outing decisions, such as what restaurant to go to and whether to go to the park or the beach.

Image 2



Image Description: On a bright sunny day, an intervener is sitting behind a young boy whose eyes are closed. They are outside, facing the camera and smiling. With her right hand, the intervener is tactile signing thank-you into the students' right hand. With her left hand, the intervener is holding a package of Ferrero Rocher chocolate candy that had been given as a gift to the intervener.

My goal as an intervener was to see Stevan in his home setting and to see how he interacts with his lovely family. I also wanted to demonstrate and provide, with ease and clarity, any information that his mom and family needed to know. Together we were able to make that happen.

We reviewed and created object cues for routines and outside activities. Since he was learning to walk on his own, we placed object cue landmarks in key areas in his home. We organized Stevan's communication system, worked together to review and practice tactile sign language and coactive sign language. Stevan's mother had a wonderful experience with him at a restaurant when she used tactile sign language to ask him if he wanted more to eat, and he answered her back. Since then, she has had numerous special moments communicating with Stevan.

Overall, we affirmed how essential intervener home support is, especially during the long stretch of summer. An important part of the role of an intervener is to develop a trusting rapport with the child who is deafblind and to take the time to get to know the "whole child" at home and at school. The CHARGE Syndrome summer intervener pilot project allowed me to spend important time with Stevan at home with his family, and to discover how he communicates with them. In turn, I was able to demonstrate and share how he communicates at school. The wonderful outcome is that we are now integrating this together in both home and school

settings. This is making a positive difference for Stevan and all of his relationships as we move into the new school year.

Taylor Smith, California

As a certified interpreter, I was employed by the Sonja Biggs Educational Services, Inc. (SBES) to be an intervener, and I was required to complete the Intervener Training Program at Utah State University. Currently, I am the Intervener Program Manager for SBES. Our agency provides intervener services and VI services through contracts with school districts, mainly in California but expanding to other states as well. Since 2017, our agency has served a total of 14 students who are deafblind. Currently we serve seven students who are deafblind and employ seven interveners who work with them.

Our Intervener Department mainly consists of professionals who have a background in Deaf Studies and/or are fluent in American Sign Language. We've observed that ASL is an important prerequisite skill set for serving students with deafblindness who have a broad range of language needs. We provide training in braille and assistive technology to ensure that interveners have the tools needed to best support their students. Initially, we do our best to collect information about a student in order to provide an intervener who is a good fit for that student. All of our interveners are either nationally credentialed or on track to become

credentialed. This has been a very successful and key piece to the quality of our services.

An important part of our service is the collection of child outcome data. The three students on our caseload who have had intervener services the longest have shown the most significant progress. Child outcomes are measured based on daily intervener service logs and data collection on student progress. Much of the data focuses on communication/language levels, class participation, number of prompts needed, level of independence, and IEP goal progress. Some data can be customized to a student's specific goals in order to explicitly demonstrate their growth to their IEP teams. All of the students we have served have shown some level of progress in their receptive and expressive language development.

In April of 2018, we began serving a four-year old student who had very minimal language. The student verbally communicated simple words with prompting such as "Hi," "No," and, "All done," and always referred to himself in the third person. Spelling his name was very challenging for him. The student had just begun learning to tactilely read the braille letters G, L and A. After four years of consistent intervener services, this student currently acs every spelling test he types out in braille, reads full books using his CCTV, correctly speaks in first person, and has turned out to be quite a chatty young boy. Because this student has had full access to his environment and curriculum with the support of an

intervener, he has been set up for success and has achieved unexpected progress in academic and daily living skills. Watching this student's progress over the past four years has been a big motivator for us to continue doing what we do. I believe having an intervener is the key for ensuring accessibility and bringing out the potential of students who are deafblind.

At SBES, we are determined to partner with districts to provide quality intervener services to as many students with deafblindness as possible. For more information about our agency and what we do, please visit our website at www.sbesinc.com or call (409) 455-6559, or email us at info@sbесinc.com.

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State Deafblind Projects: National Survey

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Children who are deafblind represent the smallest percentage of the special education population and the most diverse group of learners (Hartman & Weismer, 2016). Children and youth who are deafblind have significant and unique learning needs that require intensive and individualized support and accommodations.

Teachers and service providers, who have not received professional development in the area of deafblindness, require specialized deafblind-specific training and support in order to develop programs which meet the needs of children and youth who are deafblind. Few school districts have even one teacher with this kind of specialized knowledge. State Deafblind Projects (SDBPs), funded by the U.S. Department of Education, Office of Special Education Programs, maintain an annual child count and efforts towards improving services and outcomes for

children who are deafblind. Due to this unique position, SDBPs have a uniquely intimate understanding of the needs of this population.

Part of the charge of the SDBPs, as detailed in the “Notice Inviting Applications (NIA)”, is to address the need of interveners as a means of access and support for learners who are deafblind. An integral role of the intervener is to support the development of reciprocal communication skills for students with deafblindness. Access to communication is inextricably tied to the student’s quality of life (Sacks & Zatta, 2016). Communication impacts all areas of a child’s life, including developing social relationships, access to literacy, educational access, and opportunities for higher academia and/or career readiness. If these unique learning needs are not addressed, children with deafblindness are at risk for falling far behind their peers in content acquisition and the development of overall world knowledge, thus leading to potential exclusion from the classroom, family, and community.

Introduction

In July 2022, a survey was sent to all U.S. Department of Education, Office of Special Education Programs (OSEP) - funded State Deafblind Projects (SDBPs). The purpose of this article is to summarize what was gleaned in regards to the current practices of the SDBPs related to interveners and intervener training. The authors’ summary of the results revealed many important facts regarding the

profession of interveners throughout the United States, including similarities and differences in training, certification/credentialing and state-level recognition.

The main priority of the SDBPs is to provide technical assistance to schools and educational teams that have a student or students with deafblindness. The school is typically seeking to gain knowledge and skills in the area of deafblindness, which may include communication techniques, curriculum modification, evidence-based practices for learners who are deafblind, the role of intervention, etc. The SDBPs respond to this call within their framework, free of charge to the requesting party. Depending on the need of the classroom and/or school, a more intensive, detailed plan may be negotiated and agreed upon (intensive technical assistance). The SDBPs leverage the expansive needs across their respective states with the modest federal fiscal awards that they receive, and take the best course of action to meet the supply and demand of these varied needs related to interveners.

The OSEP-funded National Center on Deafblindness (NCDB) lists qualified personnel and interveners as one of their main initiatives, as do many of the SDBPs. NCDB acts as a peripheral support to the SDBPs supporting their efforts around this initiative through various means, such as webinars, communities of practice (CoPs), professional learning communities (PLCs), etc. SDBPs may rely on these resources as they design their outcomes with respect to their state-specific

demands, and determine the best means by which they will create and support training for interveners.

The authors are pleased to report that, through analysis of the data that was obtained, it was determined that the SDBPs share more similarities than differences in the intentions and outcomes of each SDBP. This indicates progress towards a more cohesive vision and perspective on certification requirements and training methodology.

Methods and Results

This survey was created to capture the essence of what the current intervener practice is within each state and to establish any uniqueness from state to state. Responses were limited to Likert-like, open-ended and yes/no questions. An email invitation was sent out to all of the SDBPs using an email delivery service (Constant Contact). Seventeen SDBPs responded to the initial survey. Because the goal of this assessment was to have full SDBP participation, the initial data from 17 projects were summarized and held aside until the remaining projects could be reached. There was a follow-up request for an interview with the projects that did not initially respond to the survey. Interviews were then conducted with 30 projects via zoom, phone call, or emails. Five projects did not respond to any requests and are therefore not represented. In summary, out of the possible 52 project respondents, data was collected from 47 projects.

