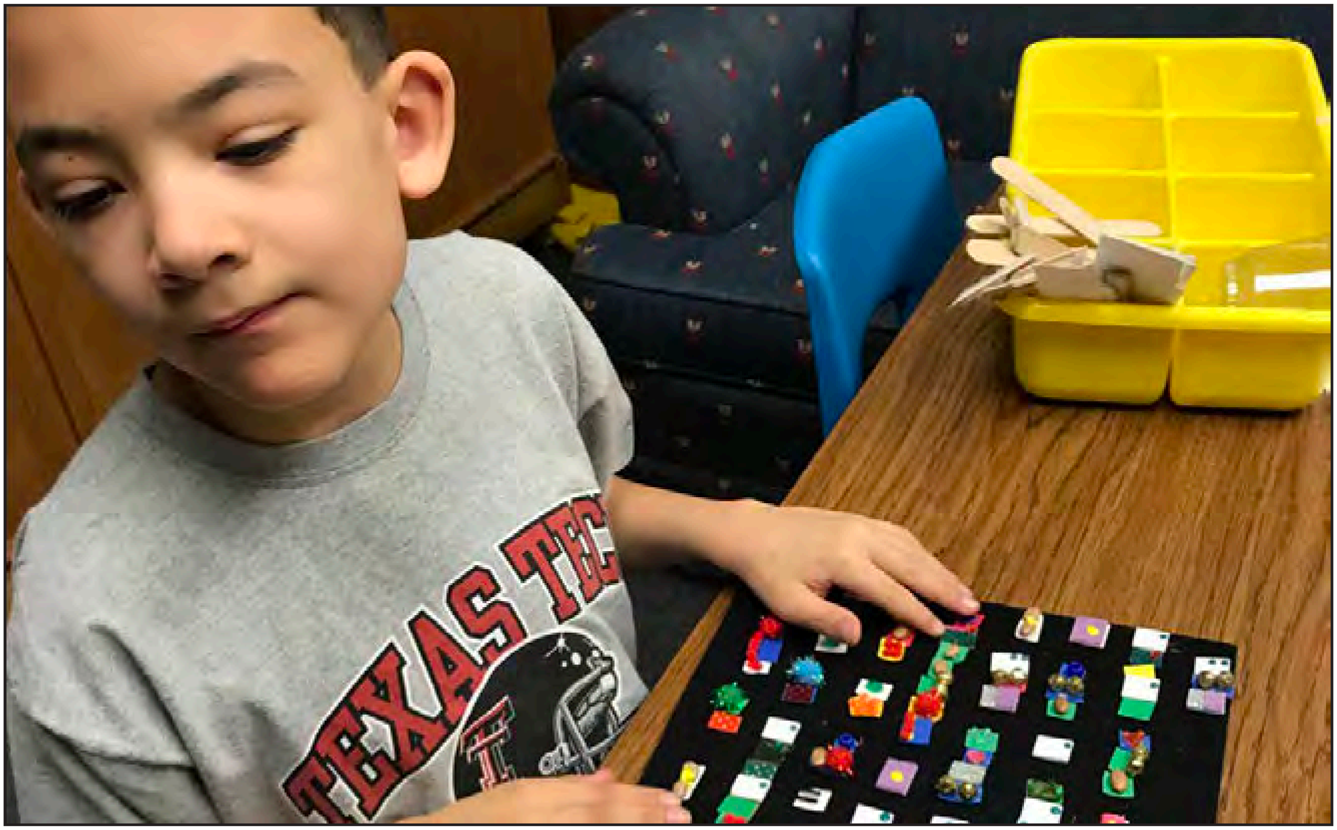
SPRING 2021 VOLUME 14 | NUMBER 2

TX SenseAbilities

A PUBLICATION ABOUT VISUAL IMPAIRMENT AND DEAFBLINDNESS FOR FAMILIES AND PROFESSIONALS



A student who is visually impaired reads a story written in textures. Read more about Aidan's alternate path to braille and literacy on page 25.

FAMILY WISDOM

EFFECTIVE PRACTICES

NEWS & VIEWS

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.

Join Now!

https://qrco.de/lynxform

TSBVI Family Lynx

Mission

TSBVI Family Lynx will establish a TSBVI community that connects families and empowers them to work together to support one another and the school. Our goal is to support, listen to, and learn from all parents and guardians.

TSBVI families are eager to learn from and encourage each other during every stage of their journey. Working together we are stronger and better able to support TSBVI families, students, staff, and administrators.

Lynx = Links, Get it? (That's what we're all about!)

Purpose

- TSBVI Family Lynx is a volunteer organization composed of TSBVI families including those students that attend short term programs, the EXIT program, summer sessions and day students. There are no fees to join.
- We meet regularly during the school year to connect with each other and discuss projects to support of all TSBVI students, staff, and each other.
- We provide a support network for families to share their experiences without judgement.
- TSBVI Family Lynx establishes and maintains a working relationship between families and the TSBVI school community.
- We support the educational programs and extracurricular activities of the school through volunteer service and involvement.
- TSBVI Family Lynx encourages school cohesion and school spirit.
- Family Lynx does not have a fundraising mission. The group needs financial support from TSBVI Administration.

providing "lynx" to each other and supporting TSBVI

Registration

easy peasy

- **Fill out the Registration Form -** https://qrco.de/lynxform (or scan QR Code above)
- **Free** - no membership fees
- **Members-Only** - email announcements and access to the private Family Lynx Facebook page and private Google Drive with Family Lynx Member Directory and more…

* Registration not required to attend meetings, but encouraged to show your support of TSBVI students, families and staff, AND to receive Members-Only access and opportunities to get involved

Spring Meeting Dates

- February 16, 7 p.m.
- March (skip for Spring Break)
- April 13, 7 p.m.
- May 11, 7 p.m.

Initial Projects

- **Wildcat Welcome Wagon** - Greet families taking campus tours. Send welcome letter to new parents and packet for incoming students and summer students. Create signs for each student's dorm door to welcome them on Registration Day
- **Family Lynx Directory** - Available to only Family Lynx members via group's Google Drive
- **Staff a-PAWs** - Celebrate TSBVI staff with tokens of appreciation throughout the school year. "We a-PAWd You" signs can be placed on classroom doors and other common areas
- **Staff Appreciation** - Celebrate teachers and nurses during Teacher/Nurses Appreciation Week, plus other staff members who work with our children on designated dates throughout the year: Residential, Weekends Home, Housekeeping, Cafeteria, Administration, Security, Facilities, etc.
- **Conference Representatives** - Attend conferences as TSBVI representatives and host Q&A sessions about the school and what it is like to have your child attend
- **Lynx Pride Spirit Gear** - Family Lynx and TSBVI spirit gear availability online
- **Sensory Garden** - Design and build a campus Sensory Garden
- **Parent Panel Speakers** - Parents willing to participate in speaking engagements on and off campus

Ready, set, GO!

Future Projects

- **Alumni Homecoming Mixer -** Event held on campus during the White Cane Day celebration to connect current and former students and their families
- **Alumni Lynx** - Create an alumni network for students and families
- **"Where are They Now" Alumni project** – Former students and their parents sharing glimpses of their lives after TSBVI
- **Home Teams** - Create opportunities for families in the same area to get to know each other
- **Helping Paws projects -** Assist staff as a volunteer to help with various projects on campus, remote options may also be available
- **Campus Beautification projects -** Bring cheer to campus grounds and dorms through tactile art, swings, benches, landscaping and holiday decorations

so many possibilities ...

