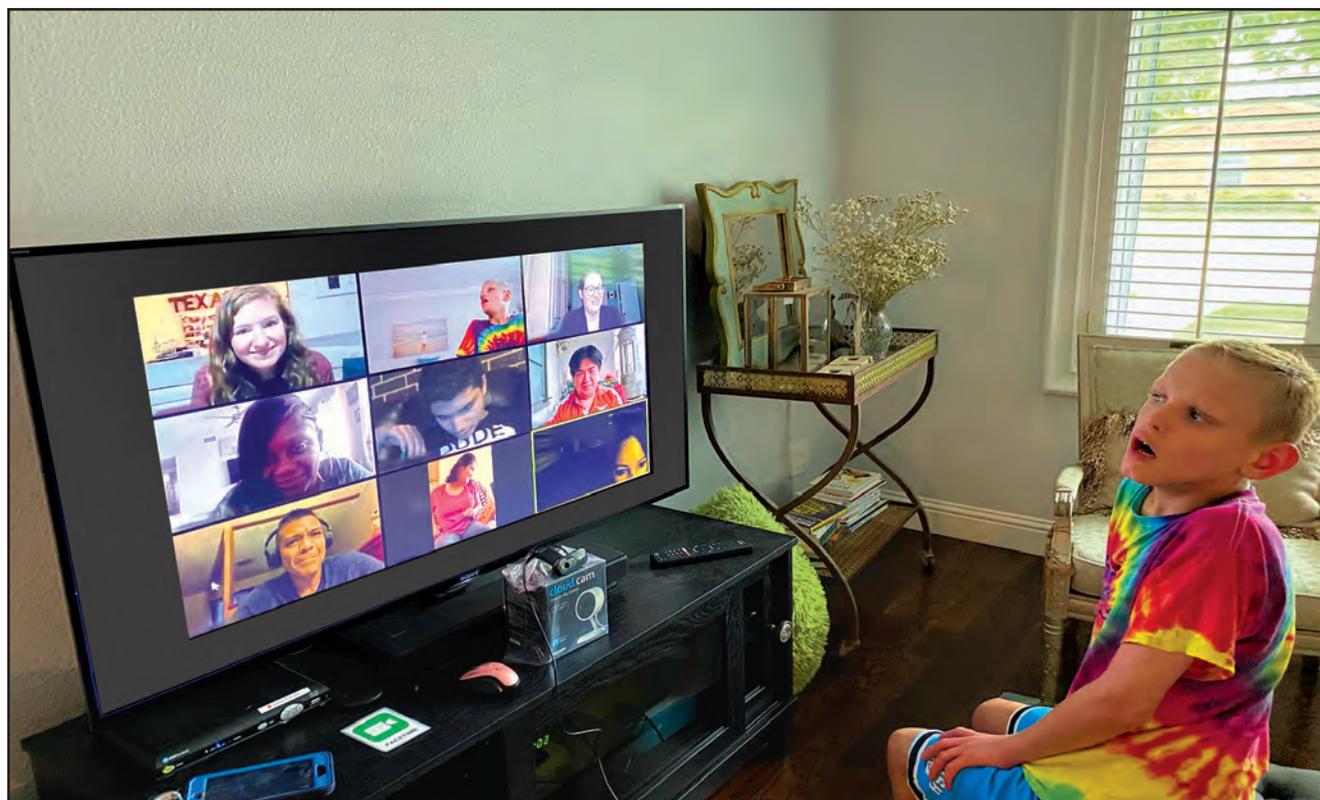


TX SenseAbilities

A PUBLICATION ABOUT VISUAL IMPAIRMENT AND DEAFBLINDNESS FOR FAMILIES AND PROFESSIONALS



A student who is deafblind participates in a Zoom meeting with his class, teaching and residential staff, and related service providers.

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TX SenseAbilities is a collaboration of the Texas School for the Blind and Visually Impaired, the Texas Health and Human Services Blind Children’s Vocational Discovery and Development Program, and the Texas Workforce Commission.

Singing Through The Quarantine: The Spinrockers and Our Journey to Musical Fulfillment

Authors: Devin Gutierrez, TSBVI EXIT Student, and Mary Rose Bushland, TSBVI Student

Abstract: This article follows the journey of Devin Gutierrez and Mary Rose Bushland as they developed their band, The Spinrockers, and entertained the nation through the “Live from the Living Room Concert Series” during the COVID-19 quarantine.

Keywords: Spinrockers, “Live from the Living Room COVID-19 Concert Series”, music, quarantine, pandemic, COVID-19, performing arts

During the COVID-19 pandemic, Mary Rose and Devin, also known as The Spinrockers, decided the world needed a little boost of positivity in the midst of great uncertainty. They noticed that they had the ability to bring happiness to themselves and to those around them through music, so they decided to share some of that joy on a larger scale. The Spinrockers’ “Live from the Living Room COVID-19 Concert Series” brought smiles to the faces of many. To understand how their weekly shows garnered thousands of views and hundreds of comments from positively impacted fans, you need to understand how The Spinrockers first began.

In 2017, Devin and Mary Rose were both students at the Texas School for the Blind and Visually impaired (TSBVI). They could always be found humming or belting out a tune on campus. It is no surprise that it was in the Fine Arts Building, their “Happy Place,” that they would first make each other’s acquaintance. Devin participated in TSBVI’s spring production of “Shrek Jr, The Musical,” as Shrek. Mary Rose was a member of the audience and really enjoyed the show.



Mary Rose and Devin set up for a live-streamed show from their living room.

MR: The play was really fun, I really enjoyed the singing and silly characters, especially Shrek.

After the show, Devin spent some time with the audience members. This is where he and Mary Rose met for the first time. Over the next year, they participated in two TSBVI

theater productions together. Mary Rose's mom would later approach Devin to ask him if he would like to teach Mary Rose music lessons.

D: I was working towards my goal of becoming a professional musician, but the prospect of teaching never really occurred to me. I mean, I knew I could play music and sing, but I felt like I didn't have the qualifications or experience to teach anyone.

Devin agreed to teach Mary Rose with the support of his musical mentors and teachers. Over time, they began to play at school and community events but knew that if they wanted to be known, they needed a band name.

MR: I enjoy spinning while listening to music, and Devin rocks a lot, so we came up with the name, The Spinrockers.

Devin and Mary Rose would continue to participate in various musical endeavors, including the TSBVI Jazz Band, named The New Motown, musical theater productions, and additional community events. It wasn't until the coronavirus quarantine that The Spinrockers' music went live to the living rooms of hundreds of families around the nation.

D: We kind of got the idea from other artists doing live streams around the globe. I initially wasn't too sure because I didn't think that people would listen, but with the encouragement of family, friends, and teachers, we decided to go ahead and try a Facebook live concert.

MR: I remember being happy and excited to have our first Spinrockers Facebook Live show.

D: We had only planned to do one concert. We weren't sure how long the quarantine was going to last. We thought we would be back in school in another week.

The first show had an astounding number of viewers and lots of positive feedback. It was apparent in the days following that first show that COVID-19 wasn't going away anytime soon, so The Spinrockers decided another show was in order.

D: The next thing I knew, we were talking about an eight-week concert series! I was worried, because I knew this meant a lot of work for both of us. We quickly developed a routine. After each concert, we would spend a day or two finding the perfect songs for the next set. The rest of the week was packed with learning lyrics, arranging multiple songs, and long rehearsals. These shows were live, and there was a certain thrill in not knowing what would happen during the concerts.

MR: I felt excited when it was time to dress up and go live. I was always curious who would tune in that day and what their comments would say. I knew all the work during the week was worth these moments.

The Spinrockers' really enjoyed performing every Sunday for eight weeks, but the moments after each show were equally important.

(cont.)

FAMILY WISDOM

Spinrockers—continued

D: There were some real bonding moments after each concert. Everybody in the house would gather to read the Facebook comments, re-watch each show, and discuss how it went. It was very rewarding to hear comments from fans who said their days were made better by our music. We really felt like we were making a difference during these crazy times.



Mary Rose and Devin pose for a picture during their tour in Wisconsin.

MR: The comments were adorable! I thought the fans who tuned in were cool! They made me bubble with excitement!

We received comments from people all over the country. Tony from Idaho wrote, "What a great blessing to finish up our evening with!! Thank you." Debbie from Indiana shared, "This performance is lifting spirits throughout our whole house. Thank you both for your incredible talent." Jenny from Minnesota posted, "Love the music! Just what we all need during these tough times! Thank you for bringing us your beautiful music!" Jeremy from Texas said, "Dancing with my wife in the kitchen! Good job guys!" Caryn from Florida shared, "I'm trying to listen, but I can't help and sing along!!!"

The Spinrockers also took their show on the road from the Hill Country of Texas to the north woods of Wisconsin.

D: We had two socially distanced gigs up north. We would like to continue performing and look forward to becoming a bigger part of the Austin live-music scene.

The Spinrockers really enjoyed the concert series and tour. They are determined to continue their calling to help others through music.

For more information on The Spinrockers and to watch the concerts from the "Live from the Living Room COVID-19 Concert Series", visit www.facebook.com/thespinnerockers. You can also connect with them via email at thespinnerockers@gmail.com. ●

The Highs and Lows of Remote Learning

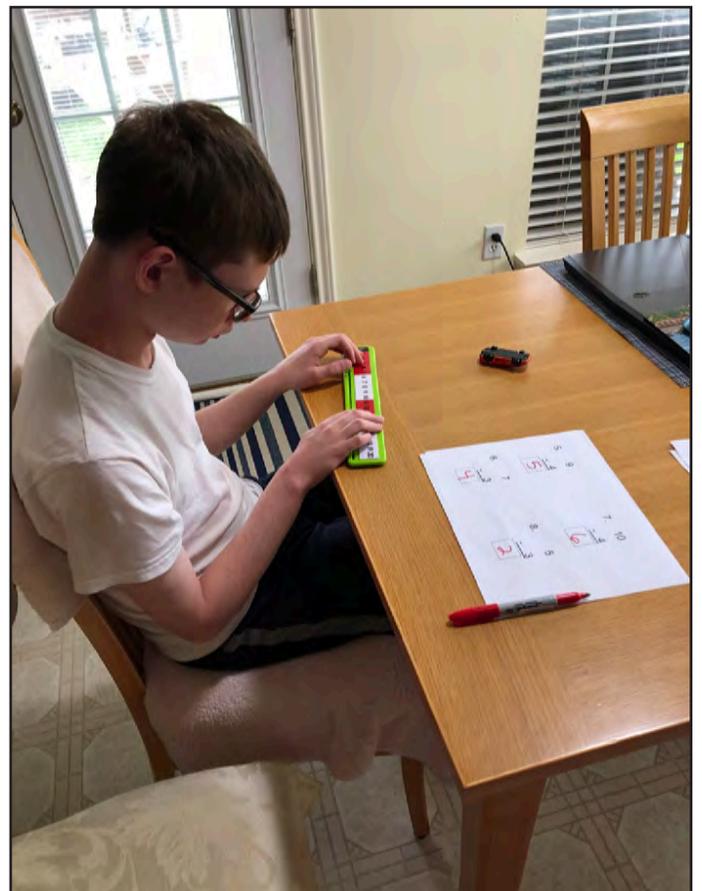
Author: Barbara Knighton, TSBVI Parent

Abstract: This article follows one family as they reflect on the last several months of remote learning. The author focuses on her experiences, the high points, low points, and how navigating the situation with a team of support has helped them feel empowered in the end.