Every state and two territories (Washington, DC and Virgin Islands) are included in projects in some form, even though the management and structure of the project may vary. For example, the New England Consortium of Deafblind Technical Assistance and Training comprises five states; Connecticut, Massachusetts, Maine, New Hampshire and Vermont. Additionally, Washington, DC is managed by the Maryland project, the Pacific Islands are managed by Hawaii project, and the Virgin Islands are managed by the Florida project.

All data was aggregated and reported in this article. In addition, the interview process provided the opportunity to collect additional information beyond that found through the survey. Please note that the survey could not be conducted anonymously as was the original intention, due to the need for full nationwide participation.

The following questions were posed (Q = question, R = response):

1. Q: Approximately how many students with deafblindness in your state are currently receiving intervener services?

R: The majority of SDBPs reported that there are currently students who are receiving services from an intervener in the classroom setting. Three projects reported that no students are receiving intervener services. The total number of

students with deafblindness who have intervener services varies by state, and the overall range is from 0 to 30 students.

1A Q: Of those interveners, how many have earned either the national intervener credential or the NICE certificate?

For clarification purposes, a ‘certificate’ entails completion of the Open Hands, Open Access (OHOA) modules and successful review and submission of the portfolio . A ‘credential’ requires college-level coursework plus a portfolio submission.

R: This data includes only the 17 projects that responded to the initial survey. Of the 30 projects interviewed, the results were varied, and those results aren’t reported here. Of the 17 projects, 8 projects reported that of the participants involved in training, 0 completed the full process to obtain the certificate or credential. The other 9 projects reported that out of 81 participants in intervener training, 43 obtained the certificate or credential. The numbers reported are low in consideration of the NCDB annual child count for children who are deafblind.

1B Q: If interveners have not earned their credential or certificate, what barriers have prevented this?

R: SDBPs reported the following:

- The issue of qualified personnel for children and youth who are deafblind (e.g., interveners and teachers of the deafblind) is not mentioned in IDEA

- Thirty- six SDBPs do not yet have intervener services offered as a related service option in their IEP system.
- Upon completion of intervener training, some participants change positions (that are more in alignment with their respective level of training) or leave the education field.
- There is a severe lack of financial incentives for interveners. In many states, there are no financial incentives offered to interveners who complete a training program and become certified or credentialed.
- Completing a portfolio is a long and tedious process, and there is also a fee when the portfolio has been submitted to an accrediting body.
- Recruitment and retention of interested intervener candidates has always been challenging. After the COVID-19 pandemic, the field of special education, and especially in the area of deafblindness, has been severely impacted, and SDBPs are having a difficult time finding interested individuals who want to pursue a course of training.
- Even after the training is completed, retention of the intervener is very difficult, based on the issues mentioned above.
- Most school systems in the country are unclear about the role of the intervener and about how to locate an intervener to fulfill the service listed on a student's IEP.

- School systems may not feel comfortable about adding “intervener services” to a student’s IEP without understanding the specialized role, training, and how to locate and hire a qualified intervener. Adding the intervener service to an IEP could leave the school system vulnerable to being out of compliance.
- Most school systems in the country are unclear about how the role of an intervener differs from a sign language interpreter or a ‘signing paraprofessional’ or ‘sign support personnel.’

2. Q: Does your state education agency (SEA) and/or state statutes recognize the term “intervener”, and/or are they accepting of the term to be used on IEP’s?

R: Eleven projects reported that their state education agency (SEA) officially recognizes the role of intervener. Additionally, of those 11 projects, 3 reported that they have the term listed on the state Individualized Education Program (IEP) form. Two additional projects reported that state-level recognition is in progress. No significant pending progress was reported by 36 projects.

2A Q: Has any school system in your state allowed for the term “intervener” to be written in on a student’s IEP?

R: Yes - 36 projects, No - 10 projects, Unsure – 1 project

This question was clarified as meaning whether educational teams, in a minimum of one local system, have agreed upon adding the intervener service by either writing in the term or writing a description of the role that is needed to support the student. Currently, an intervener may be added as a service through the IEP process under supplementary aids and services or as a related service. IEP teams often disagree and do not support writing in a description of the role or using the term ‘intervener’ on an IEP, and the most often stated reason is that there is no official state or federal recognition. Of particular interest, 3 projects reported that they have partner agencies that support the role of community interveners, who support individuals who are deafblind in their home and community. No further information was reported regarding community interveners.

3.Q: How does your SDBP support the training of interveners? Check all that apply.

R: Responses are shown in the table below.

Table 1

Responses of how SDBP supports the training of interveners.

Approaches to Training Intervenors	# of SDBP's Utilizing This Approach	Option for Intervener to Obtain Certification?
Open Hands Open Access (OHOA) Self-Paced Modules	38	Yes
Institutes of Higher Education (IHEs)	4	Yes
Offering both OHOA and IHEs	5	Yes
Curriculum designed by SDBP	2	Yes
No formal training offered	3	No

Many SDBPs mentioned that they have supported both the certificate and the credential path for intervener training. At the time this article was written, there was more data on the intervener training certificate process, because more states were currently participating in that avenue of training. As a result, this article does not address the specifics of the higher education programs (IHE) and intervener credentialing. The authors suggest that more data be gathered from the participants in the IHE programs.

4. Q: If your SDBP provides the training for interveners, briefly describe how that is done (e.g. SDBP staff provide intervener training, OHOA modules, etc.)

R: In some cases, project staff and grant funds are used to direct and host training activities that support intervener training. As reported, the Open Hands Open Access (OHOA) training modules have been a successful tool for training interveners across the states. Due to limited staffing and resources however, some SDBPs collaborate across state lines and host intervener training collaboratively in order to meet the demand. In other instances, some SDBPs contract professionals with expertise in the role of the intervener and/or intervener training to host and facilitate sessions. When a SDBP supports trainees through a university or college (IHE), the project often offers to supervise and coach the intervener during the practicum experience. When a SDBP chooses the IHE learning path, the individual is financially supported by either the SDBP and/or their local school system.

4A Q: At the completion of the training for interveners in your state, what is offered to the participants (e.g. state CPD/CEU's, certificate of attendance, credential, etc.)

R: As part of the interview process, some SDBPs reported that after the completion of training, they offer a certificate of attendance that may be used for professional development hours, which may be accepted by a human resources

department or other entity that approves continuing education units (CEUs) specific to a profession (i.e. speech pathologists, orientation and mobility specialists, etc.). One state reported obtaining successful accreditation of RID (Registry of Interpreters for the Deaf) CEUs for specific OHOA modules through a sponsoring agency. However, there is not yet national approval for all OHOA modules. Other states reported that they are in the process of obtaining CEU credit approval from RID, yet it is unclear as to which modules for which they are seeking sponsorship.

Summary of Additional and Anecdotal Information

Several SDBPs that are utilizing the OHOA modules also added a practicum experience based on their own SDBP-designed needs assessment. It is reported that aspiring interveners have experienced challenges with the portfolio portion of the intervener certifying process. SDBPs reported that efforts focused on additional supervision and direct support to aspiring interveners will lead to completion of the portfolio process and, thus, certification through the NICE Process. However, SDBPs have reported that completion of a portfolio and becoming certified does not always guarantee a pay increase. Successfully completing the intervener portfolio is a massive undertaking, and some interveners complete it in one year or more, while others have completed a portion and then stopped, because of the extreme effort, commitment level, and lack of long-term financial gain.

Additionally, there is anecdotal testimony that the heavily text-based design of the OHOA modules can be taxing, if not impossible to complete for participants whose first language is not English, including Deaf people whose primary language is American Sign Language.