Who

- **Members** - All parents, other family members and guardians of all students (day, residential, exit, short-term, summer) are encouraged to join
- **Project Groups, Chairs, Co-Chairs** – members can select projects to be involved and work on
- **Leaders** - a team of organization Leaders instead of elected board members who will serve a two-year term. Founding leaders are Patty Bushland (mom of Mary Rose), Barbara Knighton (mom of Joshua), Pauline Mann (mom of Ethan), Amy Potts (mom of Rees)
- **Staff Liaisons** - Katherine Houck, Yolanda Shaw and Edgenie Bellah
- **Staff Representatives** - TSBVI staff members representing various areas on campus

+ YOU! register today!

https://qrco.de/lynxform

My Success Story

Garland Goodwin, Rising College Student

Abstract: Garland, a student with CHARGE Syndrome, describes his public school experiences and the supports that allowed him to participate completely and successfully.

Keywords: CHARGE, intervener, advocacy, accommodations, student success, public schools

My name is Garland Goodwin, and I am 18 years old. I am going to be a freshman at Tarrant County College this fall. I am a young man with CHARGE syndrome who completed public school in Fort Worth, Texas.

Garland Goodwin poses in front of his house.

CHARGE syndrome is a disorder that affects many areas of the body, and the letters that form the word "CHARGE" stand for these different areas. Because of CHARGE syndrome, I have a swallow dysfunction and had a G-tube from birth to 5 years old. I also have inner and outer deformation of both ears, which is the reason I have super powerful hearing aids along with a speech impairment. I have bilateral colobomas and am considered high risk for retinal detachment. My low vision is the reason I wear special glasses with thick lenses. I also have many other characteristics of CHARGE syndrome.

When I was little, I used to really like Thomas the Tank Engine. I have always loved collecting Transformers, Power Rangers, and Build-a-Bears. In elementary school, I started Tae Kwon Do. It helped me gain more balance and confidence. In high school, I took theatre as my elective. I liked helping to put the sets together and finding different music scores for the scenes. I even wrote a play that was performed by real actors at Stage West Theatre in Fort Worth. I love volunteering at the Ronald McDonald House in Fort Worth, doing simple things like cleaning the playrooms for the kids. I enjoy bike riding with my mom on my bike. I love traveling all over the country and camping with my family. One of my other favorite things to do is drive my golf cart around my neighborhood, but it is even more fun to drive others around!

Garland cruises the neighborhood in his golf cart.

I'd like to talk about how I was successful in public school while working with accommodations provided by the school district. I started public school early, when I was only in preschool. The school I went to had interpreters and knew how to teach students who were deaf. Most of the other kids in my class were profoundly deaf. I switched schools when I started kindergarten because the teachers at the new school were more caring and willing to work with the IEP. At the end of first grade, I had a consultation from the Texas School for the Blind and Visually Impaired (TSBVI) at both home and school. That consultation helped me get lots of accommodations for school. TSBVI Outreach ended up coming back in fourth grade to consult again and help train my teachers. In fifth grade, I got my first intervener, and I did a little better in school. In that same year, I got bullied in the bathroom by some students who turned off the lights while I was in there. After that incident, my mom suggested the school allow me to use the teachers' bathrooms instead. Because it was put into my IEP, I continued to use the teachers' bathrooms throughout middle and high school.

My mom advocated for me and for all my accommodations. We held ARD meetings twice a year until seventh grade to ensure that my teachers still understood the accommodations and to make any changes that were needed. My mom worked with others in the district and TSBVI to advocate for me. My mom always did her research on what to ask for, then made suggestions for the accommodation. She would remind everyone in the meeting that they were ALL here to make sure the committee did not set me up for failure. She learned so much about the system from all the advocating that she did for me that she ended up being able to help other parents of children with special needs.

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My Success Story–continued

Garland poses with his mom, Michelle.

In sixth grade, I moved to a school that combined middle and high school grades. I began working with a new intervener and had increased accommodations. Because of my vision problems and the really bright skylights in the school, I was allowed to wear a hat inside, even though it's against uniform code. My teachers provided me notes, and my intervener was my scribe, so she wrote down my answers for me. I used the elevator because the stairs were crowded, and I could lose my footing and fall, quite possibly losing my residual vision if my retinas detached. I was allowed to leave five minutes before class was over so I could walk when the halls weren't crowded with students. During testing, I went into another room by myself with my intervener or someone to scribe and read the questions for me during the test. My intervener has been the biggest influence in my education.

In middle school, I was able to do Junior Cadet Corps. I was able to be in a military-like program, even though I can't join the real military. I loved middle school because I knew what to expect from the schedule, and the teachers were following the IEP we had in place. High school was similar to middle school because I didn't have to change schools. I had the same intervener that I got in seventh grade, and she's awesome! The teachers worked with my intervener to make sure that I stayed caught up and that I had large print paper and materials that we were using. My school district provided every student with a laptop. My laptop had Dragon software that translated voice to text so I could easily speak and the words would appear on the computer screen. This helped me quickly get my ideas written down, which I can't do very well in writing because I have a "Written Expression Disability."

In high school, there were lots of technologies that helped me be successful in completing school work. I used special magnifying devices, Dragon software, and other computer programs. I tested out many programs and devices that could help me until I found the one that worked best for me.

My overall experience with the public school system and having CHARGE was mostly positive. I had lots of people supporting me including my parents, teachers, administrators, therapists, and friends. I always worked really hard in school, and my parents always supported me. My experience has been different in the fact that I have helped my parents shape the future of my education and that of other kids with disabilities and special needs. If I had any other disability besides CHARGE syndrome in school, it would be completely different, but I still had a really awesome experience. I got to help teach others about CHARGE syndrome, either just by being there, or by having them help advocate for me in the educational system.

Because CHARGE Syndrome is so complex, it can be difficult to receive a public education. More parents with children who have CHARGE syndrome should be able to go into the public school system confidently, knowing someone has done it before and has been successful. I consider myself a success story because I have made it through a huge portion of my educational career. I have had As and Bs in school the entire time, and I worked hard to earn them. Nothing was ever just handed to me. I feel very smart in the fact that I have learned a lot in school. I can read and write, even if my handwriting is not the best. I can do math, and I even like math! I like every subject in school, no matter how hard it is. I like a challenge, and I LOVE to learn!

I graduated in the top 20% of my class with a distinguished diploma and a 3.9 GPA. I plan to attend Tarrant County College with a full course load for the fall semester. For now, I plan to pursue a Business Administration degree. I hope that my actions inspire any person with a disability or special needs to do what I have done. I more than made it through public school. I am doing well and have goals for my future. From my story, I want to inspire more special needs kids to attend public school. I want to inspire the parents to put their kids in public school. Public school will allow the students to teach others about their disabilities. I want to also assure parents that there are things that can help their students that are free when needed.

(cont.)

My Success Story–continued

I want to let parents know that having a kid with special needs is just like having any kid, just with a disability. It's not a curse. It's not "why me." You shouldn't have negative expectations of your child. They are special in their own way, and they can be successful. You only need to worry about helping them know who they are and how to work hard. For a parent who is putting their child with special needs in school, I advise to keep pushing for those accommodations. The district may say no, but the parent knows their child best, and your kid may really need them. Don't give up. Always keep trying to get your child the correct accommodations. ⬢

GET ENGAGED

A Note About Family Engagement

The TSBVI Outreach Department knows that families are at the heart of creating enriched learning opportunities for children with visual impairments, including those children who are deafblind or have multiple disabilities. Families are the guiding force behind all life decisions for their children. To help families become confident and effective, we provide information, connections, and training to fit each family's individual styles. We partner with state and national family organizations, education service centers, and other state agencies to provide a variety of services to support families within their communities.

Families can connect with a Family Engagement Coordinator to:

- Talk about family matters, including their child's community involvement, school program, and related supports.
- Request training on a variety of topics related to having children with visual impairments.
- Explore Family Leadership Training.
- Request financial assistance to participate in Outreach training, including funding for travel, lodging, registration, childcare, and meals.
- Learn more about special education, visual impairments, family organizations, Medicaid waivers, resources for transition to adulthood, and resources in your area.