Keywords: remote learning, Zoom meetings, virtual instruction, Texas Families Together, self-care, parent support, Outreach, Covid-19, Multiply Impaired Visually Impaired, MIVI

On March 23, 2020, we began our journey into the uncharted waters of remote learning. This was an exceedingly difficult task given that my son has multiple disabilities and works with several staff members daily for curriculum instruction and related services. Terrified of losing the remarkable progress Joshua made during his first semester at TSBVI, I decided there was no choice but to give it my all. I am not an educator or therapist by profession, so I felt totally out of my element. I have worked with my son in the past, but I'd never received formal coaching in how to teach my son. I relied heavily on the knowledge and expertise of my son's classroom teacher. Thankfully, she thinks outside-the-box and is very patient. We came up with a working schedule for home that mimicked his regular school day, and off we went.

The first three weeks were incredibly stressful and filled with adjusting the schedule, closing the gaps, and seeing which lessons worked in a virtual format and which ones did not. We watched educational videos,



Joshua works math problems using a number line.

(cont.)

FAMILY WISDOM

Remote Learning—continued

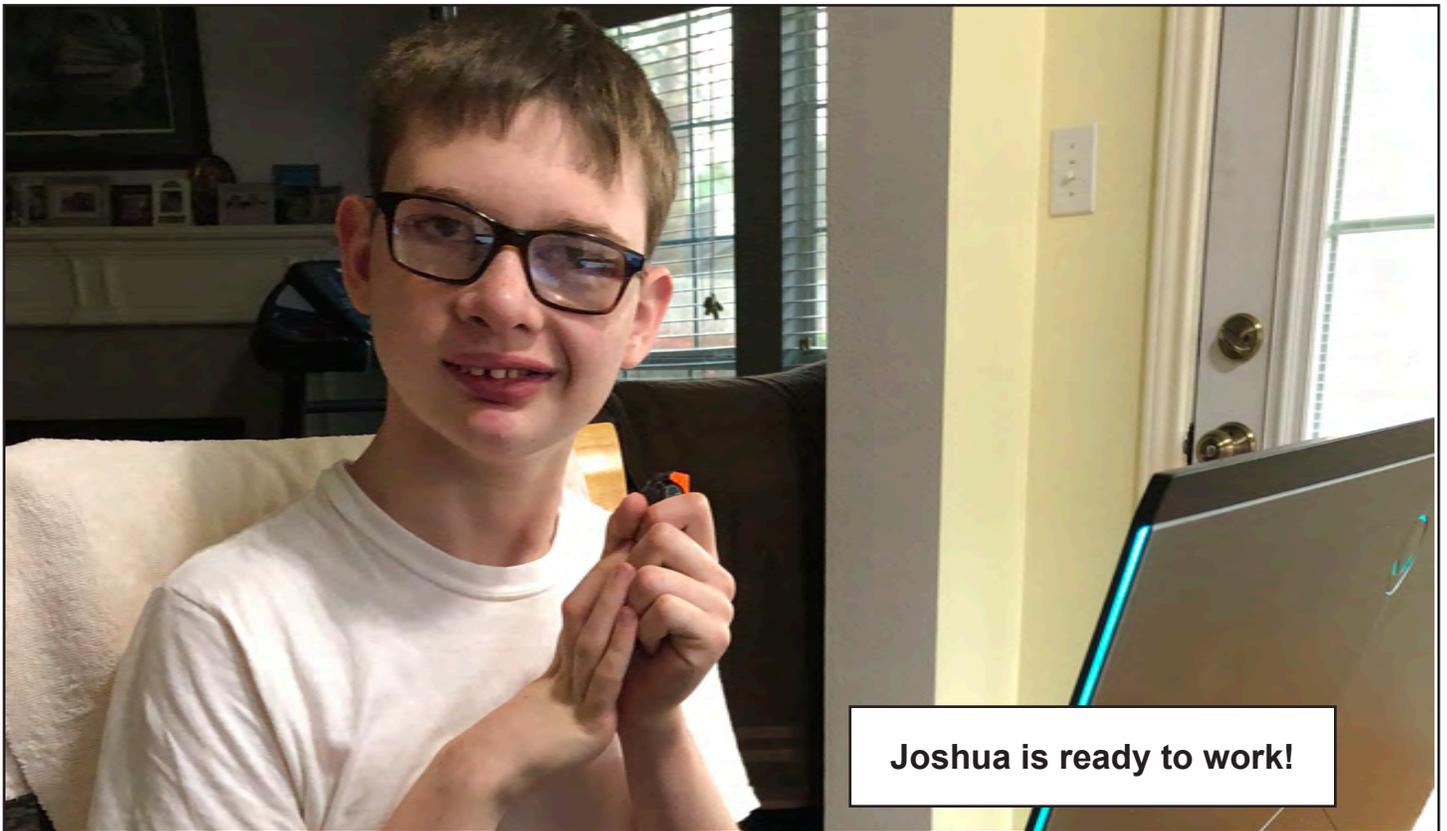
went on virtual field trips, and completed worksheets. Soon, we began to include Zoom meetings with other TSBVI staff members and related service providers. Joshua really enjoyed his Zoom meetings and was very engaged once we found the topics that interested him. He enjoyed weekly movement sessions with his O&M instructor, a hair brushing routine and show and tell with the residential staff, and the weekly music session with his fine arts teacher. He even began to sing the occasional word! Without the distraction of any classmates, Joshua became solely involved with the task at hand. He participated in a full school day with up to four Zoom meetings a day.



Joshua joins his class for a Zoom lesson.

Joshua is unable to complete his work independently, so his school days were my school days as well. Unfortunately, this schedule meant that my days turned into ten to twelve hour working days which ultimately caused me to reach a breaking point. I was so grateful to the Outreach Team for providing the Texas Families Together weekly online meetings. This was the outlet I needed to recenter myself and regain control of my physical and mental health. They helped me work through my feelings by listening to my concerns and allowing me to express any frustration, anger, and/or exhaustion. The team and other parents gave me permission to have these feelings, affirmed that they were expected during these times, and helped me understand that self-care needs to be a priority. With the tools they provided me, I was able to have a productive discussion with the classroom teacher about what supports I needed and how to implement them.

I am a perfectionist and was being way too hard on myself. I was so worried about what would happen to my son's future that I was putting my own physical and mental health in jeopardy. We made it through the ten and a half weeks of remote learning successfully. We learned lots of lessons, with so many new ideas and sharing going on. I am so proud of Joshua, and although it's hard for me to say, I am proud of the work we put into supporting him during this time. We all showed endurance, perseverance, patience, and most of all we helped Joshua maintain his love for learning. I am forever grateful to the TSBVI staff, not only for supporting my son's needs but my needs as well. We hope to take what we've learned and apply it to our new school year as we continue our journey through remote learning. ●



Joshua is ready to work!

Does Santa Know Braille?

Of course he does! And he's ready to send letters from the North Pole! Each year, Paths to Literacy provides information from various organizations that support braille literacy through their Letters from Santa programs. Deadlines for requests for letters from Santa are usually in mid-December. BrailleWorks and the National Federation of the Blind (NFB) had not announced those dates when *TX SenseAbilities* went to press, so please check their websites, <https://braille-works.com/santa-reads-braille/> and <https://www.nfb.org/programs-services/early-childhood-initiatives/santa-letters>, respectively, for updated information.

Paths to Literacy has also been working with NFB to create a braille design of Max, the dog from "How the Grinch Stole Christmas", which they will be using with their braille Santa Letters, so be sure to check the Paths to Literacy website as well <https://www.pathstoliteracy.org/resources/braille-letters-santa>. It should be updated with new information some time in November!



Introducing TAPVI's New President

Author: Hillary Rodriguez, Parent and TAPVI President

Abstract: The Texas Association for Parents of Children with Visual Impairments (TAPVI) has just elected Hillary Rodriguez as its new president. In this article, Hillary introduces herself, shares information about her journey to TAPVI, and describes her aspirations for the organization. Readers can also learn more about how to become connected with and informed about TAPVI events.

Keywords: Texas Association for Parents of Children with Visual Impairments, TAPVI, family support organization, Texas Tween/Teen Time, social media

Hello, all! My name is Hillary Rodriguez, and I have been elected as the new President of the Texas Association for Parents of Children with Visual Impairments (TAPVI) organization for the 2020–2021 year. I'd like to take this opportunity to share a little bit about myself, my family, and my aspirations for the organization.

I live in Houston, Texas with my husband, Javier, and our three children. I work full time as a Quality Assurance Laboratory Supervisor at an agricultural liquid supplement company. When I am not working or being a mom, I volunteer. Along with TAPVI, I am also serving my second year as treasurer for our local school district's Special Education PTA (previously 3rd VP of Communications for two years) and treasurer for my son's Cub Scout Pack. I volunteer regularly at my church in a variety of capacities. My passion for volunteering and serving others started with my mother. She was always volunteering with local hospitals while raising her

children, and while in high school, I followed her lead and began volunteering at Texas Children's Hospital, a place I became more familiar with after my daughter was born.

My daughter Madelyn was born exactly a month after Hurricane Ike destroyed our home and school located in Galveston, Texas. It was already a traumatic time for our young family when we first noticed something abnormal with Madelyn's eyes only one day after she was born. I was in denial at first, but eventually we were sitting in her pediatrician's office, waiting for a referral to a pediatric ophthalmologist. One week later, we received her diagnosis. Madelyn has microphthalmia and colobomas of the retina, optic nerve, and iris. I was devastated. My husband had just graduated college, and I was still finishing school. How were we going to support a child with a visual impairment? Her doctors ordered a full genetic evaluation and an MRI. Less than one month after she was born, I was



Hillary, her husband Javier, and their three children.

nursing Madelyn in some of the same hallways I had spent many hours volunteering in, waiting for them to take her back for anesthesia. After bringing her home that day, something changed within me that I can only describe as a fire lighting up. I became determined that even if she could not see the world around her, she would experience great things. That “fire” continues to drive me today as I move forward, engaging and encouraging families who are first receiving their diagnoses as well as those with older kids who strive to challenge themselves to greater heights.