One of the many goals that each SDBP is charged with is to build local capacity within their state, specifically around interveners and intervener training (as clearly noted in the 2018 NIA for SDBPs). This is done mostly through the provision of technical assistance (TA) and training. What respondents have indicated is that, despite their state-level involvement, they have each constructed a well-thought-out process, including research on implementation science, in order to meet this demand. Some projects have implemented the use of detailed TA agreements that outline the commitment and fiscal contribution of all parties. Ultimately, SDBPs are finding successful strategies to implement intervener training and systemic change. However SDBPs are working with funding resources that are stagnant, a budget that is less than adequate, minimal staffing, and a lack of state and federal level mandates.

Each SDBP is required to report progress in the Annual Performance Report (APR), specifically on interveners in their respective state/territory. In order to do this accurately and while maintaining the fidelity of the grant, SDBPs take measures to ensure stakeholder input and direction. Many do this by distributing

annual surveys/needs assessments to try to gain an understanding of what their constituents need regarding students with deafblindness.

Conclusion

In summary, what has been learned from the survey and subsequent interviews is that the intervener profession is a service that is in demand in most states. However, interveners are not recognized by the majority of state education agencies, nor are intervener services officially written in the Individuals with Disabilities Education Act (IDEA). At the time of this writing, certain consumer groups are advocating on the national level to have interveners recognized as related service providers under IDEA, as is the case with the Cogswell-Macy Act.

Highlighting the most critical challenges related to interveners:

- There is a lack of cohesiveness in the field of deafblindness regarding intervener training, and there is a need for more discussion around this topic.
- There needs to be more discussion about effective and efficient tools that will be used by IEP teams to determine the need for intervener services.
- Without an intervener, most students with deafblindness are not able to gain adequate access to the educational environment, learn and communicate.
- Families are struggling in their request to local school systems to provide intervener services.

- Families may initiate due process proceedings in an effort to obtain intervener services for their children who are deafblind.

Recommendations for the future:

- Although intervener services are not currently listed as a related service in IDEA, the service can be written into a student's Individual Education Plan. The list of related services in IDEA is not exhaustive, and services are to be based on the needs of the student who is deafblind.
- Many SDPBs report that they are hopeful that the role of the intervener will be included in the reauthorization of the Individuals with Disabilities Education Act (IDEA) as a related service.
- Have discussions around intervener training, which will streamline the process and contribute to a common understanding of the training options.
- Develop incentives to attract individuals to become trained interveners, with competitive pay that will help retain those interveners in the field.
- Qualified personnel (e.g., interveners and teachers of the deafblind) will be available in the field of deafblindness.
- Early Childhood programs will implement intervener services with young children who are deafblind, and place a strong focus on communication development at an earlier age.

- SDBPs will be able to build capacity and systems change related to intervener services in each state for children who are deafblind.

Overall, SDBPs recognize the progress being made related to intervener services as they continue to strive for the development of educational services that are adequate to the needs of all students who are deafblind, and provide them with access to learning, communication, and overall development.

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To locate your State Deafblind Project, please visit

<https://www.nationaldb.org/state-deaf-blind-projects/>



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National Center on Deaf-Blindness: Taking Action to Advance the Recognition and Use of Interveners

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National Center on Deaf-Blindness

Interveners provide an essential educational service for many children who are deaf-blind. Their unique training gives them skills to promote their students' communication competence and help teachers provide students with access to the general education curriculum. Since 2011, the National Center on Deaf-Blindness (NCDB; formerly the National Consortium on Deaf-Blindness) has collaborated with a wide range of stakeholders on activities to improve the recognition and use of interveners in the U.S.

As a national technical assistance (TA) center, part of NCDB's role is to bring individuals and agencies together to work on important initiatives that improve results for children who are deaf-blind. In particular, NCDB works closely

with state deaf-blind projects in every state, as well as Puerto Rico, the District of Columbia, the Pacific Basin, and the Virgin Islands. Together, NCDB and the state deaf-blind projects function as a network funded by the U.S. Department of Education's Office of Special Education Programs (OSEP).

This article describes initiatives, beginning with the development of *Recommendations for Improving Intervener Services* (NCDB, 2012a), that NCDB has engaged in over the past decade with state deaf-blind projects, families, university faculty, and others committed to making high-quality intervener services available for children who are deaf-blind. The authors recognize that NCDB's activities are part of a much larger effort that includes many others, such as those whose work is described elsewhere in this issue.

Development of the Intervener Recommendations

In 2011, OSEP asked NCDB to conduct an initiative to 1) gather information about current intervener services across the country and 2) develop recommendations for improving national, state, and local intervener services based on an analysis of the information collected. This resulted in the publication of [*Recommendations for Improving Intervener Services*](#) in 2012.

NCDB's efforts were based on many years of successful advocacy and work by professionals and family members who pioneered the foundational infrastructures for intervener services in place at the time the recommendations

were written. As such, the recommendations should be viewed as “an evolutionary extension of work begun by others” (NCDB, 2012b).

In addition to the final recommendations, the recommendations website includes extensive information about what NCDB learned during the information-gathering phase, rationales for each recommendation, and implementation strategies. The overall intent was to inform and guide not only NCDB’s activities but also the work of others who are dedicated to improving intervener services (e.g., families, state deaf-blind projects, university faculty, interveners, administrators, educators, and researchers).

Data Collection

Because it was important to ensure that the recommendations were informed by a range of perspectives and the best available knowledge at the time, NCDB used a variety of methods, including extensive literature searches, surveys, interviews, and visits to state deaf-blind projects with long histories of active involvement in intervener services. These efforts enabled NCDB to collect information from a range of individuals across the U.S., including family members of children and youth with deaf-blindness, state deaf-blind project personnel, interveners, and early intervention and educational administrators (NCDB, 2012c).

Information was collected on a variety of topics, including definitions of and beliefs about interveners, training programs and methods,

credentialing/certification, challenges states and districts face (e.g., recruiting, training, job classification, salaries), challenges interveners face, and services and supports needed to improve the infrastructure of intervener services nationwide. Summaries of survey data can be found on the recommendations website.

Key Findings

Findings from the data-gathering phase, which resulted in specific recommendations and implementation strategies, suggested there was

- A lack of a consistently-applied definition and variation in the way the term “intervener” was used
- A lack of recognition and acceptance of intervener services among educational personnel
- Widespread support for certification and/or credentialing of interveners
- Strong support among state deaf-blind project personnel and educational administrators for two types of training methods: child-specific training provided to an intervener and team in combination with large group training and university or college coursework with support from a state deaf-blind project
- Considerable variation in experiences with intervener services from family to family (e.g., the process of determining a need for intervener services and obtaining them if appropriate)

After data collection, NCDB facilitated six 2-hour online discussion panels, consisting of individuals with a strong interest in intervener services, to consider what was learned from the information gathered. Participants included state deaf-blind project personnel, university faculty, parents/guardians, teachers, and administrators.

Scope of the Recommendations

The final ten recommendations were based on analysis and interpretation of the data and insights gained from panel discussions. They addressed four goal areas: recognition, training and support, families, and sustainability (see Table 1).

GOAL 1: Increase recognition and appropriate use of intervener services for children and youth who are deaf-blind.

The two recommendations for this goal provide strategies to coordinate efforts to improve the understanding and use of intervener services in the U.S. and establish intervener services as a universally understood related service or early intervention option. These recommendations are intended to raise awareness of the value and purpose of intervener services among families and educators and promote policies and practices that support intervener services for children who are deaf-blind when an IEP or IFSP team determines they are needed.