If you'd like to connect with a Family Engagement Coordinator at TSBVI, email:

- Edgenie Bellah (Deafblind Team) - bellahe@tsbvi.edu
- Yolanda Shaw (Visual Impairments Team) - shawy@tsbvi.edu

White Cane Safety Day in Texas

Christopher Tabb, Statewide Orientation and Mobility Coordinator, TSBVI Outreach Program

Abstract: The author shares information about the history behind the celebration of White Cane Safety Day and how it is recognized across the state of Texas.

Keywords: White Cane Safety Day, Blind Americans Equality Day, Blind Awareness Month, TSBVI

White Cane Safety Day is generally recognized on October 15th each year and was originally established by President Lyndon B. Johnson in 1964. President Johnson said, "A white cane in our society has become one of the symbols of a blind person's ability to come and go on his [her] own." Today, White Cane Safety Day is celebrated in different ways across the country, and although they don't always occur on October 15th, celebrations are typically scheduled around that date. This seems fitting as October is also known as Blindness Awareness Month. White Cane Safety Day has also come to be known as Blind Americans Equality Day, as introduced by a proclamation from President Barack Obama in 2011. President Obama's proclamation stated, "On Blind Americans Equality Day, we celebrate the achievements of blind and visually impaired Americans and reaffirm our commitment to advancing their complete social and economic integration."

In Austin, the annual White Cane Day Celebration has had multiple homes. For many years it was held downtown at Republic Square Park and included a march from the State Capitol to Austin City Hall, where speeches were given. The activities continued at the park with music, food, games, activities, and exhibitors. Featured musicians usually included those who were blind or visually impaired, and the games were selected based on ease of adaptability. For the last several years, the annual event has been held at Texas School for the Blind and Visually Impaired (TSBVI) and is open to the public. Students at TSBVI and community members have enjoyed face painting, games, and physical activities like hamster balls and bounce houses.

In Houston, the White Cane Safety Day event typically begins with a march that goes through the city and culminates at City Hall. Then, a big celebration begins

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White Cane Safety Day–continued

Students and staff march on the TSBVI campus for White Cane Day activities.

with live music, food, exhibitors, and more. 2020 marked the 13th annual White Cane Safety Day celebration and the first ever virtual celebration for Houston. 2020 Event Chair Benigno Aceves wanted to truly bring the city an “Out of this World” program lineup. This was accomplished by hosting two speakers from NASA. Hundreds of attendees from across the state participated in lively virtual interactions, listened to engaging speakers, experienced star performances by blind Houstonians, and won virtual door prizes! Houston’s White Cane Safety Day committee and supporting partners continued to give the message to always reach for the stars and strive to achieve your goals. The celebrations for Austin and Houston are heavily supported by the Texas Workforce Commission (TWC) and generally occur on different days in order to ensure appropriate distribution of resources and encourage increased attendance by individuals across the state.

Over the years, North Texas has celebrated White Cane Safety Day with a walk in downtown Fort Worth that includes a lunch gathering at Northside Stockyards and a trip to Kimbell Art Museum. Each year the North Texas celebration tries to incorporate the history of White Cane Safety Day into its celebration while also providing an opportunity to use independent travel skills via a walk in the downtown area, a scavenger hunt at the Stockyards, and by navigating the many exhibits at the museum. North Texas also provides an opportunity to explore a stationary bus, ride a city bus, and visit with vendors.

Although the 2020 celebrations of White Cane Day were significantly impacted by COVID-19 pandemic safety measures, the day continued to be one in which the independence and abilities of people who are blind and visually impaired was highlighted. Austin, Houston, and North Texas held virtual celebrations with guest speakers to help honor and recognize the importance of the day along with the independence it represents. ⬢

Wearing Masks…and Glasses…and Hearing Aids

Amy Potts, TSBVI Parent

Abstract: A parent shares tips to promote the use of mask-wearing for children who are deafblind.

Keywords: deafblind, masks, COVID-19, pandemic, hearing aids, American Sign Language, ASL

Rees wears a green mask outside on the TSBVI campus.

COVID restrictions can pose particular challenges for individuals with a combined vision and hearing loss. The requirements for wearing masks and social distancing may be difficult for them to understand, and the change from the usual routine may be upsetting. Our 14-year-old son Rees is deafblind and is a student at TSBVI. He participated in at-home learning last spring during the pandemic, and when it was time for him to go back to school in person, we realized that it was time to really focus on having him wear a mask. We knew that this would not be easy for him, as he wears both bilateral hearing aids and glasses, which means that he already has a lot of things on his face and behind his ears.

I met with his TSBVI team frequently during the transition, and we all brainstormed ideas to help Rees learn to accept wearing a mask. His wonderful Residential Instructor, Danielle Caren, made a video just for him, based on one of his favorite “Pete the Cat”

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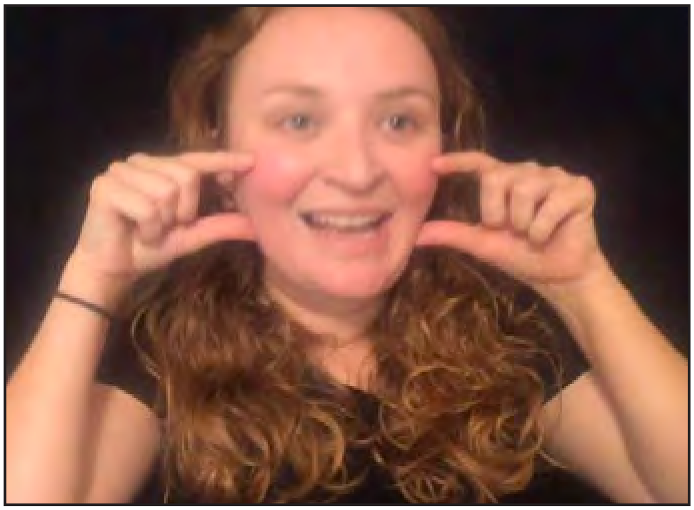
Wearing Masks–continued

books. The video features a story called "Rees Loves His Green Mask" which is presented through American Sign Language (ASL) and song. The story is based on the 2008 book, *Pete the Cat: I Love My White Shoes* by Eric Litwin and James Dean, published by HarperCollins. I created an avatar (a graphic representation of a person) of a boy wearing glasses and a green mask to add another visual element to the video.

The author created an avatar to represent her son.

Rees absolutely loved this video and watched it over and over. This definitely helped him get used to wearing the mask and to associate it with one of his favorite staff people, as well as a song he enjoyed. In addition, his teacher had the students wearing masks during their Zoom calls even before they came back to campus. As a result, Rees learned to tolerate his mask well before returning to the classroom.



Rees' Residential Instructor, Danielle Caren, signs and sings the green mask song she created for him.

Considerations in Choosing Masks

I decided that it would be easier for my son to identify his own masks if all 10 masks required for school were identical. I ordered 10 green masks online. The fabric is thin and soft, so that it is not too uncomfortable behind his ears. I attached tactile name tags to help

Rees' mother found the most comfortable mask for him.

Rees and others recognize the owner. An eyeglass strap clips to the ear loops of the mask to keep it from getting tossed on the ground. If he pulls off the mask, it won't go all the way to the floor, which makes it easier for him to find again, as well as being more hygienic.

We experimented with several mask styles to find the one Rees found the most comfortable behind his ears. It's also possible to use mask extenders that pull the loops of the mask away from the back of the ears. Search "mask extender" online and you'll find many options to make or purchase.

All masks can block or distort sounds, especially for high frequency sounds. Rees' audiologist turned up the high frequency setting in his hearing aids, which helped. Some hearing aids now have a "mask" setting ("Face Mask Mode"), which can be helpful as well.