Today Madelyn is a confident, intelligent sixth grader attending a Science Magnet school within her district. She attends General Education classes with her sighted peers but also has an IEP with VI and O&M services. She is extremely independent and uses a cane to get around. One of the things I feel strongly about is allowing all kids to excel to their abilities, despite their disabilities. At home, we find solutions to help Madelyn succeed as a family, with my husband and I sitting down and asking for her input towards solutions. Things like adding carpets to the stairs so she can differentiate the

(cont.)

TAPVI—continued



Madelyn receives a 4th place ribbon for her science fair project.

bottom step and the ground floor, bump dots on appliances, tactile markers on clothes, or audio settings for devices have been very helpful. These solutions allow her confidence to soar as she accomplishes amazing things like winning fourth place in her

district science fair, art contest awards, and playing three instruments. These past few years watching Madelyn grow into a young lady have inspired me even more. I am truly in awe of her bravery, determination, and compassion.

This year has been a challenge for so many of us. Navigating a new way of life has been stressful and disconnecting. This year in TAPVI, I intend to focus on facilitating new connections. One of the things Madelyn missed so much this year was attending her normal schedule of summer camps. Connecting with other children who are blind or visually impaired is her outlet every year. TAPVI plans on starting a Texas Tween/ Teen Time this Fall. This will be an RSVP invite-only event where kids who are blind or visually impaired can make the connections they aren't otherwise able to make right now. This will be hosted via Zoom with various topics and open share each time. The goal is to make long-standing relationships and build a community through fun and laughter.

Please make sure you are on the TAPVI mailing list by filling out the Google Form <http://tiny.cc/TAPVISurvey> and don't forget to also "Like" and "Follow" our Facebook page @TAPVIFamilies. There, you will find information about upcoming events. We welcome you to share your events, thoughts, and resources on our Facebook group, TAPVI Families Connected. To join, just answer some brief questions, and an administrator will let you in the group.

I look forward to meeting you all this year and making new connections! ◆

The Five R's: Navigating Virtual and Hybrid Special Education

Author: Caroline Nelson, Attorney and Counselor at Law PLLC

Abstract: As the COVID-19 pandemic continues, families have become increasingly concerned about how their children receiving special education services will continue to make progress and move forward in their learning. This article discusses the implications of the pandemic on special education services. The author provides families with five considerations for balancing advocacy for their children with the realities and limitations of learning during these unusual times.

Keywords: advocacy, IDEA, remote learning, virtual instruction, hybrid programs, in-person, COVID-19, compensatory services, collaboration, parent support, regression, self-care

The arrival of last spring's pandemic pulled the educational rug out from under families and schools. IDEA and public education never contemplated a COVID-type public health and economic crisis. Public education was already complicated, dynamic and far from perfect, but one thing most of us never questioned was the ability for kids to go to a physical school building with in-person classes, activities, lunch and unstructured time. When crisis mode suddenly isolated and locked us down, schools and families scrambled to find a way to return to the school year. At first, we thought it might be a few weeks, and then we understood we would finish the semester learning from home. It didn't dawn on most of us until even later that remote, virtual, and now, hybrid school would be a longer-term situation.

As schools scrambled to jump-start the school year again, their first efforts were to

push concentrated, prioritized content out to students at home while making do with existing resources and knowledge. This was school for all kids. At the same time, the special education community had its own realization that on top of a dramatically changed and reduced overall foundation for everybody, IEP services, supports and accommodations would be even harder to deliver.

Parents of children with IEPs were asking the same questions all parents were asking: How am I supposed to be the implementer? How will I balance this new job with adult responsibilities that are just as disrupted? How is the overall situation going to impact our family, and what do we need to move through it? And, unlike every other family, parents of children with disabilities were facing bigger problems like the reduction of hands-on professional expertise, therapies,

(cont.)

5 R's—continued

specialized instruction and services, social experiences, and daily structure. All of these produced (and are still producing) ripple effects that speed up student regression and intensify the urgency to come up with meaningful solutions.

School districts and state and federal education agencies had all the same realizations at the same time. No one was under the illusion that IEPs written for in-person school could be fully implemented in the at-home format. Schools were instructed to bring education back as best they could, and in the absence of legal rules providing a blueprint or accountability, TEA and the US Department of Education began rolling out guidance that has continued to come out over time.

Schools and families alike dove back into the spring equally alarmed about student rights, school responsibilities, and the magnified impact of school closures on students with disabilities. In order to shape how we develop possible solutions as a team for our children, let's consider The Five Rs to make the most out of remote or hybrid schooling for students with disabilities.

1. RULES

Know the rules: the IDEA “playbook” remains in place, and requirements are unchanged, despite the pandemic.

- New IEPs (Annual or Review) are to be written for traditional, in-person instruction.
- ARD/IEP meetings still take place, can be requested by parents, and must have all required members in atten-

dance; video or phone conferences can replace in-person meetings until public health permits otherwise.

- Amendments to ARD/IEP paperwork are allowed for broader purposes than before. This is to allow changes while avoiding gatherings, but parents can always request an actual ARD/IEP meeting, even if the issue can be addressed via amendment.
- Child Find, Transition, and Evaluation requirements remain as before.
- Compensatory services must be provided for services in an IEP that are not delivered or should have been provided, but the child's educational need was missed or not addressed. These services should be designed to put the student in the place where they would have been had the services been provided initially. While they can be provided as a direct 1:1 replacement (e.g. the school didn't originally deliver 5 therapy sessions, so 5 therapy sessions will be provided), they do not have to be. Compensatory services must still be individualized.
- Dispute resolution options remain in place as before, including ARD/IEP meeting, resolution session, mediation, TEA complaint, Due Process.

2. REALITIES

While state and federal guidance currently holds IDEA requirements in place, it also acknowledges and allows flexibility for schools who will struggle to deliver to these standards during periods of remote instruction.

- Schools have been directed to make good faith efforts to provide as much as they can under the circumstances. “Good faith” includes meaningful, regular communication and collaboration with parents in order to prioritize what can be delivered, to make adjustments in response to student engagement and progress, and to support parents as the main at-home implementers.
- All stakeholders, school and parents alike, have been advised to expect the first approach for remedying gaps in services during remote instruction to come in the form of compensatory services.
- Congress continues to consider the possibility of waiving or altering IDEA requirements in order to provide relief to schools faced with obvious implementation problems. Keep an eye out for potential changes or advocacy opportunities.
- As disparate impacts of remote instruction on students with disabilities are noted over time, efforts to create new law addressing current conditions are materializing in some states through litigation.
- Develop a journal, data notebook, or snapshot-collecting system so you can record basic information over time about your child’s engagement and progress with remote instruction. Key information points about your child can include demeanor, motivation, interest, time on task, independence, and abilities with technology and instructional materials. Key information from you can include your take on whether and how much learning and progress is taking place. This data will be important for later discussions about compensatory services.
- You do not have to wait for the “end” to initiate a compensatory services conversation with your school. Compensatory services are typically to be delivered as soon as possible after a gap in order to minimize the disruption in a student’s progress. Because we can’t predict when the “end” of current IEP implementation difficulties will occur, consider initiating a compensatory services conversation as soon as you can identify something that might be able to be addressed given the current format. Making smaller requests as you go does not foreclose requests that may continue to arise.

3. RHYTHM

Keep your child moving forward educationally by partnering with educators in good faith.

One of the only resources not compromised by the pandemic is the creativity of your child’s team members. These service providers typically do not have discretion about school hours, personnel, health practices, or allocating resources. They are the ones with the most direct ability to keep trying creative options for instruction given the resources they have to work with and share with you. Vent your frustration carefully and advocate to and with the right positions.

4. RIGHT

You know what is right for your child. Keep advocacy efforts focused on your child’s unique needs, progress and well-being.

- Parents may be the first to identify a new need, an area of regression, or a surprising adaptation to remote instruction. Share this information with your student’s team. They can’t respond if they don’t know about it.
- Special education is still individualized, and the standard wisdom about not

(cont.)

Five R's—continued

automatically pressing for what your neighbor's child gets, unless your child has a need for the same thing, still holds. The flip-side is also true. It is often possible to add a creative or uncommon program element, even under current circumstances, if you start by bringing a data-supported description of your child's need to the ARD/IEP team.

5. REMEMBER

Complex problems rarely call for black-and-white answers. Consider these things that can happen at the same time:

- Feeling anxious or angry and working in good faith with the school

- Helping your child get as much as they can from virtual or hybrid school and gathering the information you need for a compensatory services discussion
- Having compassion for your professional counterparts and being a strong advocate
- Taking care of yourself and taking care of your child and family
 - Important: You are a stronger family leader and advocate when you attend to your own needs.
 - Take breaks, cut yourself slack, and be gentle with your own uncertainties and dilemmas! ●

Evaluation of Blind and Low Vision Students During COVID-19: A Guidance Document

<https://bit.ly/guidancedoc-vi-covid19>.

This guidance document was written to support assessors of students with visual impairments during distance learning. It was prepared by Ting Siu, TVI/COMS, Ph.D in collaboration with past and present faculty at San Francisco State University, the California School for the Blind, and California State University Los Angeles.

Be aware that when you open the link to this document, it will direct you to sign in to create a copy of the link. This was done to support people who may have difficulty using Google Drive and accessing Google Docs that are "view only".

Some links to information specific to students with visual impairments:

- [COVID-19 Updates: Parent Resources, Teacher Resources, Guide for Accessing Zoom meeting through a Keyboard \(CSB\)](#)
- [CA Clearinghouse for Specialized Media & Technology \(CSMT\) Technology Webinar Series \(June, 2020\)](#)
- [Guidance Letter for Remote Instruction \(ACVREP, COMS Subject Matter Expert Committee\)](#)

Looking at Self-Stimulation in the Pursuit of Leisure, or “I’m Okay, You Have a Mannerism!”