Table 1
Intervener Services Recommendations

<p>Goal: Recognition</p> <ol style="list-style-type: none"> 1. Develop a coordinated and expanded national approach to provide state and local early intervention and education agencies with information and tools needed to understand and use intervener services. 2. Coordinate and expand efforts to inform national, state, and local policies and practices so that they reflect and support the provision of intervener services for a child or youth who is deaf-blind when needed.
<p>Goal: Training</p> <ol style="list-style-type: none"> 1. Develop a national open-access intervener-training curriculum that aligns with the Council for Exceptional Children's <i>Specialization Knowledge and Skill Set for Paraeducators Who Are Interveners for Individuals with Deaf-blindness</i>. 2. Develop strategies to ensure that interveners have knowledgeable supervisors and access to experts in deaf-blindness who can provide consultation and coaching. 3. Expand opportunities for interveners to obtain a state or national certificate or credential. 4. Establish a national intervener jobs clearinghouse to assist in intervener recruitment and job placement. 5. Provide resources (e.g., technology applications, technical assistance) that help interveners establish organized online and face-to-face communities where they can improve their knowledge and skills by sharing ideas and experiences with each other.
<p>Goal: Families</p> <ol style="list-style-type: none"> 1. Develop information resources and tools and disseminate them to family members to increase their knowledge of intervener services and enhance their ability to communicate effectively with educators, administrators, and others about those services. 2. Develop and implement strategies that create opportunities for families to share ideas and experiences and work together to address intervener services at local, state, and national levels.
<p>Goal: Sustainability</p> <ol style="list-style-type: none"> 1. Congress should ensure the long-term sustainability of intervener services for children and youth who are deaf-blind by including them under the definition of "related service" and as an early intervention service in the next reauthorization of the Individuals with Disabilities Education Act (IDEA).

GOAL 2: Establish a strong national foundation for intervener training and workplace supports.

The five recommendations for Goal 2 emphasize the need to strengthen the system of preparing, training, and supporting interveners. They are intended to increase the number of well-trained interveners available for children who require their services and help ensure that interveners have knowledgeable supervisors and access to experts in deaf-blindness. Many survey and interview respondents and panel participants expressed concerns about focusing on interveners while not simultaneously addressing the need for teachers of the deaf-blind. These responses led to the creation of Recommendation 4 (“Develop strategies to ensure that interveners have knowledgeable supervisors and access to experts in deaf-blindness who can provide consultation and coaching”). NCDB’s Intervener Initiative was later expanded to the Intervenors and Qualified Personnel Initiative.

GOAL 3: Build the capacity of families to participate in decisions about intervener services for their children and in efforts to improve these services.

Input received from families indicated the need for specific family support. The two recommendations for Goal 3 involve providing tools and resources to help families effectively participate in decisions made about intervener services for their children as well as opportunities to work together to improve local, state, and national intervener services.

GOAL 4: Sustain high-quality intervener services across the nation through the inclusion of intervener services in national special education policy.

The single recommendation for Goal 4 is to include intervener services under the definition of "related service" and as an early intervention service in the next reauthorization of the Individuals with Disabilities Education Act (IDEA). This recommendation was the last one in order to acknowledge that while inclusion of intervener services in IDEA would enhance their long-term sustainability, it is important to first have systems in place "to recruit, train, and provide on-the-job support and supervision for interveners and to assist IFSP/IEP teams in determining a child's need for intervener services." Without this foundation, schools and other agencies would have difficulty meeting the demand for qualified interveners.

Implementation of the Recommendations and Current Activities

Increasing Recognition and Use

Consistent with the recommendations for Goal 1, to increase recognition and use of interveners, many NCDB activities have focused on developing products to promote intervener services and highlighting the work of state deaf-blind projects and other agencies.

Table 2

National Center on Deaf-Blindness Products and Resources

[Recommendations for Improving Intervener Services](#)

[Interveners and Qualified Personnel Initiative](#)

[Intervener Services and Interveners in Educational Settings: Definition](#)

[Are Intervener Services Appropriate for Your Student With Deaf-Blindness?: An](#)

[IEP Team Discussion Guide](#)

[Tools to Employ and Support Interveners](#)

[Increasing Recognition and Use of Qualified Personnel: State Success Stories](#)

[Open Hands, Open Access \(OHOA\): Deaf-Blind Intervener Learning Modules](#)

[Intervener Training Resources for State Deaf-Blind Projects](#)

[Coaching Practitioners of Children Who Are Deaf-Blind](#)

[National Intervener Certification E-Portfolio \(NICE\)](#)

Products

NCDB collaborates with a range of individuals and agencies to develop products that promote understanding and use of intervener services. One of the implementation strategies for Recommendation 1 was to "develop and disseminate a consistently applied national definition of intervener services, including clarification of the occupational role of the intervener." In response, NCDB

conducted a review of existing definitions and documents, including the key definition described by Alsop et al. (2000, p. 7), as well as extensive input from multiple stakeholders. Based on this information, a definition was created, first published in 2013, and then updated in 2018 and 2021.

In addition, in 2016, NCDB collaborated with state deaf-blind project personnel and family and university representatives to develop a guide for IEP teams to help them determine if an intervener was appropriate for a student with deaf-blindness. *Are Intervener Services Appropriate for Your Student With Deaf-Blindness?: An IEP Team Discussion Guide* was based on existing documents produced by state deaf-blind projects, with one by the Texas Deafblind Project being the primary source. The guide aims to help teams determine if intervener services should be provided for a student as part of their related services and supplementary aids and services. Because intervener services are not specifically listed as a related service in IDEA, in 2018, Linda McDowell, NCDB's director at that time, asked OSEP for clarification. In response, Ruth E. Ryder, OSEP's acting director, provided informal guidance in a letter stating, "If the IEP Team determines that a particular service, including the services of an intervener, is an appropriate related service for a child and is required to enable the child to receive FAPE, the Team's determination must be reflected in the child's IEP, and the

service must be provided at public expense and at no cost to the parents. 20 U.S.C. §1414(d)(1)(A)(i)(IV) and §1401(9)” (U.S. Department of Education, 2018).

Most recently, NCDB published a webpage called *Tools to Employ and Support Interveners*, with factsheets and links to information for educators and families. Topics include the roles and responsibilities of interveners, the teacher’s role with an intervener, and intervener training and certification. Additionally, NCDB’s Interveners and Qualified Personnel Initiative webpage includes links to extensive resources, such as current training for interveners and certification options.

All of these products are freely available on NCDB’s website and widely disseminated via email and social media and during presentations, training, and consultations (see Table 2 for direct links to each product).

Highlighting State Deaf-Blind Project Activities

Under IDEA, OSEP funds state deaf-blind projects to improve services and outcomes for children who are deaf-blind. Over the years, NCDB has highlighted the exciting work the state projects have accomplished to achieve systemic change related to intervener services with the support and grassroots efforts of families. For example, state legislatures now officially recognize interveners in Illinois, Minnesota, Utah, Virginia, West Virginia, and Wisconsin (NCDB, n.d.-a). Other

state projects continue to work with their families, educators, and other stakeholders to achieve similar outcomes.

During collaborative conference presentations, NCDB and state deaf-blind projects have further highlighted the state projects' work, emphasizing the need for recognition and acceptance of intervener services in state legislation. In addition, NCDB's website and social media platforms feature stories, news, and successes related to intervener services.

Support for Intervener Training

A key outcome of NCDB's work related to intervener training involved the development and continued training, consultation, maintenance, and technological support of the *Open Hands, Open Access: Deaf-Blind Intervener Learning Modules (OHOA)*. The modules were created over several years, from 2012-2017, in response to Recommendation 3, to develop a national curriculum for intervener training that anyone could use. A diverse group of more than 160 experts worked to develop the 27 modules in the series, including personnel from state deaf-blind projects, institutes of higher education, and family organizations, as well as teachers and adults who are deaf-blind (NCDB, n.d.-b). The modules were designed to be incorporated into comprehensive intervener training programs offered by qualified agencies and institutions and, on their own, do not serve as an intervener training program.