Tips for Communicating with Those with Vision and/or Hearing Loss

Clear masks are great to wear when communicating with an individual who relies on lip reading. But for those with both vision and hearing loss, clear masks create even more sound blockage and distortion, plus those with low vision are less likely to lip read.

To help Rees hear someone who is wearing a mask, we sent the bluetooth microphone that pairs with Rees' hearing aids to school (it is similar to an FM System that may be used by some students). It can be worn by anyone working with him and gives him an extra boost. ⬢

Rees smiles while swinging outside with his green mask clipped to the eyeglass strap around his neck.

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Wearing Masks–continued

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Living with Hearing Loss (August 25, 2020). Hearing Loss: Are Clear Masks Really the Answer?

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Public Health -- Seattle & King County (May 11, 2020). Information on Face Coverings for Deaf, Hard of Hearing, and Blind Community Members.

https://www.kingcounty.gov/depts/health/covid-19/care/~/media/depts/health/communicable-diseases/documents/c19/face-coverings-guidance-ASL.ashx

The Hearing Review (August 6, 2020). “Face Mask Mode” Now Offered in Signia Hearing Aids.

https://www.hearingreview.com/practice-building/office-services/telehealth/face-mask-mode-now-offered-in-signia-hearing-aids

For more ideas about wearing masks, also see:

Ideas for Helping Students with Multiple Disabilities Including Deafblindness Wear Masks and Face Coverings

http://bit.ly/maskideas

Teaching COVID-Related Concepts to Students with Multiple Disabilities or Deafblindness

https://www.pathstoliteracy.org/blog/teaching-covid-related-concepts-students-multiple-disabilities-or-deafblindness

Masks with clear panels are helpful for some students.

Early Intervention 101: A Virtual Reality

Karen Borg, Director of the Parent Infant Program for the Blind and Visually Impaired, Utah Schools for the Deaf and Blind

Abstract: Karen Borg shares information on providing teleintervention services for children aged birth to 3. This article, based on a TSBVI Coffee Hour that she presented with four Early Intervention Vision Specialists from the Utah Schools for the Deaf and Blind, also provides an explanation of Parts B and C of IDEA and offers suggestions for all who provide services to young students with visual impairments.

Keywords: early intervention, IDEA, Part C providers, Part B, teleintervention, early childhood, Parent Infant Program, virtual instruction, distance learning, coaching

Perspectives from Utah on Early Intervention Using Distance Tools

The Parent Infant Program for the Blind and Visually Impaired (PIPBVI), a division of Utah Schools for the Deaf and the Blind, serves the entire state of Utah, delivering services to every location that has a child aged birth to 3 who has a vision impairment. Utah has an urban corridor that extends through half its length, right in the middle of the state. The rest of the state consists of rural country that branches out away from that metropolitan area. Because of inclement weather, distance, and cold and flu seasons, we are not strangers to using distance learning technology to make virtual visits. Covid-19 has brought a whole new level of virtual to our practice, which has now been almost exclusively distance since March of 2020. This shift in our practice is having effects we haven't yet been able to quantify or qualify, so we are leaning on what others have said about teleintervention as we navigate the continuing pandemic and craft a pathway past the pandemic into the future for our field. The one study that has been conducted on teleintervention in young children with visual impairment states:

> "Conclusions drawn from the study suggest that teleintervention has the potential to be a successful and viable way to supplement, not replace, in-person O&M support home visits with families of children with BVI, particularly to increase the availability and frequency of services" (Phangia Dewald, 2019).

Our experience seems to echo Dr. Dewald's conclusion. Virtual visits have greatly in-

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creased our reflective coaching abilities, thus empowering parents to participate more actively in routine-based strategies.

Some of the challenges of virtual visits include the difficulty of doing functional assessments; the ease families find in cancelling a virtual visit, making services less consistent; and the loss of families who refuse teleintervention, even during a pandemic. The unknown effects include the impact on child progress. It will be several months before that data is available, and the ramifications of COVID-19 will still be only estimated. Will families be less or more likely to seek services? Will they seek or shun virtual services? Face-to-face services? Will the pandemic produce a cohort of children who will be impacted for years to come as they turn three and enter Part B services (for students 3-22)? When all is said and done, the results are still likely to just be a guess of the impact of COVID-19.

What Does This Mean for Service Providers?

A little background for new providers:

If you are new to early intervention, or an outsider all together, it’s easy to ask, “How do you even give vision services to a baby? And why would you?” A moment of reflection and common sense will remind you that vision is foundational to every developmental domain. Vision loss changes the way a child learns because they are not able to learn incidentally through observation. Vision loss affects bonding, and good attachment leads to the security and confidence necessary to explore and interact with the world around us. Vision is the primary motivating sense for approximately the first year and a half of life.

COVID-19 has impacted staffing and service patterns in many areas. If you are a teacher of students with visual impairment (TVI) serving primarily students in Part B (age 3-22) and find yourself with Part C (birth-3) referrals, this article might provide some survival skills to help that transition be a bit smoother. The referral process in Part C of IDEA is a bit different from Part B. A referral for early intervention services could come from a doctor, parent, public agency, homeless shelter, etc. In Part C, determination of eligibility *must be made within 45 days of the referral.* In Part B, eligibility must be made *within 60 days of consent to evaluate being given.* Evaluation is free of charge to families in both cases. IDEA allows states to charge for other Part C services if they choose, but a free, appropriate public education is required in all states for Part B students.

Part C requires that services take place in the natural environment, which is defined as “…settings that are natural or typical for a same-aged infant or toddler without a disability, may include the home or community settings….” If the parent and the IFSP (Individual Family Service Plan) team determine that a setting outside of the natural environment is appropriate, it must be because skills cannot be achieved within the natural environment. In our program, an IFSP outcome such as safely navigating an unfamiliar environment might serve as the foundation for such a decision.

Finally, in Part C, the emphasis for service provision is the *family.* The service document is an Individual *Family* Service Plan. It is perfectly appropriate to write a goal (often called outcome) for the parents, caregivers, or guardians, such as, “Mom will master the Grade 1 Braille alphabet.” The IFSP is reviewed and amended as appropriate every 6 months, instead of annually. The family really does drive the Part C bus. The family chooses the outcomes (goals) and has a large say in the service pattern. Building relationships is paramount.

Building a Rapport

Before you call the family of a new referral, do your best to get as much information as possible from your referral source. Some important questions might include:

- Was the child in the NICU? How long?
- Is there a medical diagnosis?
- Is there a vision diagnosis?
- What are the family’s circumstances?

Many providers find it smooths the way to first introduce themselves by text, and upon getting a response, to set up an appointment for the first virtual visit. If possible, meet with both parents. Remind them of how you got the referral. Ask simple, direct questions and discuss their observations and concerns about vision. Find out about the family and their support systems and preferences.

In our program in Utah, more than half of the children aged birth to 3 with vision impairment have multiple differences. Many of these children are medically fragile, which contributes financial and emotional stress to their families’ situations. Families are worried, exhausted and overwhelmed. Listen carefully and empathetically to their concerns and their goals. Recognize that medical situations may frequently derail the visit schedule and that does not mean that the family isn’t committed to their child’s progress. As your relationship with the family deepens, point out how the strategies they’ve implemented have helped their baby progress. Help them network with other families who have children with visual impairment.

Assessment and Developing an Instructional Plan

In order to determine eligibility for services and develop an instructional plan, you’ll need to do some assessment. Many assessment tasks can be accomplished virtually. Send parents a list of the kinds of visual behaviors you’re interested in before you meet with them to begin evaluation. To have a good history of visual behavior, ask questions such as:

- What are the parents’ vision concerns?
- How is the child using their vision?
- Are there any unusual visual behaviors?
- Is the child meeting visual milestones?
- Have they seen an eye doctor? Is there an eye report? (in many states, eligibility for vision services in Part C is not based on an eye report, but on visual functioning).