Authors: Kate Hurst and Robbie Blaha, TSBVI Outreach Programs

Abstract: During the long period of quarantine during COVID-19, many families have reported an increase in self-stimulatory behaviors in their children with sensory impairments, including those who are visually impaired and have additional disabilities or are deafblind. This article was first published in the Spring 1993 issue of P.S. NEWS!!! (Volume V. No. 3) by the TSBVI Outreach Programs. Because stress and changes in routine continue to impact student behavior, especially during the pandemic, we asked author Kate Hurst to revisit and update her article. Along with co-author Robbie Blaha, they explore the root causes of activities and behaviors that may be considered to be socially inappropriate and encourage readers to revise their thinking about and reactions to self-stimulatory behaviors. Changing perceptions about these behaviors can help parents and professionals respond more effectively and help guide them in addressing students’ sensory needs.

Keywords: leisure, mannerism, behavior, sensory stimulation, sensory deprivation, central nervous system, self-regulation, social skills, sensory channels, self-stimulation

Note from Kate Hurst:

Thanks to My Colleagues!

This article was originally published in the early 1990s in the “P.S.News!” newsletter published by the TSBVI Outreach Programs. Even though it has been around for a while, I still think it is worth revisiting. At the time it was written, medical technology had not shown us all the things we have since learned about the brain, stress hormones, and resiliency. But pioneers like Dr. Jan van Dijk and Dr. Lilli Nielsen were already figuring these things out when it comes to individuals who have visual impairments and additional impairments, including those who are deafblind. They knew that self-stimulation was in response to sensory deprivation for these students. Now science is validating what they proposed.

I began to think of this article with the intention of writing about leisure skills. I had no idea I would end with an article on self-stimulation. I hope this article shows some of the prejudice that seems to exist in thinking about this topic. We have to understand that self-stimulation is a normal human activity and address those behaviors accordingly.

I would also like to thank Gretchen Stone, Ann Silverrain, and Barbara Bellemo-Edusei for their contributions to this work. These women, along with Robbie Blaha, formed a study group back in 1985 after attending a conference in Tallahassee conducted by Dr. Jan van Dijk. Challenged by both the information and the values conveyed by van Dijk in discussing children who are deafblind, they worked to digest rather complex information about the human brain, the nervous

(cont.)

EFFECTIVE PRACTICES

I'm OK—continued

system, and the implications this information has for teaching children who have visual impairments and additional impairments, including those who are deafblind. Their discussions, and the papers generated as a result of this study group, were invaluable to me in beginning my journey of understanding the effects of sensory deprivation on the central nervous system and how it relates to the way individuals with sensory impairment may respond to the world.

Leisure Time

Leisure time, the time free from work or duties, is important to all human beings. Leisure time is the time for doing something that will relax us or energize us, so that we can renew ourselves to face the demands of our lives. It is something we require as much as food or sleep to stay healthy and sane.

We all have different ways of spending our leisure time. What might be a leisure activity for me (reading a mystery) might not be leisure to you. We know and accept this about each other. When considering "leisure skills" for individuals who have visual impairments and additional impairments, including those who are deafblind, however, we often focus on activities which do not relax or positively energize them. We tend to spend time getting them to participate in "play work", as one young man who was deafblind terms it. Learning to play games, participate in arts and sports activities, or other pursuits as part of their educational programming may be beneficial for children in many ways, but these activities don't necessarily meet their needs for "leisure".

The type of activities that often do provide relaxation or amusement for these individuals includes behaviors that many find unacceptable: flicking your hand in front of your eyes, pulling threads out of your clothes, making repetitive sounds, etc. These behaviors are considered self-stimulation, and as such, are often perceived negatively because they do not look "normal," may interfere with learning, and can often become self-injurious. Yet these behaviors serve a positive purpose for these individuals.

Changing our perception of these self-stimulatory behaviors may be the most reasonable course to take in addressing this issue, especially if this change of perception also helps us find ways to give more information to the child and consequently reduce his need to find stimulation on his own. These behaviors may also hold the key to information about their personal preferences, which could offer opportunities to teach them more appropriate choices for leisure activities.

Stimulating Experiences

Most of our "leisure activities" are nothing more than self-stimulation behaviors that have become highly ritualized over time and made socially acceptable. There is nothing intrinsically valuable or reasonable about leisure pursuits such as bungee jumping, playing cards, dancing, playing video games, listening to music, smoking, etc.

People participate in these different activities because they find them to be pleasurable and because the activities alter their physical state. Each activity provides a particular type of sensory input (see the chart below). There is not always a great

difference in some of these activities and so-called self-stimulation behaviors beyond the fact that some are more socially acceptable and "normal" in appearance than others. For example, what is really so different about banging a table and banging a drum, rocking to music and rocking to silence, making repetitive sounds and imitating bird calls, spinning for no apparent reason and spinning in a ride at the amusement park?

Sensory Channels and Self-Stimulatory Behaviors

Our brain seeks out stimulation through the channels of our senses. Each of us seeks out this stimulation in a variety of ways. Society accepts some of these behaviors with-

out question, yet feels very differently about others. In some cases, this acceptance seems to be arbitrary. The chart below shows examples of how individuals typically fulfill this craving for stimulation and some self-stimulation behaviors that parallel these behaviors. Each day, a good portion of our energy is spent in self-stimulation. Just look at the people around you. You are in a room with your family watching television or at a meeting with a group of co-workers. Although you are all seemingly engaged in the same activity, your daughter or colleague is playing with her hair. Your son or your office-mate is shaking his leg and tapping out rhythms on the arm of the chair. Your husband is flipping channels with the

Sensory Channels	Miss Manners' Guide to Appropriate Self-Stimulation	Creative Variations Which May Plug You Into a Written Behavior Plan
<p>Tactile: Information received by touch (through the entire surface of the body); includes sensitivity to light touch, pressure, pain, and temperature.</p>	<p>Twirling hair, drumming fingers, playing with condensation on a drinking glass, fingering fabrics, rubbing eyes, pulling on beard</p>	<p>Pulling hair, lying in front of the air vent, slapping face/ear, playing with spit</p>
<p>Proprioceptive: Information about the relative positions of parts of the body. This information comes through sensations arising in the muscles, joints, ligaments, and receptors associated with the bones.</p>	<p>Snuggling in quilts, cracking knuckles, jiggling/crossing legs, sitting on your leg</p>	<p>Burrowing into furniture, wrapping arms inside tee-shirts, wrist flapping</p>
<p>Visual: Information received through the eyes; seeing.</p>	<p>Gazing at your fingernails, hands and rings, watching television without the sound, window shopping, flipping through magazines, eye pressing</p>	<p>Flicking hand in front of eyes, flipping pages of books, light gazing, playing with transparent or shiny objects, eye poking</p>
<p>Auditory: Information received through the ears; hearing.</p>	<p>Humming, whistling, tapping a pencil on a surface, playing background music</p>	<p>Vocalizing or making sounds, banging on objects, tapping objects together next to ear</p>

(cont.)

EFFECTIVE PRACTICES

I'm OK—continued

Sensory Channels	Miss Manners' Guide to Appropriate Self-Stimulation	Creative Variations Which May Plug You Into a Written Behavior Plan
<p>Olfactory: Information received through the nose; smelling.</p>	<p>Wearing perfume, sniffing magic markers, scratch and sniff stickers, burning incense</p>	<p>Rubbing feces on the body and smelling, smelling other peoples' hands or shoes</p>
<p>Gustatory: Information received through the tongue or lips; tasting. (closely tied to the sense of smell)</p>	<p>Chewing flavored toothpicks, sucking on mints or hard candy, smoking, chewing on hair, sucking on pens or jewelry</p>	<p>Mouthing objects, chewing on hair, sucking on fingers, licking objects</p>
<p>Vestibular: Information received through receptors in the inner ear which enables us to detect motion, especially acceleration and deceleration (closely tied to the visual system which provides information to the vestibule located in the inner ear).</p>	<p>Rocking in chairs or rocking body, amusement park rides, dancing, twisting on bar stools, skating, sliding</p>	<p>Rocking body, spinning, twirling in swings, head rocking</p>

remote or your boss is flipping papers. If you ask them what they are doing, they would likely reply that they are watching television or having an important meeting. They would be less likely to say they were channel surfing, twirling their hair, practicing the drum part for "Wipe Out," or fanning their papers.

Each of us, even those of us with more intact central nervous systems, tolerates differing degrees of stimulation. Look at the difference in the preferred musical tastes (and intensity levels) between the teenager and the fifty-year-old. Although many teenagers enjoy megawatt rock concerts with all the trimmings, older adults are more inclined to seek softer music or silence in a dimly lit room. In the same way, children who have visual impairments and additional impairments, including those who are deafblind, vary in the amount and intensity of stimulation they need.

If we come to accept that self-stimulation is an important and valid activity for individuals without disabilities, then we must begin to revise our thinking about addressing self-stimulatory behaviors in individuals who have sensory impairments.

Some Questions to Consider In Addressing Self-Stimulatory Behaviors:

Can this behavior be stopped?

In looking for the answer to this question, first take a look at yourself. Try this little exercise: identify one of your own deeply cherished self-stimulatory behaviors such as cracking your knuckles, humming, sliding a charm on your necklace, etc. Try to keep track of how many times during the course of a 24 hour period you engage in this behavior. Then spend the next 24 hours refraining from this behavior. If you succeed, then try to extinguish that particular behavior for a month. Stop this

behavior under all kinds of circumstances: times of stress, times of idleness, etc. Once you have completed this exercise, answer the question for yourself. Your answer will either be a resounding "no" or a "maybe, if" depending on your particular success in completing the exercise.

Children who have visual impairments and additional impairments, including those who are deafblind, participate in self-stimulatory behavior (just like you and me) to calm, to energize, to get feedback, etc. Most of the time you can't completely extinguish self-stimulatory behaviors, and perhaps you shouldn't, because it does serve a purpose.

Can this behavior be redirected?

Many parents find that their child is more likely to participate in self-stimulatory behaviors when he/she is idle or stressed. Interacting with your child in some way may break up the self-stimulation. If the behavior appears in response to stress, finding ways to help him relax (e.g., massage, being wrapped up in a quilt, etc.) may reduce the amount of time spent in the behavior you find inappropriate or harmful. If your child is left alone, however, it is likely he/she will re-engage in this activity as soon as the opportunity presents itself.

Can this behavior be "contained"?

Some behaviors may present problems because they are considered socially inappropriate in specific places. Those of us who are smokers have learned to refrain from our favorite self-stimulation behavior on flights, but we all know exactly where to go in the airport for that last cigarette before the flight leaves.



Extreme measures would have to be taken to "stop" a child from accessing his own face with his own hand.