Use of the OHOA Modules

NCDB provides consultation and technical support to state deaf-blind projects and universities who use the OHOA modules for intervener training and has established groups where professionals can share how they use the modules and discuss challenges and solutions. The groups began in 2013 with the formation of a community of practice, which met online to share materials, participate in group problem-solving, and form work groups to address common issues related to use of the modules.

In 2019, NCDB started a peer-learning community called the Training Interveners Group, consisting of state deaf-blind project staff who train interveners. They meet quarterly to discuss the training, promotion, and employment of interveners, state-specific systems change activities and materials for fostering the intervener model.

NCDB also established a peer-learning community called Improving and Implementing Professional Development Practices, which provides support to state deaf-blind projects working to embed the OHOA modules into their state professional development systems for both certified educators and paraeducators. State projects in this peer-learning community come together to discuss professional development systems and best practices, learn from guest experts about professional development systems, and develop plans to improve

professional development practices. Although the modules were primarily created for intervener training, they are also used by many state deaf-blind projects to train educational teams that include certified educators and individuals engaged in intervener training. It is vital that interveners be supported by educational team members who have training and information about deaf-blindness and effective intervention. In addition to the OHOA modules, NCDB is currently developing professional development modules for early intervention providers, teachers, and related service providers (NCDB, 2022).

Intervener Training Pilot Project

During the 2017-2018 school year, NCDB conducted an Intervener Training Pilot Project that used the OHOA modules and the National Intervener Certification E-Portfolio (NICE) system in conjunction with consultation and coaching by seven state deaf-blind projects (AR, CA, DE, IL, LA, NC, and VA). Of the 20 participants in the pilot, 83% completed the course and half went on to pursue NICE certification (Probst & Morgan, in press). The materials from this project, *Intervener Training Resources for State Deaf-Blind Projects*, are available on NCDB's website and have been used by many state deaf-blind projects in their intervener and educational team training.

Competencies for Interveners

In 2021-2022, NCDB participated in updating the Council for Exceptional Children's (CEC's) competencies for *Specialty Set: Education Paraeducator Intervener for Individuals With Deafblindness* (PDBI). For this process, interveners were recruited to collaborate with NCDB staff, state deaf-blind projects, and experts in the field in a work group to conduct research and make suggestions to revise "Standard 7: Collaboration" of the competencies. **Support for Certification**

NCDB's 2012 recommendations called for expanding opportunities for interveners to obtain a state or national certificate or credential that would allow them to demonstrate their attainment of the CEC's intervener competencies. Like the OHOA modules, the NICE System was designed using a collaborative approach that involved interveners, state deaf-blind project personnel, and university experts. It is managed by the PARAprofessional Resource and Research Center (PAR²A Center) at the University of Colorado. The NICE process involves reviewers who are required to meet criteria regarding expertise related to intervener services and working with students who are deaf-blind.

NCDB supports the NICE digital platform so the PAR²A Center, reviewers, and users can effectively navigate the interface. Additionally, NCDB provides consultation and training to state deaf-blind projects that support candidates pursuing NICE certification. An advisory board consisting of family leaders, adults

who are deaf-blind, professional organizations and universities, and NCDB staff also provides input and guidance regarding the NICE process. The PAR²A Center manages portfolio submissions, the NICE Review Board, and scoring, and makes all certification determinations.

Support for Interveners

In 2019, NCDB began collaborating with individuals and agencies in the U.S. and Canada on a planning committee to develop an Intervener/or Community of Practice (the “er/or” suffix represents the different spellings of the term in each country). Participants included individuals from state deaf-blind projects; intervener training programs in the U.S. and Canada; the Provincial Outreach Program for Students with Deafblindness in Richmond, British Columbia; the Canadian Deafblind Association in British Columbia; the Intervenor Organization of Ontario; the PAR²A Center; and the National Resource Center for Paraeducators. The first activities began in 2022 with online get-togethers of more than 30 interveners from the US, Canada, and several other countries. Activities included small- and large-group discussions, presentations, and socializing. The planning committee hopes to recruit interveners to take over the leadership of this community of practice.

Plans for the Future

Since the *Recommendations for Improving Intervener Services* was published a decade ago, NCDB's objectives and activities related to intervener services have markedly increased. Although the progress NCDB and others have made is significant, there is still much work to be done to meet the high need for interveners nationwide. NCDB remains committed to collaborating with partners to develop resources for training, professional development, and recognition of interveners, and will continue to support innovative programs and processes to recruit, train, coach, and retain them. Importantly, NCDB's intervener work does not occur in isolation but in close collaboration with a national network of state deaf-blind projects, family organizations, institutes of higher education, interveners, educators, and many others. Stakeholder engagement will continue to serve as a critical strategy for addressing ongoing and emerging needs to increase the recognition and availability of highly-trained interveners for children who are deaf-blind.

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Intervener Training Through Higher Education

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**Erin Kline, Delaware Statewide Programs for the Deaf, Hard of Hearing and
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Currently, many educational systems have not recognized the value of
intervener services for children who are deafblind. In many situations, a
paraprofessional aide has been hired for a student without having any specialized

training or preparation. In some states, paraprofessionals have been trained through workshops, conferences, in-service activities, and/or short-term technical assistance. However, these methods of training have been very diverse and have not generally yielded consistency of competence or implementation with children and youth with deafblindness. As the intervener practice has become more recognized, understood, and valued, it has become evident that these paraprofessionals need deafblind-specific training.

Each aspiring Intervener will undoubtedly choose the training path that fits their individualized needs and goals. There are several benefits to taking the path of training through a university/college intervener training program.

(1) This path is systemically recognized as the foundation for professions (i.e. Interpreters, Orientation and Mobility Specialists (O&M), Speech Language Pathologists (SLPs), etc.).

(2) State and local systems are more inclined to recognize the value of coursework through higher education.

(3) Universities/colleges have structures in place with checks and balances to ensure the quality and sustainability of training programs. They have:

- An approved level of rigor.
- A process for ensuring that instructors and supervisors are qualified.

- Quality controls for the program over time (i.e. ongoing monitoring, evaluation of courses, instructors, etc.).
- High accountability for learning and performance.
- Consistent measurement of knowledge gain through assignments, tests, discussions, etc.
- Individualized personal attention from instructors, mentors, coaches, etc.
- A supervised practicum measuring implementation of intervener knowledge and skills.
- Potential for long-term sustainability.

A unique part of intervener training programs through higher education, is the participation by the intervener in a supervised practicum. The fact that the intervener is collaborating with a coach, who is qualified and has experience in the field of deafblindness, ensures high accountability for learning and performance. This is done by measuring the implementation of the intervener's knowledge and skills. In turn, not only are interveners learning, but they are also applying what they have learned with an actual individual who is deafblind, while at the same time, being coached by someone who has experience in the field of deafblindness.

For the past two and a half years, I have been the Professional Development Coordinator for the National Intervener and Advocate Association (NIAA). I was asked to serve in this capacity because not only have I been a part of the field of

deafblindness for over 15 years, but also because I have a Masters' Degree focused in early intervention with those who are deafblind.

In my role with NIAA, I coordinate the credentialing of interveners. I review their portfolios and award them with the Deafblind Intervener Specialist Credential. In this role, I've had the joy of learning about interveners from all across the United States. Through narratives, pictures, work samples, videos, and a variety of other creative avenues, these interveners have displayed their knowledge and skills in working with individuals who are deafblind. These interveners have been of different ages and different backgrounds with a variety of professional and educational experiences. However, despite their differences, they have all shared one thing in common: they have a passion for what they do and for the children and youth with whom they work. They act as a bridge between children who are deafblind and the world around them.