When you have a chance to meet for the virtual visit, observe the child at play. Point out

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Early Intervention 101–continued

specific behaviors, “I see…. Did you see…?” After your first visit, you should have an idea of what still needs to happen for eligibility. Can you finish up virtually? Can you use materials in the family’s home? If not, consider dropping off materials for your next virtual visit. Could the family make some videos that would help you assess further? If it’s necessary to meet, make sure that you can do that in a place where COVID-19 protocols can be met, such as social distancing. Some homes are small enough that it is difficult to stay at least 6 feet away. Ensure that parents are willing to wear a mask.

After eligibility is determined, instructional planning can begin! Best practice requires that outcomes are measurable, observable, routine-based, and functional. They will be based on parent concerns and priorities, informed by your assessment. Remember, the purpose of our visits in Part C are not to do therapy; it is to coach parents to utilize strategies throughout the day, in typical routines, to enhance their child’s growth and development.

Conducting a Virtual Home Visit

Begin a home visit by asking the family how things are going generally (work, health, family in general, etc). Next, review the last visit, what you worked on, and how follow-up went for the family. Report on follow-up you may have committed to (getting an eye report, finding out about a community resource, etc.). Ask what they’d like to work on today. If an answer isn’t forthcoming, remind them what they prioritized at the close of the last visit and ask if that is still appropriate. You might also ask some reflective questions, such as, “Are there routines that aren’t going well? What is the hardest part of the day?” Such reflection can help keep the focus routines-based and may help the family member step out of the rut of “just another visit” to really measuring how the strategies and modifications you suggest can be beneficial on a day-to-day basis. When you determine the plan for your visit, ask the family to collect some things to use for the visit. This doesn’t need to be hurried or stressful. For example:

- Do you have the shape sorter we used last week? I can wait while you get it.
- Do you have a pan in the kitchen that we can use for banging?

Make adjustments to the camera angle, positioning, etc. throughout the visit as needed. This, too, should be relaxed and natural.

Remember that the focus of any Part C visit, virtual or face-to-face, is the interaction between the parent and the child. The Part C provider shouldn’t spend more time interacting with the child than the parent! Being virtual really helps us practice our coaching skills and stay out of the way. Try not to be distracting when the parent has the child’s attention. Do feel free to give feedback when there’s a break. Be positive and specific in your instructions, for example:

- It looks like she could use a little support under her arms. Do you have a pillow we could use?
- What is he looking at? (If you see that the child's visual attention is elsewhere). Could we bring that down to his eye level?

You should also feel free to drop things by, while keeping safety protocols in mind. Some things that aren't available readily in many homes might include mylar (to look at, to grab, or to stuff into a pillow), a switch and switch activated toys, a brailler, a slinky, etc. Check with the parent to see what they might use in their routines.

As you prepare to close the visit, review what happened and how it went. Reflect with the parent about progress:

- What do they feel is going well?
- What seems to be a continuing challenge?
- What do they think might make progress more forthcoming?

Make a plan for dropping things off before the next visit, if necessary, and what you will follow up on for the next visit. Confirm the date and time of your next visit and what the family will do to be prepared for the next visit.

It is a unique privilege to serve families at the beginning of their special education journey. These families, many of whom are so new in the grief process and so frightened about the future, invite us into their homes, virtually and in person, to navigate their daily lives with them. We reflect with them on the realities of today and the potential of tomorrow. Part C providers teach strategies and make accommodations to allow all of the members of a family to enjoy each other and join together in the routines of their household and culture. The family's life is enriched with possibility and participation. Our life is enriched by collaboration and the sharing in others' dreams. Part C services may be new to you, but rest assured, they can inform your practice and enhance your life if you let them. ⬢

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TSBVI Coffee Hour Webinar: Distance Considerations for Birth to 3. https://www.tsbvi.edu/videos-webinars/coffee-hour-recordings#Birth

Literacy for Little Ones

Renee Ellis, TSBVI Outreach Teacher**, Kathi Garza,** TSBVI Outreach Early Childhood Teacher**, Cyral Miller,** TSBVI Outreach Teacher**,** and **Debra Sewell**, TSBVI Curriculum Director

Abstract: The authors present information about early developmental skills that are prerequisites for formal reading instruction for children with visual impairment. This information was created as part of an early literacy training program for VI professionals and families presented at several regional Education Service Centers (ESCs) in Texas.

Keywords: literacy, prerequisite skills, emergent reading, child development, motor skills, tactile skills, concept development, language, communication

When does literacy begin? Understanding the world and developing the ability to communicate about it using gestures, speech, sign language, or other formats, starts with our very earliest experiences. Babies typically come into the world using vision to take in their surroundings, bond with their caregivers, and, as they grow, make connections between what they see and symbols (such as pictures or print) that represent those objects. Children who are blind or have visual impairment (VI) can develop these skills, too. Although literacy may develop differently for students with visual impairment and those with additional learning needs, child development follows recognized developmental sequences. VI professionals can help families support early literacy at home even before their child enters a classroom; experiences in the earliest years contribute to later reading success. Students who struggle with reading in school may have missed important early developmental milestones. Revisiting those lessons may help them move forward in academics. We cannot rush or skip steps! Literacy instruction is always part of a comprehensive approach to child development. If we know that literacy starts at birth, then we can track the development of a child's skills in underlying areas as they grow towards conventional reading success. In school, literacy instruction is typically based on the five key components identified by the National Reading Panel: phonemic awareness, phonics, fluency, vocabulary, and comprehension. This article focuses on early developmental skills that are prerequisites for formal reading instruction.[1]

Beginning in 2018, the TSBVI Outreach and Curriculum Departments started designing a four-part training series called Literacy for Little Ones. Sessions were created to help build the fundamentals of literacy in young children with visual impairments by focusing on important early childhood developmental areas, including strategies for families to incorporate into home routines. Frequently, young children with significant visual impairment do not have the same rich literacy experiences as their peers and may not begin to develop foundational reading skills until they enter school. Literacy for Little Ones was developed to help professionals and families provide systematic opportunities for movement, interaction, and stimulation to infants and young children with visual impairment, especially those who are likely to be tactile learners. The series brings families together with professionals and concentrates on four specific topics:

1. Gross and fine motor skills (including tactile skills for future braille readers)
2. Early concept development
3. Language and communication skills
4. Emerging reading and writing skills

The first three areas are important to address in early childhood, because they should be well established before moving on to instruction in formal reading and writing. Some older students do not make expected progress in book skills such as tracking, identifying letters, and answering comprehension questions about stories. It's worth taking a good look at whether they have achieved these early developmental milestones. Sometimes, delays in reading progress reflect missed mastery of important prerequisite skills. While children do need extended repetition and practice in order to succeed with reading, literacy for all readers is built upon opportunities for and mastery of foundational skills.

In 2020, TSBVI offered four Coffee Hour webinars based on the Literacy for Little Ones trainings in each of the topics below. Resources for VI professionals collected for those sessions are included at the end of this article.[2] Another major source for information about literacy *specifically for children with visual impairment* is the Paths to Literacy website.[3]

Part 1: Gross Motor, Fine Motor and Tactile Skills

Movement and motor activities are not just fun, they are critical for all early learners, especially those with visual impairment. Gross motor skills and early movement experiences facilitate the development of muscle tone, balance, and awareness of self in space, core strength, coordination and stamina.[4] Children use gross motor skills to maintain stable sitting and standing positions which are later required for reading and writing, especially for students who will read braille.[5] If sitting upright requires energy to counter gravity, or balancing the head on the shoulders takes great effort, then bringing both hands in front of the body to hold a book and track lines fluidly across a page are much more difficult. Gross motor development also serves as the foundation for mobility skills for the young child who is visually impaired, which in turn supports literacy.