With some effort, many children can learn to remove themselves to their bedroom or a private place when engaging in self-stimulation that is not considered socially acceptable. Using calendar symbols to represent this favored activity and scheduling the activity as part of the child's day may help the child refrain from this particular self-stimulatory behavior for increasingly longer periods of time and stay involved in other kinds of activities.

Can this behavior be modified or expanded?

Self-stimulatory behaviors are valuable because they tell you how your child takes in information. If your child likes to burrow down inside the cushions of the couch, be held or hugged a lot, enjoys massage, etc., you can assume that he is motivated by information he receives proprioceptively. If your child likes to vocalize, listen to

(cont.)

EFFECTIVE PRACTICES

I'm OK—continued

music, or bang things together next to his ear, you can assume he is motivated by information he receives through hearing.

These behaviors can be used as a way to explore the individual's preferred sensory channels for receiving information from the world. With this information, we can identify preferred sensory experiences around which we can develop more "mainstream" leisure activities that our children will also come to view as "leisure." For example, if a child enjoys the visual sensation of lights, we can find age-appropriate toys that might be motivating to him. In addition to familiar toys such as Lite-Brite, consider lava lamps, continuous wave machines, lighted drafting tables for drawing, and even some Nintendo-type games. You might also consider extracurricular events such as visiting arcades, decorating with lights for appropriate holidays, or lying in a hammock under a tree watching the play of light through the leaves.

Take time to observe the types of self-stimulation that your child participates in and when these behaviors occur. Watch him/her and make notes about what you see and when you see it. Then try to see if there is any pattern to these behaviors that would give some insight to the type or types of stimulation he/she prefers and the purpose it serves. At the same time, note what types of activities he/she finds aversive.

When you have a good understanding about your child's preferences, begin to brainstorm ways that you can offer other stimulatory activities. Sometimes your child's favorite self-stimulation activity can also be modified or expanded in a way that will make it more socially acceptable. For example, everyone knows "nail-biters," but

do you recognize them when they become "the manicurists?" Several of my friends substitute the more acceptable behavior of nail care for their favorite activity of nail biting. They carry a complete manicure set with them at all times and can often be seen in meetings quietly filing or clipping a nail. They buff, cream, and polish. They examine their nails for chips, snags, splits. They are rewarded by others who admire their efforts instead of being held in low esteem as nervous nail-biter types.

Ask for help from your child's teacher, physical therapist, occupational therapist, and others. Look at children of the same age and try to find toys or activities that may make the self-stimulatory behavior appear more "normal" and/or socially acceptable. You should realize, however, that generally your child will need support from you to seek out these more acceptable behaviors. Their first preference will usually be for the behavior they have developed on their own.

Can the environment be engineered to make this behavior safer?

People who like to jump off things are great examples of engineering the environment to make a dangerous self-stimulatory behavior safer. These folks (skate-boarders, skydivers, skiers, etc.) have developed elaborate ways of placing themselves in extremely dangerous activities and surviving. We have industries based on protective clothing and equipment that will allow them to hurl themselves through space and make a safe landing.

Frequently, the best you can do is to provide protection for children who put themselves in danger of bodily harm by

participating in self-stimulation activities that are excessive to the point of creating physical danger to themselves or others. Splints, helmets and other devices sometimes must be used temporarily to protect the child and others around him/her.

In addition to providing protection from the effects of the behavior, it is important to look at the cause of the behavior. Often, these behaviors erupt in response to real physical problems that the child is not capable of communicating to you. These behaviors might indicate pain or decrease of sensation, as in the case of retina detachment or ear infections. It's very important to the health and safety of the child to seek out appropriate medical examinations when this type of behavior emerges or escalates.

Emotional and environmental conditions may also provoke increases in self-injurious behaviors. One individual I knew exhibited a dramatic increase in self-stimulatory behavior after the death of her father. The amount and intensity of the behavior posed concerns for her safety and the safety of others. Since there was no physiological basis for her behavior, the family spent a lot of time with her looking at pictures of her dad, going to the cemetery, and trying to participate in activities that were associated with her father. After a period of time, the behaviors decreased to levels that were comparable with the period before her father's death.

Changes in schedules or moving to a new environment can also bring about increases in self-stimulatory behavior. Helping the child anticipate these changes and providing as much consistency as possible through familiar routines during times of change may help reduce this type of behavior.

Conclusion

Like you and me, children who have visual impairments and additional impairments, including those who are deafblind, have a need to participate in self-stimulatory activities. Because their behaviors may appear very different from our own and can interfere with learning or become dangerous, they are often viewed negatively by other people. Changing our perception about these behaviors may help us respond to them in a better way.

There are a number of ways to intervene. Keep the child involved with others during the course of the day. Help him/her contain the behavior or engineer the environment in a way to make the behavior safer. Schedule times in the day for your child to engage in the preferred activity. Look at ways the behavior can be adapted so it will appear more "normal." Use the information these behaviors tell you about your child's preferred channels of sensory input as a way to develop recreational and social pursuits that may be enjoyable for him/her, even if these activities will not entirely meet his/her "leisure" needs. Finally, accept that you will probably never completely extinguish the behavior without having it replaced by another self-stimulatory behavior. Self-stimulation is common to all humans and serves an important purpose.

Additional Reading:

Stereotypical Behaviors and Self-Stimulation. Retrieved from Active Learning Space website, <https://bit.ly/2TigANv> .

Assistive Technology for Math: 10 Tips for TVIs

Author: Cecilia Robinson, Technology Consultant, TSBVI Outreach Programs

Abstract: All students need a strong foundation of knowledge and skills in math so that new learning can be retained and new mathematical concepts can continue to be developed. This is true for students with visual impairments as well, and there are many assistive technology (AT) devices available to help facilitate their learning of math concepts and skills. The author shares information on a variety of these materials and describes how both low-tech and high-tech can enhance students' learning of math.

Keywords: assistive technology, AT, braille math codes, Nemeth Code, manipulatives, real objects, braille, refreshable braille displays, tactile graphics, American Printing House for the Blind, APH

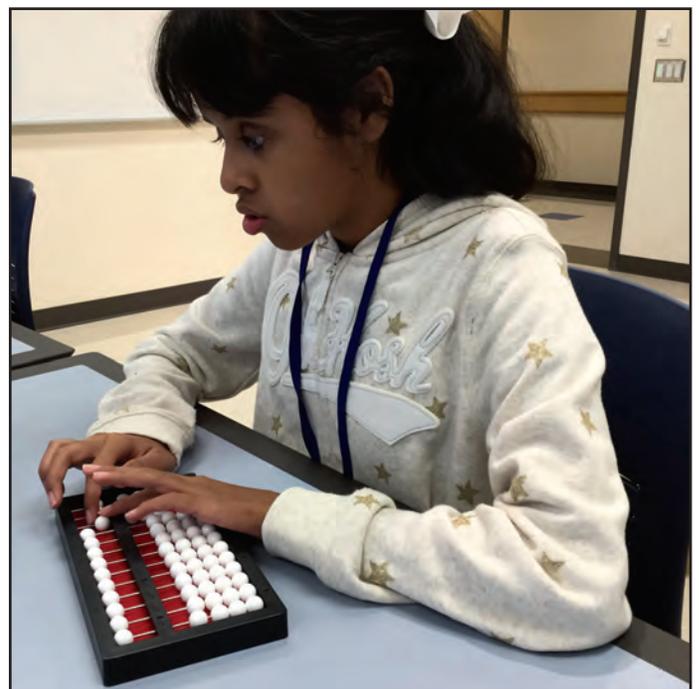
Assistive technology (AT) for math consists of items and devices that range from low-tech to high-tech. Low-tech items may include manipulatives, such as money, shapes and solids, or measuring devices. High-tech devices can include, but are not limited to, calculators, video magnifiers, embossers, or machines that produce tactile graphics.

In order for students to become competent users of AT for math, they must establish a strong foundation of mathematical knowledge and skills. A strong foundation in mathematical concepts will provide a stronger "platform" on which new learning and experiences can accumulate.

The following are ten tips for Teachers of Students with Visual Impairment (TVIs) to consider when using AT to support the learning of math:

1. Start early. Using both hands, if appropriate, lets young learners manipulate real objects with different sizes,

shapes, textures, and other details. Encourage them to explore the space around them. Spatial awareness and learning through experiences will help young learners understand relationships with numbers and other concepts later on.



A student uses both hands for calculations on a Cranmer Abacus.

2. Use manipulatives and devices in your instruction. Consult with the student's math teacher to identify materials that will best facilitate student learning. Consider devices such as the abacus, tactile rulers, a number line device, or a place value setter from the American Printing House for the Blind (APH) to maximize a student's learning experience.



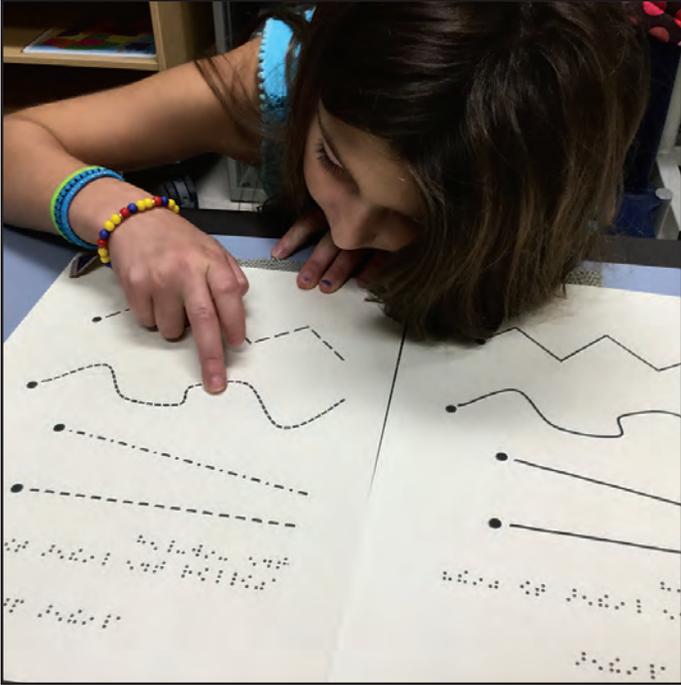
A student uses a tactile ruler to measure a box

3. Facilitate building a strong foundation of knowledge and skills. Every child learns differently. Individualizing is the key to helping students gain an understanding of concepts, especially more abstract concepts, and skills such as how to use AT. Collaborate with the student's team, including family members, on how to support the child's learning of math and AT.