Currently, there are four universities in this country that offer Intervener Training Programs. Each of these programs is described below in the order in which they were established.

Linda Alsop, Utah State University

Utah State University (USU) was the first to provide competency-based higher education training for interveners. The curriculum is based on the [Council for Exceptional Children Deafblind Intervener Competencies](#), and the courses are

designed to prepare students to work as interveners with children and youth who are deafblind. The USU Intervener Training Program was developed and field tested from 2005 to 2007 as part of a federal FIPSE Grant (Funds for the Improvement of Post-Secondary Education). Evaluation data showed the coursework to be effective and rated highly by students. In 2008, this training program became part of a Deafblind Program of Studies, and was officially adopted by USU Distance Education program.

The USU Intervener Training Program has been offered year round since then, and to date, has provided training to hundreds of interveners. It is a hybrid training model in that, in most cases, prospective interveners complete the coursework while on-the-job with a student who is deafblind. Course content, readings, and assignments are designed to be applicable to their actual day to day work. Besides being focused on the training of interveners, the coursework can be useful to teachers, related service providers, technical assistance providers, parents, and others working with children and youth with deafblindness. Approximately 1700 individuals have participated in the coursework since it was first offered. The Intervener Training Program consists of the 3 courses listed below, which must be completed in sequential order.

Course 1: Introduction to Deafblindness

This course is an introduction to deafblindness and its impact on learning and development. It is an overview of the sensory systems and the issues that arise when an individual has a combined loss of vision and hearing. Emphasis is on the unique needs of the individual with deafblindness and on effective intervention strategies for interveners.

Course 2: Combined Vision & Hearing Loss

This course focuses on communication, language, and literacy for individuals with deafblindness. It also addresses issues related to sensory functioning and integration, orientation and mobility, and self-determination. Emphasis is on the application of effective intervention strategies for individuals with deafblindness.

Course 3: Intervener Practicum

This course is designed to give students on-site experiences working one-to-one with an individual who is deafblind. During the practicum, students receive support and guidance from an intervener coach, and they complete a portfolio which demonstrates their knowledge and skills in deafblindness in accordance with the set of Council for Exceptional Children (CEC) competencies for interveners. An instructor evaluates the performance of interveners during the practicum, grading all practicum assignments and the completed portfolio. The instructor provides guidance and support to prospective interveners throughout the

Practicum. An intervener coach conducts a minimum of three coaching sessions with the student to provide feedback and guidance.

During the Practicum course, prospective interveners are expected to do the following:

- Spend a minimum of 100 hours of contact time with a child/youth with deafblindness, providing one-to-one intervener services.
- Demonstrate the knowledge and skill competencies needed to be an intervener and demonstrate proficiency in the implementation of intervention strategies with the child/youth with whom they work.
- Work cooperatively and collaboratively with classroom teachers and educational teams.
- Participate in three coaching sessions with a trained intervener coach (either on-site or virtually) and implement changes and suggestions as appropriate.
- Complete a 10-15 minute video demonstrating the application of effective deafblind-specific intervention practices with a child/youth with deafblindness.
- Demonstrate professional behavior and professional ethics throughout the practicum.

- Complete a portfolio based on the National Intervener Competencies, which provides evidence of knowledge and skill competencies.

Upon the successful completion of the coursework, practicum and portfolio, the student is eligible to become a Nationally Credentialed Deafblind Intervener Specialist (DBIS) through the National Intervener and Advocate Association (NIAA). To learn more about the program, contact Linda Alsop, Director Deafblind Programs, Institute for Disability Research, Policy & Practice, via phone at (435) 797-5598 or via email at linda.alsop@usu.edu.

Beth Kennedy, Central Michigan University

The Central Michigan University (CMU) DeafBlind Intervener (DBI) Program was developed in 2015, receiving the first cohort of student-interveners in August 2016. Beth Kennedy, PhD, who trained as a Teacher of the DeafBlind at Boston College under Dr. Barbara McLetchie, is fluent in American Sign Language. Dr. Kennedy completed her dissertation, *How Interveners Learn the Knowledge and Skills to Support Students Who Are Deafblind in School Settings* and has incorporated that research into the CMU coursework.

The CMU DBI is a 12-credit, undergraduate certificate program that is offered online. Prospective interveners from across the county can study under Dr. Kennedy and receive onsite coaching from their respective state deafblind project

staff. The DBI coursework is designed to augment what prospective interveners are already learning by supporting a child or young adult who is deafblind. The four DBI classes are completed in order as follows:

- DBI 101: Covers the diversity of the DeafBlind population, introduces the role and responsibilities of interveners, and the requisite components included in the process of intervention for supporting students who are deafblind.
- DBI 201: Provides an introduction to communication and language development and teaches student interveners to expand the expressive and receptive communication skills of students who are deafblind.
- DBI 301: Includes a broad range of strategies for interveners to implement in the field when supporting a person who is deafblind to achieve their potential and gain access to their environment.
- DBI 302: Focuses on ethics and further development of skills through practicum experiences and the final phase of portfolio development.

Prospective interveners who complete the CMU program apply for the National Intervener Credential offered by the National Resource Center for Paraeducators, Intervenors, and Related Service Providers (NRCPara) www.nrcpara.org. To apply for the credential, prospective interveners must

develop a portfolio based on the full set of Council for Exceptional Children (CEC) competencies for interveners. The CMU **DeafBlind Intervener Program** requires student interveners to begin developing their portfolio in the first class, with most students finishing their portfolio by the end of the fourth and final class, or shortly thereafter. Because of this design, the CMU DBI takes only one academic year to complete.

CMU has high standards for online coursework. While Dr. Kennedy updates the courses for the DBI annually, based on student feedback and performance, changes have also been made to ensure that the program incorporates the most recent (2022) CEC knowledge and skill competencies. To learn more about the program, or to receive information on how to apply, contact Beth Kennedy, Director DB Central and DBI Intervener Training Program, via phone (989.774.2726) or email, Beth.Kennedy@cmich.edu .

Douglas Sturgeon & Karen Koehler, Shawnee State University

Shawnee State University's intervener program is a collaborative effort between Shawnee State University (SSU), P-12 District Personnel, the Ohio Department of Education, Office for Exceptional Children, and the Ohio Center for Deaf Blind Education (OCDBE). Support from these partners includes both financial and technical assistance for the program and recruiting assistance. The

program's development was borne out of a recognized statewide need to increase the availability of specialized services for children who have low incidence sensory disabilities. Additionally, this collaborative effort produced multiple levels of educational support for children with low incidence sensory disabilities including the development of multi-institution collaborative teacher preparation programs in the low incidence sensory disabilities areas (Blind/Low Vision & Deaf/Hard of Hearing).

Collaborative Program Development

To ensure the development of a high-quality university program to train interveners, the development team included experts in deafblindness and low incidence sensory disabilities from across the state of Ohio. The planning and development teams included personnel representing Local Education Agencies, P-12 Districts, Educational Service Centers, State Support Teams and faculty from Institutions of Higher Education. These personnel were involved in identifying and planning courses, developing program assessments, aligning CEC standards to courses and assessments, developing field expectations, and developing practicum expectations.

Intervener Program Coursework

The intervener program at Shawnee State University consists of 12 undergraduate level courses for a total of 30 semester hours of online coursework.