Motor development progresses from gross motor movement to fine motor, including the development of tactile skills needed for turning pages of a book or reading braille. Tactile learners need fine motor skills in order to manipulate small objects, explore shapes, sort objects, and, of course, to read and write. The overall development of tactile learners, including concept development, communication, spatial thinking, and academic achievement, depends greatly on how much information these children can receive and interpret through tactile means. Frequently, tactile learners need more opportunities to develop strength in their hands and fingers before they can place their hands close together and move across a horizontal line of dots. The ability to differentiate between configurations of dots is more meaningful once a child can consistently identify real objects by touch.

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Early Literacy–continued

Movement activities help develop literacy.

Part 2: Concept Development

Concept development involves much more than basic spatial relationships. Children with sight may gain an understanding of the world through incidental observation; children with visual impairment gain that information when the world is brought within their visual or tactile reach. Families who actively include their child with visual impairment in routine activities at home increase their child's understanding of the world. It is through hands-on experiences around topics that interest them that children with visual impairment develop a more complete and meaningful understanding of their world. They must be exposed to many types of objects, people, places, sensory experiences and activities to develop an understanding of these concepts as well as the language needed to communicate about their experiences. Children need frequent opportunities to link part to whole and enough meaningful experiences to find patterns, make connections, and generalize across settings.

Part 3: Language and Communication

A visual impairment can make linking meaningful language with the real world more challenging. We must model and teach the language that links experiences and concepts by using descriptive words that label and provide information about what students are seeing, touching, tasting and doing while they are “doing it”. Language and communication influences all facets of development and directly supports the development of reading and writing skills. Direct instruction with repeated opportunities for hands-on experiences, starting at the very youngest age, supports this essential area of growth.

- A story about a cat can be meaningful only if a child understands what a cat is and recognizes the word or sign that represents a cat.
- Reading about plants isn't very interesting until a child has felt things growing in the dirt and can link that to the words/objects/symbols being discussed.
- Learning to ask for favorite foods is based on many concepts about what we eat, what we like, what it means to make choices, and the ability to communicate a preference.

Part 4: Emerging Reading and Writing

Literacy is an integral part of many everyday activities, at home and in school. Although an IFSP or IEP may focus on discrete skills, our goal is to support the whole child in all developmental areas as they develop skills to read and write. Checklists such as the Beginning Concepts and Pre-Braille checklists found in the EVALS publication from TSBVI, and others listed below, can be used to determine areas in which a child may need more opportunities to achieve important developmental steps.[6] There are also very specific skills related to braille reading or reading for children with low vision. As mastery of prerequisite skills are met, we can turn our attention to such activities as tracking lines with both hands, identifying and writing letters and words, increasing visual efficiency with print, and specifics of the braille literary and mathematical codes.[7]

Most importantly, we must match our goals to meet each child where they are functioning, providing instruction that is targeted to their *current* developmental level. We can't give students reading material that is always at their frustration level and expect success. If we find a child needs exposure and practice in more basic skills before we introduce "formal reading and writing", that's where we should target intervention.

It's exciting to watch a young child begin reading. Future educational progress suddenly seems brighter on the day a child reaches for a book and understands what she is reading. When we finally watch fingers curl over the dots and glide across a line, or eyes move smoothly across a page using a low vision device, it's a real celebration. Reading is a cognitive experience built upon life experiences, while braille relies upon interpretation of tactile sensations. Students who read braille must have both. Helping families understand that the way they play and interact with their child at home will support the development of these early skills can lead to a joyful lifetime of learning. Literacy successes bring pleasure as well as academic achievement!

There are no shortcuts. Children learn the most, and are best prepared for reading and writing, if they receive years of active engagement in meaningful, hands-on, real-life experiences. Remember that each child develops on their own timetable and in their own unique way. Successful instruction is based on individual interests and targeted to the child's current abilities and interests.

Are you interested in hosting a Literacy for Little Ones training in your area?

The Literacy for Little Ones project is designed to support families of young emerging readers with significant visual impairment and their educational teams. There is an emphasis on tactile learners who may become braille readers, although the strategies are relevant and useful for those accessing print. This four-part training series provides home strategies for families that help children develop motor skills, support concept development, language and communication skills, and specific pre-braille literacy experiences. Separate sessions for professionals focus on evaluation and curricular tools for home and classroom. If your ESC would like to offer Literacy for Little Ones training, please contact the TSBVI Outreach or Curriculum Departments for more information. ⬢

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Early Literacy–continued

Resources

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2. Coffee Hour Webinars: Literacy for Little Ones
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   - Emergent Literacy and the Importance of Language Acquisition (4/22/20)https://link.tsbvi.edu/language
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6. *EVALS: Evaluating Visually Impaired Students Using Alternate Learning Standards Emphasizing the Expanded Core Curriculum,* (2007),TSBVI,-Section 1, pp. 23-76 https://link.tsbvi.edu/evals
7. *Nemeth at a Glance: A Math Resource, Grade-Level Chart, and Evaluation Tool*, pp. 13-26, c. 2017 TSBVI https://link.tsbvi.edu/Nemeth

Children are welcome to participate in Literacy for Little Ones workshops.

Aidan's Story: An Alternate Path to Braille and Literacy

Ann Adkins, VI Education Specialist, TSBVI Outreach Program

Abstract: This article shares information about an innovative program of instruction created by Sherry Airhart, a Teacher of Students with Visual Impairments (TVI) in Frenship ISD, for a student who struggled with braille and literacy skills. Her willingness and ability to "think outside the box" resulted in an *alternate path to braille*, a program we called "APB: Aidan's Path to Braille."

Keywords: braille, prebraille, literacy, struggling reader, "non-traditional tactile learner", sensory integration, texture system, motivation, APB, tactile skills

I first met Aidan in 2014 during an onsite visit to Frenship ISD from the Outreach Program of the Texas School for the Blind and Visually Impaired (TSBVI). His Teacher of Students with Visual Impairment (TVI), Sherry Airhart, had requested a student consultation for Aidan because she had questions about his progress with braille reading and writing. At the time of Sherry's request to Outreach, Aidan was six years old and enrolled in a PreK program at Bennett Elementary School in Frenship, TX. Aidan is a student with Optic Nerve Hypoplasia (ONH) and Septo-Optic Dysplasia (SOD) and has no light perception or functional vision. He has a variety of medical issues including diabetes insipidus, hypothyroidism, hormone deficiencies, low cortisol levels, and fatigue issues. He also has very low muscle tone which affects both gross and fine motor skills. Sherry had been his TVI since he was two and a half years old.

Sherry completed a variety of suggested evaluations before the student consultation and worked with his educational team to complete his three-year reevaluation. The information she gathered showed that Aidan had a variety of strengths, especially in the areas of auditory memory, language and verbal skills, phonics, and rote spelling. His diagnostician noted that Aidan's phonological awareness was in the superior range and that he had a strong desire to learn and please others. Results also showed that Aidan was struggling in many areas: concept development, tactile skills, orientation and mobility skills, motor

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Aidan's Story–continued

skills, speech and language skills, social interaction skills, eating, coordination and balance. All of this information helped create a picture of a student with a variety of strengths and needs. It is not unusual for students with visual impairments to have such splinter skills, with strengths in some areas but deficits in seemingly related skills. As I prepared for the onsite visit, I felt that this might be a student similar to others I had seen. I was only partially correct.

When I visited Aidan at school, I observed a student who was receiving a very high level of support. I observed an educational program that emphasized concept development, sensory and tactile skills, and prebraille/beginning braille instruction. Aidan was provided with many activities of emergent literacy, as well as concrete experiences with a variety of real objects. I also noted the quality and variety of other tactile materials that were being used; they were traditionally accepted materials for students who are tactile learners.