4. Introduce braille math codes early so that students who are blind will have a way to read and write numbers as they are first learning about numbers and how to work with them. Braille math codes also allow students to read and write many other symbols related to math and science, from the most basic to very advanced concepts. They can use braille math codes such as the Nemeth Code to solve a variety of math problems using low tech AT devices, like a Perkins braille, or high tech AT devices, such as refreshable braille displays and scientific and graphing calculators.
5. Include tactile graphics in your instruction. Tactile graphics are created to be touched so that number lines, pictographs, Venn diagrams, bar graphs, graphs on the coordinate plane, and geographic drawings can be represented in meaningful ways. Tactile graphics can be produced by using AT such as the PIAF (Picture In A Flash) or Swell Form Machine, or a ViewPlus graphics embosser. Additionally, students can create tactile graphics using AT such as the Tactile-Doodle, DRAFTSMAN Tactile Drawing Board, inTACT Sketchpad, Sewell Raised Line Drawing Board, or the Sensational Blackboard. Some students with limited low vision use tactile graphics as well. The SwellTouch graphics produced with the PIAF or Swell Form Machine can be especially beneficial for these students.

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10 Tips—continued

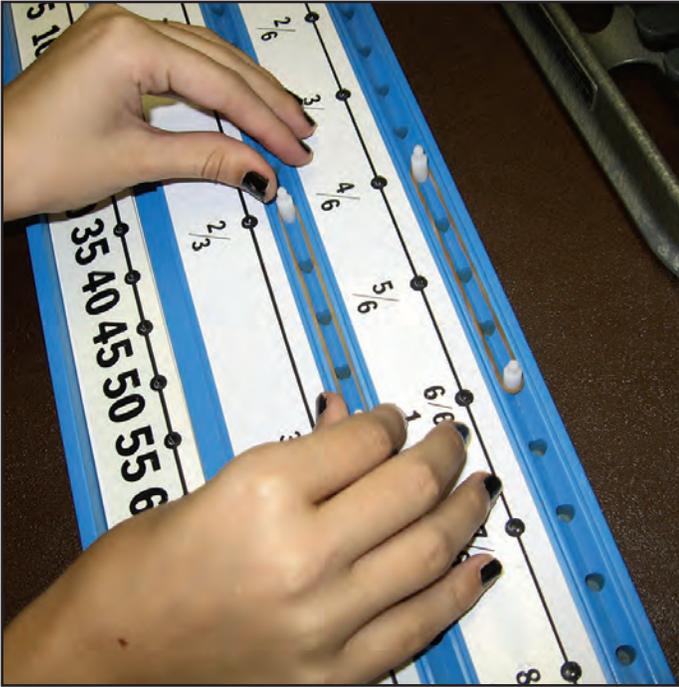


A student exploring a tactile graphic



A Student is using a PIAF machine to create a raised line graphic.

6. Learn about the AT before introducing it to the student. Approaching new AT from the perspective of a learner will provide you with valuable insight as to how to teach it. The more familiar you are with the AT, the better able you will be to demonstrate the AT to your student or the math teacher.
7. Allow students the time to learn about the AT. They need time to practice using the AT so that they can be efficient when they need to use it in class.
8. Teach your students to solve challenges related to AT, especially when you are not scheduled to be at a student's campus. Empower your students by teaching them the commands to become "unstuck" or to access the built-in Help options. Let them know that it is acceptable to ask for help from the math teacher as well. If appropriate, teach them how to solicit technical assistance from the companies that make the devices they use most frequently.
9. Train your student to use a backup system when AT fails. A backup system can be another device or a device similar to the one the student typically uses. It can also be a low-tech system, such as a Perkins braille, abacus, or pen and paper. Be sure that the student's team knows about the "backup" system so that the student can be encouraged/reminded to use it when AT is not available. Having a backup system in place can minimize time wasted to find alternative options.



A student explores three raised number lines for comparing fractions and whole numbers.

10. Have high expectations for learning and performance. As the TVI for your student, consider taking the lead in implementing high expectations for learning and performance on the IEP team. Be sure that the team, including the student, understands the expectations and what they may look like (for the student).

Resources

- Teaching Math to Visually Impaired Students <https://www.tsbvi.edu/math>
- Mathematics: A Collection of Videos <https://www.tsbvi.edu/videos-webinars/mathematics>
- Project Math Access <http://www.tsbvi.edu/mathproject/intro.asp#main>

- Nemeth Tutorial <https://nemeth.aph-tech.org/>
- Nemeth Braille Courses (registration required) <https://www.tsbvi.edu/course-listing>
- Accessibility at Pearson <http://accessibility.pearson.com>
- American Printing House for the Blind <https://www.aph.org/>

AT Devices

- Picture In A Flash (PIAF) Tactile Graphic Maker <https://store.humanware.com/hus/piaf-picture-in-a-flash-tactile-graphic-maker.html>
- Swell Form Machine <http://www.americanthermoform.com/product/swell-form-graphics-ii-machine/>
- ViewPlus embossers <https://viewplus.com/>
- TactileDoodle Kit <https://www.aph.org/product/tactiledoodle-kit/>
- DRAFTSMAN Tactile Drawing Board <https://www.aph.org/product/draftsman-tactile-drawing-board/>
- inTACT Sketchpad <http://www.easytactilegraphics.com/intact-products/>
- Sewell E-Z Write N Draw Raise Line Drawing Kit with Clip <https://www.maxiaids.com/sewell-e-z-write-n-draw-raise-line-drawing-kit-with-clip>
- Sensational Blackboard <http://www.sensationalbooks.com/products.html>
- For questions about assistive technology for math or any of the information in this article, please contact Cecilia Robinson at robinsonc@tsbvi.edu. This article can also be found on the Paths to Literacy website <https://www.pathstoliteracy.org/blog/assistive-technology-math-10-tips-tvis.> ●

What is ECI and Why Is it Important?

Author: Renee Ellis, Teacher of Students with Visual Impairment (TVI) and Independent Early Childhood Consultant

Abstract: The author spells out the interplay between agencies, systems, and plans for providing Early Childhood Intervention (ECI) services for children with sensory impairments in Texas, ages birth to three. She also describes the legal framework within which these systems and entities operate.

Keywords: Early Childhood Intervention, ECI, Memorandum of Understanding, MOU, Texas Health and Human Services Commission, HHSC, Texas Education Agency, TEA, Child Find, Individuals with Disabilities Act, IDEA, Texas Education Code, Local Education Agency, LEA, Individualized Family Service Plan, IFSP, Admission, Review, and Dismissal, ARD

Early Childhood Intervention (ECI) is a statewide program within the Texas Health and Human Services Commission (HHSC) that provides services to children less than three years of age who have developmental delays or disabilities and to their families. ECI programs provide services in every county in Texas <https://citysearch.hhsc.state.tx.us/> and function as a three-way partnership between service providers, families, and the local education agency (LEA).

Through a Memorandum of Understanding (MOU) between HHSC and the Texas Education Agency (TEA), children with vision impairment and/or hearing loss are served under Part C of the Individuals with Disabilities Act (IDEA) and the Texas Education Code. Part of the ECI's responsibility under Part C is Child Find. Child Find is a legal requirement that schools must find all children who have disabilities and who may be entitled to special education services. ECI programs are tasked with locating, identifying and evaluating all infants and toddlers,

birth through 36 months of age, who have or are suspected of having developmental delays, or an auditory or visual impairment.



A toddler plays with beads during a vision assessment.

ECI and Vision or Hearing Impairment

Services for a child from birth to 36 months with a visual or auditory impairment must be coordinated between the local ECI program and the school district where the child resides. ECI programs, with parental consent, will provide evaluation(s) by a licensed ophthalmologist or optometrist for children suspected of having a visual impairment and/or an audiological evaluation by a licensed audiologist when an auditory impairment is suspected. If a child is suspected of having a vision or hearing impairment, the ECI is responsible, with parental consent, for contacting the local education agency (LEA) to inform them of the need for an evaluation. The LEA will provide a TVI (Teacher of Students with Visual Impairment) and COMS (Certified Orientation and Mobility Specialist) to complete certain evaluations to determine if the child qualifies for services related to their visual impairment, and/or a Certified Teacher of the Deaf and Hard of Hearing (TDHH) if there is a suspected auditory impairment.

Children from birth to three who have a medically diagnosed vision and/or hearing loss or who are deafblind are eligible for free services related to their sensory impairment from both ECI and the local school district. Only children with auditory and/or visual impairments, or who are deafblind, are eligible to receive free services through the LEA.

Other services the child may need, such as physical, occupational or speech therapy and nutrition services fall under ECI's Family Cost Share. Families may have to pay for those services. The Family Cost Share is a sliding-fee scale and is based on family size and income after allowable deductions. No child or family will be turned away for services due to an inability to pay.

ECI services are based on the needs and concerns of each family and child. Services are provided in natural settings, typically the child's home, but they may also be provided at other places such as daycare. The ECI program staff, along with the family, will develop an Individualized Family Service Plan (IFSP) for the child which describes services based on the strengths and needs of the child and the family. "One guiding principle of the IFSP is that the family is a child's greatest resource, that a young child's needs are closely tied to the needs of his or her family. The best way to support children and meet their needs is to support and build upon the individual strengths of their family. So, the IFSP is a whole family plan with the parents as major contributors in its development." <https://www.parentcenterhub.org/ifsp/>

ECI professionals work with family members and teach the family ways to practice specific skills within their daily routine(s) that promote the child's development. The IFSP is reviewed with the family every 6 months and updated yearly. ECI services may include some or all of the following:

- Case management and specialized skills training
- Physical, occupational, and speech therapy
- Nursing and nutrition services
- Social work and counseling services
- Deaf education and vision services

ECI's are required and responsible for inviting a TVI or TDHH, as appropriate, to the initial Individualized Family Service Plan (IFSP) meeting. Participation by the appropriate TVI and/or TDHH is required at the initial and annual IFSP meetings, and to

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EFFECTIVE PRACTICES

ECI—continued

other IFSP meetings when issues related to or affected by the auditory or visual impairment will be addressed (MOU, Sec IV A.7).

Transition from ECI to Pre-School (Part C to Part B)

Children do not automatically qualify for public school programs based solely on having received ECI services.

Not less than 90 days prior to a child's third birthday, the ECI will schedule an Individualized Family Service Plan (IFSP) meeting to develop a transition plan for the child's potential entry into an Early Childhood Special Education (ECSE) program. Children with vision and/or hearing loss may be eligible for special education preschool services under the Individuals with Disabilities Act (IDEA Part B).

