

VI Times

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MN Regions 5 & 7 Vision - O&M Staff
Barb Lhotka, Editor



Vision-O&M Staff

The purpose of a newsletter is to provide specialized information to parents and teachers of students with vision impairments. We hope to send regular newsletters that will cover topics of interest that are informative and create a base of knowledge that will assist our students with their on-going success!

Contents

Vision-O&M Staff	1
What Is Multiple Disability?	1
Positioning for Attention	2
Lights As Stimulation	2
Hand Skills	2
Concepts	3
Communication	4
Collaboration	4
Topic Preview	4

Upcoming Events

- ◆ Lake Carlos - Sept. 29 & 30
- ◆ Low Vision Clinic - Oct. 5
- ◆ Assistive Technology Workshop—Nov. 3

Benton-Stearns Ed District

Amy Ormerod, TBVI, O&M

Buffalo District #877

Diane Grundyson, O&M

Glen Hoppe, TBVI

Elk River

Molly Ouellette, TBVI, O&M (intern)

Pam Schumacher, TBVI, O&M

Freshwater

Diane Grundyson, O&M

Nicole Schmidt, TBVI

Little Falls

Diane Grundyson, O&M

Beth Lehn, TBVI

MAWSECO

Liz Karels, TBVI, O&M (intern)

Barb Lhotka, O&M

Midstate

Diane Grundyson, O&M

Beth Lehn, TBVI

Paul Bunyan

Louise Flickinger, TBVI

Diane Grundyson, TBVI, O&M

Rum River

Lois Jacobson, TBVI, O&M

Tracy Shimer, TBVI

Sherburne-Northern Wright

Karen Maruska, TBVI, O&M

St Cloud

Doreen Bohm, TBVI, O&M (intern)

Marissa Mahowald, TBVI

St Croix Ed District (SCRED)

Cindy Bruning

West Central

Diane Grundyson, O&M

Glen Hoppe, TBVI

What is Multiple Disability?

A child who has a vision impairment with additional disability generally will show needs in one or more of "five distinct areas of development: intellectual functioning, adaptive skills (living skills), motor skills, sensory functioning, and communication skills."

www.projectideaonline.org

Many of our students have additional needs. It is often difficult to determine if vision loss or another disability has the greatest impact on learning. Therefore, the team will need to focus on your child as a whole and prioritize what needs to be learned and how your child will best learn. It is essential that you and your fellow team members see your child as a child first and then a child with complex learning needs. Celebrate your child's major and minor learning achievements in all areas!

Positioning for Attention



Trunk stability is the key to hand use in students with limited physical access.

Whether your child has low vision, is blind, or has multiple disabilities, positioning is essential to gaining and maintaining attention for learning and interacting. The team should determine in what position the child is most alert, can best use his or her hands, demonstrate adequate hand strength, motorically plan actions, and complete tasks.

“Students who use wheel chairs will likely already be positioned with the necessary support for trunk stability—enabling them to use their hands most effectively. Children who sit at a

desk should have a chair with arm rests, with the desk about two inches above the height of the elbows and feet positioned flat on the floor. A box can be placed below the child’s feet to achieve optimal positioning. Many children with multiple disabilities use their hands best when lying on their sides in a positioning device or propped with wedges and pillows. The side-lying position makes it easier for a child to see her hands and use them together to clap or manipulate objects.”
(www.brighthub.com)

Light As Stimulation

Awareness of light can be a very useful thing for children with low vision. Compulsive light gazing can also create problems for their learning. Research has shown that as many as 60% of children with cortical vision impairment light gaze.

When children have such an intense need to look at light it becomes the sole focus of activity. They may be so intent on the light that they cannot be redirected. It becomes isolating and discourages interaction and other learning activities from taking place.

Whenever possible, position your child with his or her back to the light source. Use light in more productive learning strategies:

- Shine a light/penlight on the targeted object you want the attention directed toward.
- Keep curtains closed during stories and other activities.
- Encourage your child to attend visually, auditorally or tactually to an object—don’t expect all at one time.
- Keep flickering lights off.