All program coursework is based upon the CEC standards and competencies. The intervener program is completed over a two-year period or 4 semesters. Some of the courses are full semester courses and some are ½ semester courses. This allows the students to complete up to nine hours of coursework each semester while making it manageable for adults who are working full time. The intervener program of study can be found at: <https://www.shawnee.edu/intervener-technical-certificate>

Intervener Program Candidate Recruitment

Shawnee State University relies on multiple partners to help recruit potential students for the program. The ideal candidate for the Intervener program is someone who works as a paraprofessional or aide, serving a child with a dual sensory impairment. According to the Deafblind Census, as of 8/31/2022, Ohio registered 406 children who meet the criteria for deafblindness. This speaks to the need for individuals with the specialized training the intervener program provides. Current recruiting efforts are statewide in scope but targeted especially on rural areas of the state.

Intervener Program Enrollment

The first cohort of students in the intervener program began their coursework in the fall of 2020 and completed their work in the spring of 2022. Upon successful completion of the program, they received the Shawnee State

University Intervener Technical Certificate. The second cohort of students began their coursework in the fall of 2021 and the third cohort started in the fall of 2022. This includes 10 personnel who work at the Ohio State School for the Blind or the Ohio School for the Deaf.

Lessons Learned

Now that the first cohort of students has completed the Intervener program, this provides an opportunity to reflect on the strengths and challenges of the program.

Strengths

- Collaborative model for developing the program
- Aligning to state priorities
- Flexibility of an online university provided program for working adults
- Depth and breadth of coursework, including some instruction in braille and sign
- Supervised practicum experience
- Established pathway to an Associate Degree in Paraprofessional Studies

Challenges

- Student retention in a two-year program

- Identifying and recruiting support personnel who would benefit from this training and use it with the children they support
- Continued need to educate administrators on the need for and the role of interveners
- Access to reliable technology for the students for the online coursework

In conclusion, the students who completed the program were very satisfied with the quality and content of the coursework and felt it provided them with the knowledge and skills to better support children who are deafblind.

Julie Maier, San Francisco State University

Since the Fall of 2020 San Francisco State University (SFSU) and [California Deafblind Services](#), an OSEP-funded state deafblind project, have collaborated to offer a two-semester online, university-based training program to prepare paraeducators to effectively serve learners who are deafblind (i.e., a child who is both deaf/hard of hearing and blind/visually impaired). As in many states across the country, California's need for interveners, or paraeducators with specialized knowledge and skills in deafblindness, is higher than the available trained individuals who are ready to fill these roles. Trained interveners allow school districts and agencies to effectively meet the unique individualized support needs of students who benefit from intervention services.

Over the course of two semesters, intervener candidates engage in an online course of study in two courses, *Overview of Deafblindness and the Role of the Intervener* and *Intervention Practices for Learners Who Are Deafblind*. The courses use the rigorous and nationally recognized Open Hands, Open Access: Deaf-Blind Intervener Learning Modules. Students complete the modules asynchronously and meet with instructors for three synchronous virtual class sessions each semester. The course assignments and class discussions provide a variety of meaningful opportunities for the intervener candidates to not only demonstrate understanding of intervention principles and competencies, but to also engage in personal reflection about their increased knowledge and skills and their personal practice of providing intervention to a learner who is deafblind.

Course instructors are deafblind specialists from California Deafblind Services, which is based at San Francisco State. Upon successful completion of both courses, the intervener candidate earns a university certificate of completion and nine San Francisco State continuing education units (CEU). This state-level certificate of training serves as documentation that this individual has the knowledge and skills to serve in the role of an intervener.

The cost of each course is \$240.00. Coaching and mentoring for interested candidates are offered by California Deafblind Services and local teachers, who hold a California credential authorizing them to serve a child who is deafblind.

Enrollment is open to any paraeducator, with a high school diploma (or equivalent), who is currently supporting a learner who is deafblind, or an individual who is interested in serving in this role in the future. Although, California intervener candidates receive priority enrollment, this online program is open to intervener candidates from any state. To date, several out-of-state candidates have completed the program.

A recent graduate of the program shared the following impression of this training program: "Taking this course really helped me better understand my student and her needs. The professors were there for support and help anytime I needed it. It didn't matter if I needed help with my course work or my actual job, they were willing to help by giving suggestions or just being there to listen. This is a great way to understand your role as an intervener better."

For more information about this intervener training program, please contact Julie Maier, California Deafblind Services Project Coordinator, jmaier@sfsu.edu / (415) 405-7558 or visit the SFSU College of Extended Learning [Intervener Training: Deafblind Education](#) webpage.

Advocacy at State and National Levels

Linda Alsop, Utah State University,

linda.alsop@usu.edu, &

Sally Prouty, Minnesota DeafBlind Project (retired),

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The largest barrier hindering local and state education agency's efforts to accept the intervener concept for children who are deafblind, is the lack of federal language describing and supporting the role of interveners. There continues to be a lack of understanding and responsiveness by districts to provide appropriately trained interveners who can effectively address the needs of children and youth who are deafblind to have access to learning and communication in educational environments. It can't be emphasized enough how critically important it is that change occur at the national level as part of Individuals with Disabilities Education Act (IDEA), which can then facilitate the change needed at state and local levels.

In an effort to shift the paradigm, individuals and organizations in deafblindness have been advocating at the state and national level for inclusion of the term "intervener" in law for many years. On the national level, advocates have

worked for passage of the Alice Cogswell and Anne Sullivan Macy bill in the House of Representatives since 2015 and in the Senate since 2017. The [Cogswell-Macy Act](#) (CMA) is a bicameral, bipartisan bill in the current congress that focuses on strengthening IDEA to ensure that students who are deafblind (Title III); blind, visually impaired (Title II); and deaf, hard of hearing (Title I) receive the best education possible. See [Senate bill 813](#) and [House bill 1959](#).

Title III of the Cogswell-Macy Act (2021-2022) focuses solely on the needs of students who are deafblind. Included in this section is language that states:

SEC. 3. FINDINGS. The Congress finds the following: (8) Children who are deaf-blind should receive one-to-one services from interveners, who have training and specialized skills in deaf-blindness. Intervenors play a critical role in the provision of a Free and Appropriate Education, because they provide access to the information these children need in order to learn and develop concepts, to facilitate their communication development and interactions in their preferred mode of communication, and to promote their social and emotional well-being.

Recognizing intervener services as related services under IDEA will facilitate national awareness of the critical need for intervener services, support systems change at state and local levels, and result in significant and life-changing benefits for children and youth who are deafblind and their families.

The following are samples of state advocacy efforts related to interveners in alphabetical order.

Illinois

Michelle Clyne, Project Reach: Illinois DeafBlind Services

The [Illinois Intervener for Students Who are Deaf-Blind](#) (p. 223) approval was accomplished through systemic efforts by the state deaf-blind project over a number of years. A survey of Illinois educational administrators in 2013 revealed that AWARENESS was the first step; almost 50% of respondents had not heard of deaf-blind intervention! In the following years, the project offered free trainings using the Open Hands, Open Access (OHOA) Modules created by the National Center on Deaf-Blindness to paraprofessionals and educators to increase understanding of the benefits of intervention. In 2016, a champion at the SEA began working with the project, and modeled language for an intervener approval after existing educational interpreter language. In 2017, as intervener candidates began university and pilot training programs, the state approval was official. Candidates completed programs and portfolios, and once candidates received certificates or credentials, applied for the new Illinois approval. Illinois had its first two officially approved Interveners for Students Who are Deaf-Blind in 2019. For more information, visit the National Center on Deaf-Blindness website, [Increasing Recognition and Use of Interveners: Illinois.](#)

Minnesota

Sally Prouty, parent & Minnesota DeafBlind Project, retired

Minnesota is one of several states that have enacted legislation to recognize interveners. Since 1993, the state has allocated funding for [home and community based interveners](#) for children and youth (0-21yrs) with deafblindness in Minnesota. The state agency responsible for managing these funds is the Minnesota Department of Human Services - Deaf and Hard of Hearing Services Division (DHS-DHHSD).