It is the responsibility of the ECI program to inform the school that a child in the district may be eligible for services. ECI must obtain written consent from the parent(s) before notifying the district of a child's potential eligibility. If parents choose to decline ECSE services, no further action will be taken and services will cease when the child turns three. If the parents give consent, ECI will contact the school district where the child resides, provide the school with the family's contact information, the child's evaluation records and the most recent IFSP. The district will then arrange for an evaluation to determine whether the child is eligible for special education services under Part B.

After the child is evaluated by the school

district, an Admission, Review, and Dismissal (ARD) meeting will be held. At this meeting the committee members, which include the parent(s), will determine if the child is eligible for special education services and if so, develop an Individualized Education Program (IEP). Types and amount of services will be determined at this meeting. When the child turns 3, ECI services terminate and the child is then eligible to enroll in the local school district and begin receiving services under Part B.

For More Information on Early Childhood Intervention Services in Texas, please see:

- <https://hhs.texas.gov/services/disability/early-childhood-intervention-services>
- Texas Project First <https://www.texas-projectfirst.org>

For information on the benefits of ECI:

- The Early Learning Institute <https://www.telipa.org/top-5-benefits-early-intervention/>
- Early Childhood Technical Assistance Center <https://ectacenter.org/>

For More Information on the IFSP Process:

- ECTA Center <http://ectacenter.org/top-ics/ifsp/ifspprocess.asp>

Also refer to the Early Transition Memorandum of Understanding found on the Texas Education Agency website for more information about the roles and responsibilities of ECI. ◆

TSBVI Amidst a Pandemic

Author: Emily Coleman, Superintendent, Texas School for the Blind and Visually Impaired (TSBVI)

Abstract: TSBVI's Superintendent discusses how TSBVI shifted during the COVID-19 pandemic to remote learning and established goals for embarking on a new school year.

Keywords: remote learning, virtual instruction, in-person classes, internet access, Covid-19, student and employee safety, high-quality education, family support, consistent communication, empowering students, resiliency

March 12, 2020, was the last time we had students on our campus during the 2019-2020 school year. Like schools across Texas, we made a fast shift to remote learning. Through the spring, we hosted over 12,000 Zoom meetings and provided over 15,000 hours of instruction. We held virtual events

like prom, graduation, and a spring play. We provided professional development through Outreach "Coffee Hours" and family support groups called "Texas Families Together" (TFT). We held virtual summer school with over 100 participants, all of whom don't attend TSBVI during the school year.



A mother of a student helps him use sign language to communicate with his instructor from his home.

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TSBVI—continued

As we move through the 2020–2021 school year, we continue to increase our remote learning knowledge and skills through training and curriculum development. We are providing devices and internet access to families and improving on what we accomplished in the spring. Our first day of school was August 17th, and we began our school year 100% remotely. Our first group of students returned for on-campus instruction on September 13th and we plan to keep bringing more students back in the weeks following. Throughout the year, we'll continue to offer remote instruction for any family or adult student who chooses.

I shared with our employees during our “Welcome Back” Zoom meeting that as an educational leader of a public school, my primary goal aligns with TSBVI’s vision, which includes providing high quality educational opportunities. To fully meet the

educational needs of our students, we need them to be able to access our campus. We are seeing a national regression in learning across all populations and demographics, but it is most evident among students in special education. This fact speaks to the desire for so many of our families to return their children to school.

However, health and safety **MUST** come first. There are many obstacles and roadblocks to overcome when returning students to our campus. As we address each question, comment, and concern, it is through the lens of, “How can we get our students back?” “What can we do to keep them safe?” When we don’t have a safe solution, we then dig into our options. This is why we started our year doing remote instruction. It wasn’t our first choice, but we know it was our safest choice.



A student participates in a game adapted with tactile symbols taught remotely with the support of his father.



A student who is deafblind enjoys virtual instruction from his TSBVI speech language pathologist .

Whether our students are remote or in-person, we must continue to empower them. We will continue to honor their social-emotional needs and contributions and not just their educational ones. We're focused on strengthening our relationships. Students will need to be taught how to take charge of their personal safety, and we will work with their families to do just that. Students can also be responsible citizens.

As we embark on the new year, I have promised my devotion to four things and have encouraged my staff to do the same. The "four things" include student and employee safety, high-quality education in

every setting, family support, and consistent communication. I look to our phenomenal employees to guide the path forward with those four goals in mind while offering up grace along the way. It will be a unique year and we will embrace opportunities to teach our students amidst a pandemic while celebrating their resiliency, and our own. 🟩

Please view this video that summarizes our response to COVID-19:

"We Are Where We Are Needed Most"
<https://library.tsbvi.edu/player/6GeB2hCe>



A student participates in a virtual science lesson on seed germination.

When Someone in Your Family Has Diabetes: Seven Ways to Manage and Thrive

Author: Lisa Golden, Diabetes Education Program Specialist, Texas Workforce Commission, Vocational Rehabilitation Program

Abstract: The author describes ways to manage and support family members who have diabetes, based on the seven self-care behaviors determined by the American Association of Diabetes Educators (AADE) to be effective for self-management of diabetes (the AADE7 Self-Care Behaviors®).

Keywords: diabetes, genetics, self-care, healthy behavior, monitoring blood sugar, medication, reducing risk, wellness, problem-solving, physical activity, prevention, Texas Workforce Commission, TWC

Diabetes is a family disease. There is a strong genetic component and once a family member is diagnosed, whether child or adult, it requires support in order to manage the disease. The self-care tasks that are asked of people with diabetes are the same efforts that are required for everyone in the family to be healthy. Let's discuss some of these and what can be done to support our loved ones with diabetes.

1. **Healthy eating** – There is no such thing as a diabetes diet. For anyone to be healthy, food choices should include carbohydrates, proteins and fats that contain a variety of vitamins and minerals. Too little or too few calories or other nutrients will not allow your body to perform at its peak. It is a matter of finding the balance. You can help your family member by eating healthy with them. Try shopping at your local farmers market or even just in the produce aisle and getting inspired by the vegetables or the colorful fruits. Garden together.

And if eating out is a weekly or more occurrence, find restaurants that have healthy options that are delicious. Every member of the family should be involved in planning meals, shopping and preparing foods.

2. **Being active** – It has been wonderful seeing families getting together during COVID-19 for some fun. Take walks together. Go to the park. Ride your bikes. If you need to stay inside, dance. Do a workout video together. Have a pillow fight. Activity can go a long way in helping you manage diabetes. It has so many great benefits for all including improving your mood, helping you manage stress, and just becoming physically stronger. Being active is good for everyone, not just the person with diabetes. Make activity a family affair.
3. **Monitoring** – For people with diabetes, the monitoring of blood sugar is important in order to understand how the pancreas is functioning and



Family of four holding hands walking down a wet sidewalk.

Photo by Emma Bauso from Pexels.

<https://www.pexels.com/photo/family-of-four-walking-at-the-street-2253879/>

how it is impacted by foods, activity, medication, stress and other factors. Monitoring can help individuals be proactive in managing their health. Paying attention to health metrics such as weight, blood pressure, cholesterol, and other lab work can help identify potential issues. The earlier you intervene, the more likely you can avoid negative consequences to your health.

4. Taking medication – The goal for every member of the family is to live long and healthy lives. Taking medication may be needed in order to be as healthy as possible. Work with your healthcare provider if you have concerns such as cost of the medication, negative side effects, or if you don't feel that the medication is working. Be sure to discuss any vitamins, supplements, over the counter medications, or dietary choices in case they may
- interfere with the medications you are taking. Your pharmacist can also help you understand the medications you are taking and how to get the best results.
5. Healthy Coping – Stress can have a strong effect on your health. We all have frustrations that impact our moods. COVID-19 has made us acutely aware of our activity levels, our sleeping patterns, and our support systems. What feelings come up when you think about your health? Diabetes is a chronic condition and it can be hard to manage. You may feel anger, shame, or depression, or you may feel hopeful, powerful and in control. Talk to friends and family about your feelings and your personal health goals. Tell them ways that they can help and things they may say or do that are not so helpful.
6. Problem solving – No matter how well planned and organized you are, things happen. COVID-19 certainly made us change our ways and shift our priorities. Problem-solving is a skill. Many problems can be planned for ahead of time like sick days. Have a supply of items you might need when times are not typical. Other times, problems occur suddenly and must be managed. Do what you can to prepare for the unexpected.
7. Reducing risk – This healthy behavior is about prevention. Not using tobacco products and moderating the use of alcohol are behaviors that can be within your control. Another action that can help you reduce risk includes seeing your health practitioners as advised. Annual checkups with your

(cont.)

Diabetes—continued

primary care practitioner are important, as are those with other professionals such as your dentist and eye doctor. Other professionals may also be able to provide services and resources such as a podiatrist, a registered dietician, a social worker, or your diabetes education provider.

Managing diabetes can be a complex process. Families working together towards a healthier lifestyle can make a big difference

in the wellness of every member. Consider all the ways that you can partner together to enjoy healthy foods, activities and accomplish the self-care needed to live your best life.

If you or someone you know has a disability that affects daily living or makes it difficult to work, you may be eligible for services from Texas Workforce Solutions-Vocational Rehabilitation Services. To find an office near you, visit www.twc.texas.gov/VRNearMe. 

Announcing! New 2020 Guidelines and Standards!

The newest 2020 Guidelines and Standards for Educating Students with Visual Impairments is now available here:

<https://www.tsbvi.edu/2020-guidelines>

This document provides families, educational staff, and school administrators legal and regulatory guidelines and standards to evaluate the quality of programs for students with visual impairments in Texas.

Resource links and descriptions of components found in high-quality programs are provided along with references to current federal and state laws, rules, and regulations that impact the education of students with visual impairments.

Outreach in the Time of COVID-19

Author: Kate Borg, Director, TSBVI Outreach Programs

Abstract: TSBVI's Outreach Director describes some of the creative initiatives that the TSBVI Outreach Program developed during the Spring and Summer of 2020 to provide needed support and collaboration to teachers, providers, and families during COVID-19.

Keywords: COVID-19, online support, collaboration, virtual consultations, partnerships, Coffee Hour, Texas Families Together, TFT, educational support, family support, social media, distance learning

Back in March 2020 (can you believe it was not 5 years ago?), Outreach, TSBVI, and our whole profession found ourselves in new territory. I know that we are all tired of the word “unprecedented”, but that is absolutely the correct description. Suddenly, students were without in-person instruction, service providers were without instructional support, and family members were now stepping into the role of teachers. It is said that in times of crisis, people band together, but something that I love about this profession is that we are already, and uniquely, together. What this experience has done is strengthen the bonds of partnership and collaboration, and has created time and space for sharing with and teaching each other.