Hand under hand



Hand over hand

Children with vision impairments with or without additional impairments need to learn about objects and environments through their hands. The greatest skill a young child can learn is to explore with his or her hands. The Family Connect website states: “Since your child may not be able to see another person doing a task clearly or at all, the only demonstration she may receive is the one she feels through the use of hand under hand or hand over

Hand Skills

hand.”

Hand under hand, allows your child to feel secure as he places his hands on top of yours as you do the task. You should verbally describe what you are doing.

Hand over hand, allows your child to actually touch the task as you place your hands over his. This is sometimes more threatening to the child—they may resist the hold of your hands over theirs.

Concepts

Learning concepts must be adapted for children with vision impairments and additional disabilities. Concepts are acquired through a complex set of processes:

- Child learns that objects exist, have permanence, and are different from one another.
- Identification [of objects] and being able to name them follow.
- Child must learn not only to identify the whole object but also to define its characteristics.
- When the child can abstract a common element about a concept from several sensory experiences and uses this abstraction as definition of a classification or characteristic, and when he can represent this generalization as a symbol, he has formed a concept.
- The child must then be able to develop a system for determining what makes the object what he or she thinks it is and eliminate other possibilities.

There are three levels of concept development:

- Concrete level. A specific characteristic is considered to be the content.
- Functional level. What "it" does or what one does with "it" determines the content.
- Abstract level. Summarization of all the essential characteristics of the object determine the content.

Common concept categories include:

- Size
- Shape
- Texture
- Color
- Weight
- Location
- Use
- Position
- Movement
- Time
- Sounds
- Taste
- Odor

Your child will need to be able to use the concepts to:

- Identify
- Describe
- Label
- Group
- Sort
- Order (largest to smallest)
- Copy
- Pattern
- Compare and contrast

Children with multiple disabilities often need adaptations and modifications to accomplish work with concepts. Some options for learning concepts in an alternate manner include:

- Using assistive technology to make choices;
- Using larger items for better motor control;
- Using touch systems instead of manipulation;
- Doing the actual activity rather than a worksheet to illustrate the concept;
- Multiple repetitions of an experience.

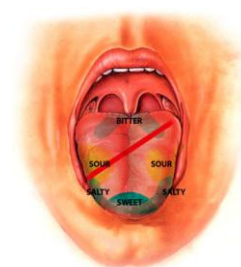
Shapes:



Color:



Taste:



Topic Preview

Future issues of this newsletter will address:

- Braille
- CVI—Cortical Visual Impairment
- Early Childhood Intervention
- Living Skills
- O&M—Orientation & Mobility
- Parenting
- Self-Determination & Advocacy
- Sensory Efficiency
- Social Skills
- Technology
- Transition

The ten most common warning signs of an eye or vision problem for young children are:

1. Consistently sitting too close to the TV or holding a book too close.
2. Squinting.
3. Tilting the head to see better.
4. Frequently rubbing eyes, even when not sleepy.
5. Shielding eyes or other signs of sensitivity to light.

6. Excessive tearing and watery eyes.
7. Closing one eye to read, watch TV or see better.
8. Avoiding activities that require near vision, such as coloring or reading, or distance vision such as playing ball or tag.
9. Complaining of headaches or tired eyes.
10. A sensation that a dark curtain has settled across your field of view

Collaboration

Collaboration is a term that is frequently used to describe teamwork. The word is only as good as the partners make it. Collaboration is sharing information and tasks.

When working as a member of your child's team, you will need to provide information, assist with decision-making, ask questions, and actively keep in touch with other team members. The other team members should be doing the same with one another and with you.

Collaboration is not gossip, complaining, demanding, nor is it reactive. Collaboration occurs when all members of the team openly share what is happening and what they would like to see happening. Everyone has information to share. The more information that can be shared regarding your child's educational needs and progress, the greater the progress that can be made.

Decisions should be based upon what the team discusses and observes as progress for your child. If something isn't

working, the team will need to meet and determine a change in direction or programming. The progress may be slow, so too frequent changes may mean your child hasn't had enough experience with the strategy.

Listening and trying strategies that will increase your child's independence are key to your team's collaborative success. All team members owe this to one another.

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