In the early 1990's, parents requested that the DHS-DHHSD fund a home and community-based intervener program for children. After being approached with this request, the state invited intervention experts from the W. Ross Macdonald School in Ontario Canada. John and Jacquie McInnes shared the philosophy of intervention used at the W. Ross Macdonald school for children who are deafblind. This meeting proved to be a watershed event for the history of interveners in Minnesota. As a result of this meeting the DHS-DHHSD funded a pilot program for home and community intervener services with five families in 1993. Thanks to the Department and the state legislature, the program has broadly expanded since then. It currently supports 36 children/youth per year (prior to COVID 45 - 50). In 2017, the community program broadened to provide services for individuals over the age of 21 in need of continued intervener services. From

its inception, this program has produced tangible results and enjoys broad support from the state legislature, state departments and families. For more information, visit the National Center on Deaf-Blindness website, [Increasing Recognition and Use of Interveners: Minnesota](#)

Texas

Vivecca Hartman & Melanie Knapp

In 1973, parents of children who are deaf-blind and multihandicapped, and the professionals who work with them began gathering together on an annual basis for training, education, and sharing common concerns and challenges. These participants, desiring to continue this type of exchange in a more permanent fashion, formed a statewide group and adopted formal By-Laws in 1975. The Deafblind Multihandicapped Association of Texas (“DBMAT”) was chartered by the state of Texas as a non-profit organization in July 1976.

The effort for the God given rights of our deafblind children and adults continues on. My personal battle is because of what my son, Christian, went through and his ultimate success with his intervener. His untimely death has continued to inspire my husband Gary, our son Landon, our family, and DBMAT to give scholarships for college level training for our Interveners in Texas. Our efforts are realized through raising funds to support our passion. DBMAT recently

hosted the 15th Annual Christian Knapp Memorial Golf Tournament on October 14, 2022.

Our Legislative efforts have led to our Texas DeafBlind Multiply Disabled (“DBMD”) Medicaid Waiver being extended to include children, the establishment of a career ladder for interveners with respectful pay within the Waiver program, pay raises for the interveners each legislative session, additional slots on the waiver so more individuals could gain access to services, and most recently increased service hours to maintain the same level of services. Currently, we are legislating for additional slots and an inflationary increase to the Waiver caps.

For more information visit the National Center on Deaf-Blindness website, [Increasing Recognition and Use of Intervenors and Teachers of Students Who Are Deafblind: Texas.](#)

Utah

A definition of intervener is detailed in Utah’s [Education Administration Rule 80](#)¹. For more information, please visit the National Center on Deaf-Blindness website, [Increasing Recognition and Use of Intervenors and Teachers of the Deaf-Blind: Utah.](#)

Virginia

Julie Durando, Virginia Project for Children and Young Adults with Deaf-Blindness

Efforts to recognize the intervener role in the regulations of Virginia began with a collaboration of the state deaf-blind project director and the disability policy specialist at the Partnership for People with Disabilities, a University Center for Excellence in Developmental Disabilities (UCEDD) at Virginia Commonwealth University. They provided information to the [Virginia Disability Commission](#) that outlined the role, student benefits, and training of interveners as well as the current systemic challenges. When asked to present this information to the commission, they recommended, “Through a collaborative effort involving Virginia Department of Education, parents, and local education agencies, explore solutions to resolve the current issues preventing the recognition of an intervener as a related service provider” (Durando, 2012, p. 12). This recommendation was considered by their Education and Employment Work Group with input from stakeholders. In the 2013 session of the General Assembly of Virginia, Delegate Pogge, a member of the Disability Commission, sponsored [House Bill 1420](#) to define intervener in the Board of Education Regulations. It passed unanimously in both the house and the senate, but it has not yet completed the state’s standard regulatory process. For

more information, visit the National Center on Deafblindness website, [Increasing Recognition and Use of Interveners: Virginia](#)

Wisconsin

Jen Gettelman and Heidi Hollenberger, Wisconsin Deafblind Technical Assistance Project

In August of 2021, Wisconsin officially declared Deafblindness as its own disability category area (https://docs.legis.wisconsin.gov/code/admin_code/pi/11/36/4m). With the new state statute, the Wisconsin Department of Public Instruction (DPI) has been developing guidance around the new category and subsequent eligibility criteria. In developing new guidance and best practices in deafblindness, the conversation included a discussion about the need for interveners. The DPI special education team reviewed multiple resources related to interveners and the compliance team agreed, based on the letter from McDowell, that interveners are identified as a related service per IDEA (<https://sites.ed.gov/idea/files/osep-letter-to-mcdowell-08-02-2018.pdf>).

Prior to Wisconsin including deafblindness as a disability category, a lot of work was put in by the DPI to recognize the unique challenges presented by this disability. This work included the development of a dedicated webpage for the Wisconsin Deafblind Technical Assistance Project (WDBTAP) on the DPI

website. This page included local and national resources to help provide guidance to schools serving students identified as deafblind per the national deafblind child count through the WDBTAP.

In 2014, WDBTAP hosted a Deafblind Family Summit. That summit was facilitated by a DPI Special Education Consultant who subsequently went on to become one of the Assistant Directors of Special Education at the DPI. This facilitator heard firsthand from families about their challenges with programming and school services. This firsthand experience has allowed a deeper understanding and collaboration within the DPI special education team, and has allowed for the growth of this disability category and guidance. The conversation around adding interveners as a related service has been seamless and simple.

National Family Association for Deaf-Blind

Melanie Knapp

The National Family Association for Deaf-Blind (NFADB) is a nonprofit, 501(c)(3) organization that has served families with individuals who are deaf-blind since 1994. Originally started by and for families, NFADB has expanded to include any interested individuals, professionals, organizations, and agencies that wish to empower the voices of families with individuals who are deaf-blind. NFADB believes that individuals who are deaf-blind are valued members of their communities and should have the same opportunities and choices as others in the

community. The National Family Association for Deaf-Blind exists to empower the voices of families with individuals who are deaf-blind and to advocate for their unique needs.

In 2017, NFADB developed a committee, the Policy, Information, and Education (PIE) Committee, devoted to sharing information about legislative activities impacting our families with loved ones who are deaf-blind. Family Advocacy Training & Education (FATE) Project trains family members who already possess leadership skills to advocate on issues important to the deaf-blind field and community. The family members then use their newly honed advocacy skills to educate legislators on the needs of individuals who are deaf-blind and their families.

In our pilot year (2021), a national advocacy agenda was developed by family leaders representing eleven (11) family organizations from across the United States. The Agenda broadly covers the needs of both children and adults who are deafblind, but this article just focuses on the following language related to interveners:

- [Qualified Personnel](#) - We suggest that qualified personnel include Teachers of Students who are Deaf-Blind and Intervenors
- Justification - For our children it's not Deaf PLUS Blind, it's Deaf TIMES Blind, as the dual sensory loss has an exponential impact. They have very

unique needs and require teachers certified in Deaf-Blindness to help them navigate the educational system. Please read NFADB's [Position Paper on Qualified Personnel](#).

- [Interveners](#) - We propose that Interveners be written explicitly in the list of permitted [related services](#) for all deaf-blind
- Justification - Interveners are trained to provide access to environmental information necessary to ensure a free appropriate public education to children who are deaf-blind. Please read NFADB's [Position Paper on Interveners](#).

References

- Alice Cogswell and Anne Sullivan Macy Act (H.R. 1959 & S. 813), 117th Cong. (2021- 2022). [www.congress.gov/bill/117th-congress/senate-bill/813/text](https://www.congress.gov/bills/117/congress/senate/bills/813/text).
- Durando, J. (2012). *Interveners for students with deaf-blindness*. Presentation to the Virginia Disability Commission: Richmond, VA.



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