I met with Aidan's teachers, therapists, principal, and the VI Consultant from the Education Service Center (ESC). I also visited with Aidan's parents in their home. All acknowledged and appreciated the comprehensive instruction Aidan was receiving. The VI Consultant at Region 17 ESC, who also served as Aidan's Orientation and Mobility Specialist (COMS) and had worked with him since he was a baby, provided more information about the intensive VI instruction that he had observed for Aidan. It appeared that all of the skills that TVIs were supposed to teach were being taught, and that they were being taught in very effective ways with excellent tactile materials. Despite years of comprehensive instruction in braille and tactile skills, however, using an array of traditional methods and materials, Aidan had not made expected progress. He was struggling with learning even the most basic skills needed for braille and tactile literacy. Sherry and members of Aidan's educational team questioned why he wasn't reading braille, as did his parents. After reviewing all of this information, I also asked, why isn't it working? Why hadn't Aidan made progress? If he was receiving quality instruction with quality tactile materials, then why hadn't Aidan acquired the skills needed for braille reading and writing?

While it appeared that Aidan was receiving the type of program that we hope all students with visual impairments will receive, what I noticed most when I observed Aidan were his sensory integration problems and difficulty attending to the activities, people, and things around him. This was true at both home and school. He seemed to be a happy young man, but he showed very little interest in things around him. He was described as being "in his own world". He seemed happiest when he was singing to himself and beating rhythms on his chest. Any time that he was not being specifically directed by an adult, Aidan began singing, clapping, and beating on his chest. Sitting at a desk seemed difficult for him —he sat on his feet, turned and twisted in his chair, leaned back, flapped his hands, stretched, yawned, and engaged in what are often referred to as self-stimulatory behaviors. He did not appear to be aware of things around him unless his teachers specifically spoke his name. It sometimes took several requests to get his attention.

At home, Aidan spent non-engaged time playing on his bed, listening to music, and chewing on hard plastic toy animals. He also tapped the plastic animals on his teeth, usually to a recognizable beat, and liked snuggling and hugging with his sisters. He drank a lot of water but did not eat solid foods. His mother prepared his food separately in the blender so that it would be a soft, mushy consistency.

When I asked Aidan's parents and his TVI what Aidan liked and enjoyed, it became evident that he had a very high need for sensory input. He liked swinging, cuddling, being in a closet, hugging, having a blanket, tapping his teeth or beating on his chest, and chewing on the hard plastic animals. Sherry provided some additional information:

- Aidan did not talk until he was three years old. His language was echolalic for several years after that, and at age six, it was still somewhat repetitive and not very meaningful.
- He was not walking when he entered the PPCD program at three. He began walking with support when he was four. He still wobbled when he walked.
- He disliked shirts with buttons, tags, or collars.
- Aidan had difficulty crossing midline and didn't use both hands together in purposeful ways, except for beating on his chest. His hands were described as being "all over the place".
- Aidan exhibited poor finger and hand strength, making it difficult for him to push the keys on a braille writer.
- He also had problems with identifying, spreading, wiggling, and isolating his fingers, especially his thumbs.
- He had difficulty with change and tended to perseverate on a few specific topics such as CDs.
- Aidan didn't interact with other students.

This information provided a much clearer picture of Aidan. His sensory needs seemed overwhelming. I was concerned that it would be difficult for Aidan to attend to any instruction or develop any form of literacy until these sensory issues were

Sherry supports Aidan during Special Olympics.

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Aidan's Story–continued

addressed. I consulted with several occupational therapists (OT), shared information on sensory integration activities with his team, and arranged for a video conference between Lisa Ricketts, an OT at TSBVI, and the district OTs in Frenship ISD. There were follow-up visits from the TSBVI Outreach Program in 2015. I hoped that meeting Aidan's sensory needs would begin to help him make expected progress.

While some progress was made in addressing Aidan's sensory needs, braille and tactile information still was not meaningful to him. He continued to struggle with tactile skills, literacy, and grade-level activities. I wondered if Aidan would, in fact, be a reader. Maybe he was one of those students who would be considered "an auditory learner"? Would Aidan ever be a braille reader?

After several years of instruction with traditional methods and materials, Aidan and Sherry were both frustrated. His family and school continued to ask why he wasn't reading braille. So, at his annual ARD in September 2015, Sherry decided to make a change. Traditional methods and materials hadn't worked, so she decided to try something different.

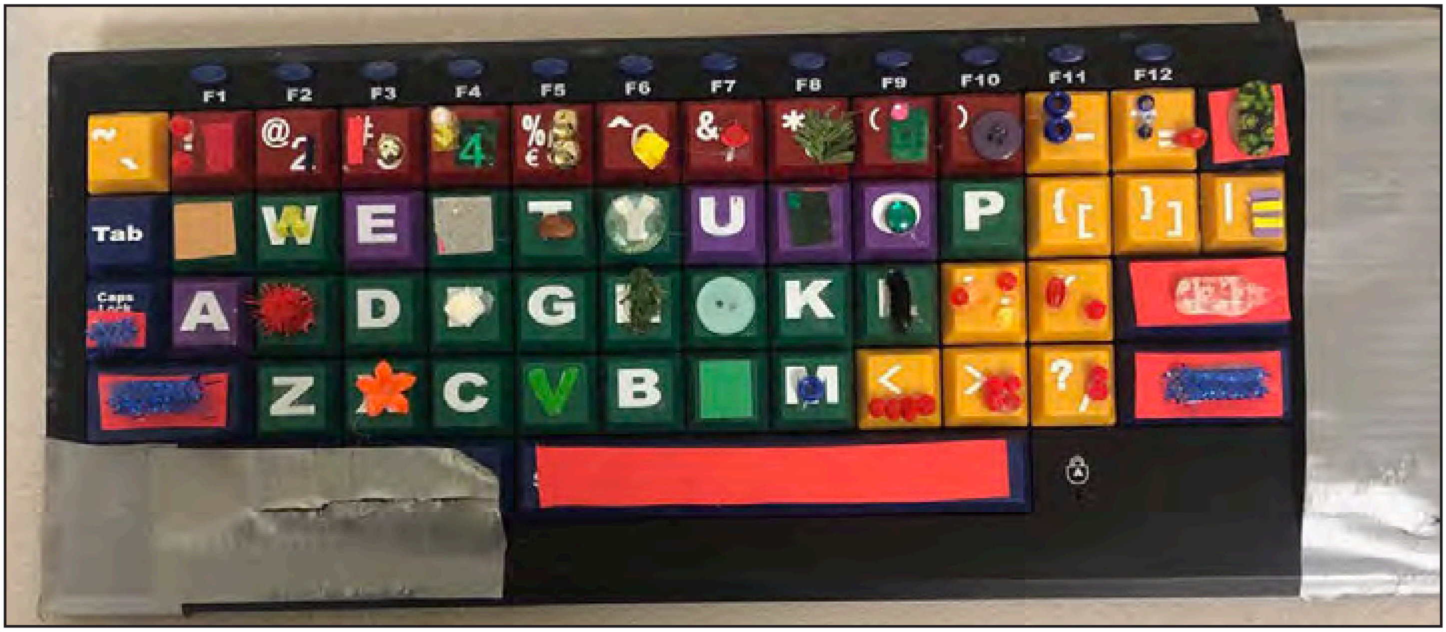
When I saw Aidan again in January 2016, I was absolutely amazed. He was reading braille whole-word signs! He was sitting up straight, his feet were flat on the floor, and his hands were on rows of whole-word contractions. He looked like a typical braille-reading student—but the contractions he was reading were not the dot configurations with which I was familiar as a TVI. The braille configurations were not made of dots! They were created out of a variety of different textures, things that were tactually familiar to Aidan, such as beads, buttons, beans, pieces of ribbon, and even a piece of an artificial Christmas tree. Sherry had created a system of textures for each letter of the alphabet and tied it to the braille code. Aidan was reading textures that represented all of the whole-word signs of contracted Grade Two braille! With this "texture system", Aidan was able to read rows of "braille" letters, demonstrating many of the skills we expect of early braille readers, such as tracking across lines of braille, moving his hands from left to right, using both hands to explore lines of braille, etc. This unique system of textures

Aidan reads braille whole-word contractions written with textures.

was meaningful to Aidan whereas typical braille dots were not. Textures provided Aidan with the ability to learn and practice so many literacy skills. He was reading!