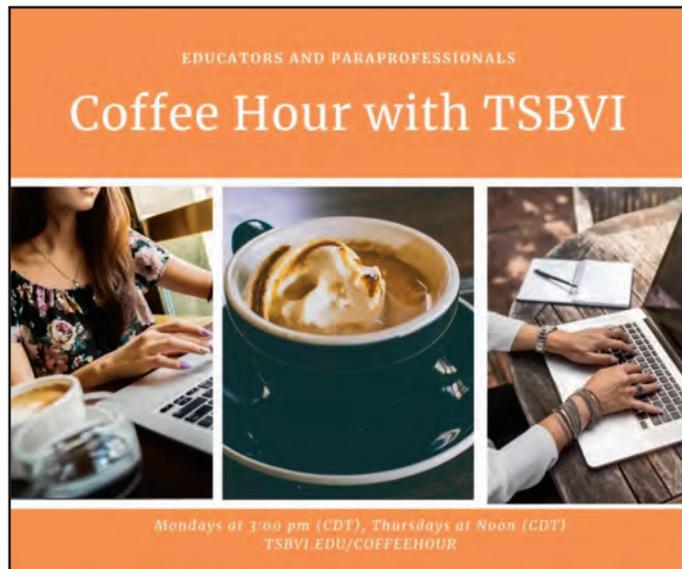
TSBVI Outreach Coffee Hour

One of the initiatives that came together very quickly was the *TSBVI Outreach Coffee Hour*. As we visited as a team, we knew that teachers and providers in Texas would need a place for support and collaboration. The Outreach team wanted to ensure that what we provided would enhance instruction and not add another burden to already overwhelming circumstances. We talked about the need for topics that addressed instructional strategies in a collaborative way, without becoming “one more thing” to worry about. The team worked quickly to organize sessions, and we held our first Coffee Hour on March 30th.

(cont.)

TSBVI Outreach—continued

Thanks to social media, peer-to-peer invites, and our partners nationwide, Coffee Hour reached families and professionals from all over the United States and throughout the world (Germany, England, Canada, Croatia, and more!). By the end of May, we held 26 sessions with over 8500 participants, averaging 340 per session. Topics of discussion included series on Cortical Visual Impairment, Early Literacy, Active Learning, Supporting Assistive Technology from a Distance, Orientation and Mobility in a Virtual Format, Supporting Braille Readers Remotely, Early Childhood, Optic Nerve Hypoplasia, and many more!



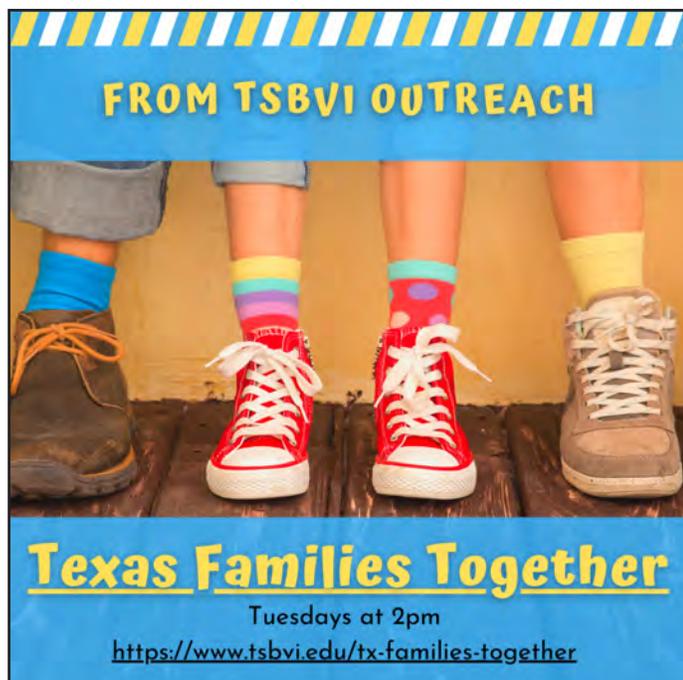
TSBVI Outreach Programs continue to provide information and support for professionals and families during the 2020-2021 school year.

What started as a “crazy” idea grew into a robust program of collaboration across agency, state, and international lines. TSBVI Outreach Coffee Hour is a testament to the efforts, expertise, and collaborative spirit that is found in our field. I want to recognize the work of Kaycee Bennett and other members of TSBVI Outreach teams for creating and presenting content, scheduling presenters, managing media platforms and permissions, and organizing materials in accessible formats. I also want to specially recognize the efforts of families and colleagues in Texas, Washington, Utah, Oklahoma, Maryland, Michigan, New England, the Netherlands, and elsewhere, who participated by presenting or providing content. This collaboration made for important contributions to Coffee Hour, and we are so excited and humbled to acknowledge that Coffee Hour received a special, collaborative award from the Association for Education and Rehabilitation of the Blind and Visually Impaired (AER) and the Council for Exceptional Children (CEC) Division on Visual Impairment and Deafblindness (DVIDB), The Presidential Recognition of Extraordinary Achievement Award.

And in case you are worried that it’s going away, don’t put those coffee mugs back in the cupboard just yet! We are continuing to have Coffee Hour throughout this year; information can be found at <https://tsbvi.edu/coffeehour>.

Texas Families Together (TFT)

Another initiative that grew out of Outreach responses to the COVID-19 pandemic was



TSBVI Outreach Programs continue to provide information and support for professionals and families during the 2020-2021 school year.

designed specifically for families. The Family Engagement and Transition Coordinators worked together to create *Texas Families Together* (TFT), an online meeting space for family members of students who are blind, visually impaired, or deafblind. From April through May, they held 18 sessions, including three every Tuesday! And they did not stop with the end of the school year. TFT continued throughout the summer, and will continue throughout the 2020-2021 school year.

An important aspect of TFT is that it is a protective space for families only, creating an environment of collaboration and sharing. One participant shared, “The group meetings have meant a great deal to me. They

have allowed me to voice my concerns about distance learning in a safe, caring and respectable environment. It’s always nice to know that there are others in the same boat. It has been helpful to talk with professionals about what we are going through. It finally gave me the approval to stop being so hard on myself and to take some time to just breathe and to see the good in every day.”

Families are our most important partners in education and this time has been so important for us to get to know families better and for them to connect with each other. For now, TFT will continue to happen on Tuesdays, at 2 pm. You can find the information at <https://www.tsbvi.edu/tx-families-together>.

Fulfilling Our Mission

Through all of the issues that occurred in Spring 2020, including quarantine during COVID-19, the Outreach staff continued to fulfill our mission to partner with families, educators, and communities to build positive opportunities for children with visual impairments and those who are deafblind. We continued to provide virtual consultations statewide, hosted webinars to a national audience, and published an issue of this very newsletter.

As the Outreach Director, I especially want to give gratitude to an incredible group of professionals who work tirelessly to simultaneously learn and teach within this field. Although things may look and feel different for quite some time, we are committed to continuing to provide information, support, training and leadership in Texas and around the world to families and professionals in the fields of visual impairments and deafblindness. ◆

TSBVI Short-Term Programs (STP) Update

Author: Sara Merritt, Principal of Short-Term Programs

Abstract: TSBVI's Principal of Short-Term Programs (STP) describes classes and activities they provided during the COVID-19 quarantine and their plans for 2020-2021.

Keywords: Short-Term Programs, STP, virtual learning, remote instruction, Prom, online classes, Zoom, Google Classroom, synchronous, asynchronous

Short-Term Programs (STP) has offered remote instruction for several years now, so when the pandemic hit and changed all our lives, STP was ready to tackle the challenge. We knew how to use Zoom and Google Classroom; we offered office hours to help Teachers of Students with Visual

Impairments (TVIs) and students. Our teachers continued to serve their Individualized Instruction students throughout the spring semester. What took us a minute to figure out was how to convert an in-person class to an online offering. By the time we offered the High School Independence Prom Class in



A student waves to peers and instructors while celebrating during the virtual Prom. He participated in the STP prom class and made the boutonniere he is wearing as part of their online activities.

early May, our creative juices were flowing again. The prom class also taught us some valuable lessons. Here's one that seems obvious now, but these were early pandemic times: when hosting a Zoom event for 100 people, mute all the microphones upon entry!

The fun and energy we got from dancing our hearts out at Prom gave us lots of ideas on making our first-ever remote summer program fun and engaging! During the summer of 2020, 98 students participated in online summer programs. Old friends who previously attended our in-person programs were able to reconnect in online classes.

This Fall, STP is here and ready to serve your students via online remote instruction. In addition to our synchronous (or live) classes, we have created thirteen asynchronous (or pre-recorded) classes for students on a variety of technology top-

ics. The schedule of classes can be found on our website at <https://www.tsbvi.edu/school/3365-calendar>. They are hosted in Zoom or Google Classroom and are only available to Texas students.

We heard from so many teachers that our asynchronous classes were also helpful to TVIs, so we created a YouTube playlist with all the videos from our classes. Please follow us on YouTube at STPOnline at

<https://www.youtube.com/channel/UC-c7zCBF7H7-kQdtIiDFR6kQ>

If you add a space between STP and Online, you will be following the band Stone Temple Pilots, and we don't think they can help you with JAWS! Remember, it's one word, **STPOnline!**

Please reach out if you have new suggestions for STP. We love to collaborate with our fellow TVIs across the state! 🟠



STP students and staff celebrate Virtual Prom on May 2, 2020.

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Available in English, Spanish and audio on the TSBVI website:

www.tsbvi.edu/tx-senseabilities

The audio version of *TX SenseAbilities* is provided by Learning Ally, Austin, TX.

This newsletter is partially funded with federal funds.

To request a notice by email when a new edition is published on the web or to unsubscribe by mail, please contact Melanie Schacht at schachtm@tsbvi.edu

If you have an idea for an article that you think would be great for *TX SenseAbilities*, please send an email to one of the section editors. We would love to hear your ideas.



Texas School for the Blind and Visually Impaired Outreach Programs

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Texas Health and Human Services Blind Children's Vocational Discovery and Development Program

<https://hhs.texas.gov/services/disability/blind-visually-impaired/blind-childrens-vocational-discovery-development-program> 1-877-787-8999



Texas Workforce Commission

<https://twc.texas.gov/> 1-800-628-5115



This project is supported by the U.S. Department of Education, Special Education Program (OSEP).

The opinions expressed here are those of the authors and do not necessarily express the position of the United States Department of Education.