Sherry explained how she created Aidan's texture system and how it evolved over time: Aidan had heard her working on the computer one day and asked her what she was doing. He seemed really interested in the computer and what she was writing. Braille writing had never interested him, but Sherry realized that he was interested in the computer. As a former Life Skills teacher, she had always sought ways to help her students write their names. She wanted Aidan to be able to write his name as well. He had known how to spell his name orally for some time, but he had never been successful with the Perkins or Mountbatten braillers. So she decided to adapt a computer keyboard by placing textures on the keys. He still did not use his hands well (they were still "all over the place"), so she taped over all the keys except the letters for his name. She attached the new keyboard to her computer, turned on the sound, and was amazed when Aidan typed the letter "a". He loved it! He quickly understood the 1-to-1 correspondence that a texture represented a letter. For the first time, he understood the concept of what letters meant! Within two weeks, Aidan was able to type his entire name.

Sherry then began using the textured letters from Aidan's name to create short words ("dad" was his favorite) which she attached to felt boards like the Wheatley Picture Maker from APH so that Aidan could read them as well as write them. He did! He understood that the textures were letters and that the letters made words. She began creating textures for all the keys on the keyboard and tied instruction to the braille code. She introduced letters gradually, depending on Aidan's interests, and allowed him to master each of them before moving to another letter. She incorporated them into short stories and rhymes that he knew and enjoyed. It was only a matter of time be-



Sherry adapted the computer keyboard with textures.

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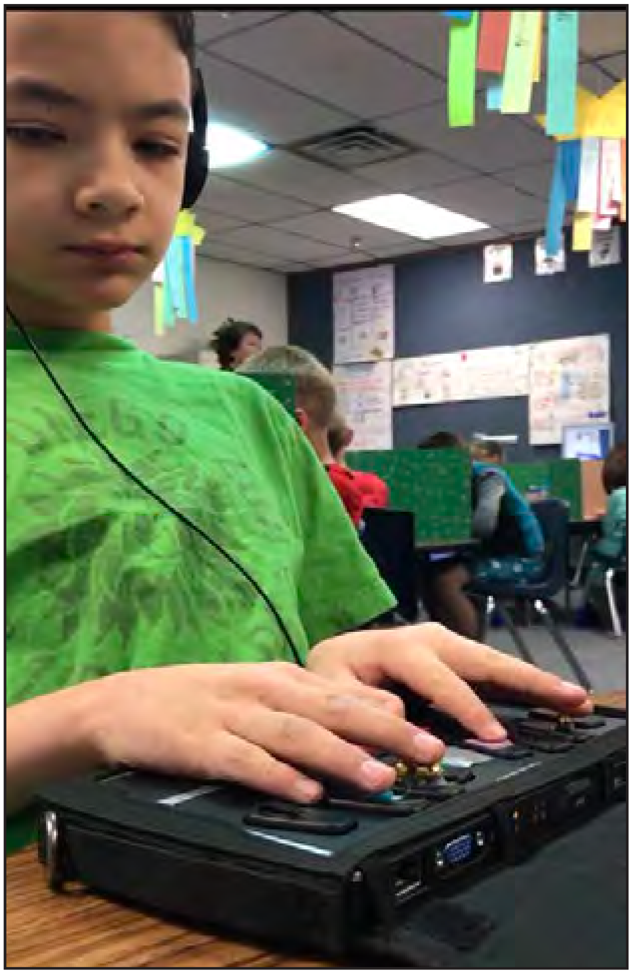
Aidan's Story–continued



Aidan uses a BrailleNote to take a spelling test in his general education class in 2018.

fore he was able to use the textured letters for reading and writing words, sentences, letters to his mom, and completing school activities. By 2017, Aidan was using textures for literacy activities in general education classes with his peers and for activities of the Expanded Core Curriculum (ECC).

Sherry added textures to other materials and equipment as well—a calendar, clocks, rulers, a thermometer, a talking calculator, and eventually, a BrailleNote. Aidan began using textures, with either the computer keyboard or the BrailleNote, in general education classes to take spelling tests. Within the next few years, Aidan gradually transitioned to other tactile representations of braille symbols—braille cells of enlarged dots made of different materials such as Velcro and puff paint. In 2018, Aidan’s New Year’s resolution was to learn regular braille. In May of that year, Sherry began transitioning him to jumbo braille. Again, Sherry introduced letters gradually, and she combined them in stories and worksheets with the puff paint letters he already knew. Once Aidan was successfully reading jumbo braille, he was ready for regular braille. By March 1, 2019, Aidan was reading and writing contracted Grade Two braille! Aidan is now a confident and successful braille reader of traditional braille materials.

Textures were the beginning of APB, Aidan’s Path to Braille. APB was more than just Aidan’s path to braille, however. It influenced many other areas of Aidan’s life too, not just his literacy skills:

- He became more focused and attentive, at both home and school.
- His O&M skills and independent living skills improved.
- He developed better posture and sat up straight.
- He seemed more interested in learning and asked for adapted materials.
- His social skills, language and conversation skills improved.
- He became more aware of people and things around him and participated in grade level activities, including social interactions with peers.

- His eating skills improved. In the fall of 2018, he ate pumpkin pie for the first time when he helped make it with his class. He even began eating and choosing food in the school cafeteria.
- He seemed to process information more quickly and was less dependent on auditory prompts.

According to Aidan's mom and his COMS, APB changed everything. It unlocked his world!

> *"Sherry invented a texture system that has unlocked something in Aidan's brain! He is actually comprehending the meaning of reading now."*
>
> Aidan's mom

> *"Sherry's system has changed Aidan's world!"*
>
> Steve Boothe, COMS, Region 17 ESC

When asked to summarize Aidan's Path to Braille, Sherry said that APB was not started as a system to replace braille but was "an opportunity to gain the concepts of reading and writing". It is:

- Individualized and student-centered
- Interest-based, built around what was motivating to Aidan
- Designed around his strengths (auditory skills are Aidan's strength, so Sherry tied instruction to that)
- Evolving! It had to change in order to meet his changing interests and needs.
- Flexible, but systematic

I also asked Sherry for her suggestions for other teachers and TVIs:

- Know your student!
- Emphasize what he can do, not what he can't do.
- Observe how he learns, how he uses his hands, and how he approaches things.
- Determine what is motivating to him and use that. Consider his interests as well as his strengths and needs.
- Break instruction into small steps (task analysis). It may really be baby steps, depending on your student.
- Provide as much time as your student needs to master a skill before moving on to another.
- Be systematic and consistent.
- Do the easiest braille letters first (a, l, k, etc.).
- Be willing to try "whatever works".
- Don't be afraid to ask for help.
- Look for different solutions! If something isn't working, try an alternate path.
- Think outside the box!
- Never give up!

Summary/Conclusion:

Aidan actually began his path to braille literacy long before I saw him in 2014. We discovered that Aidan had actually heard and internalized much of what Sherry had been teaching him during those early years about the braille code, basic concepts, dot counts, tactile skills, etc. He didn't have the ability to communicate that at the time, however. Once he had something meaningful to which he could attach that information, he was able to use that stored information about braille. The textures were very meaningful to Aidan, both

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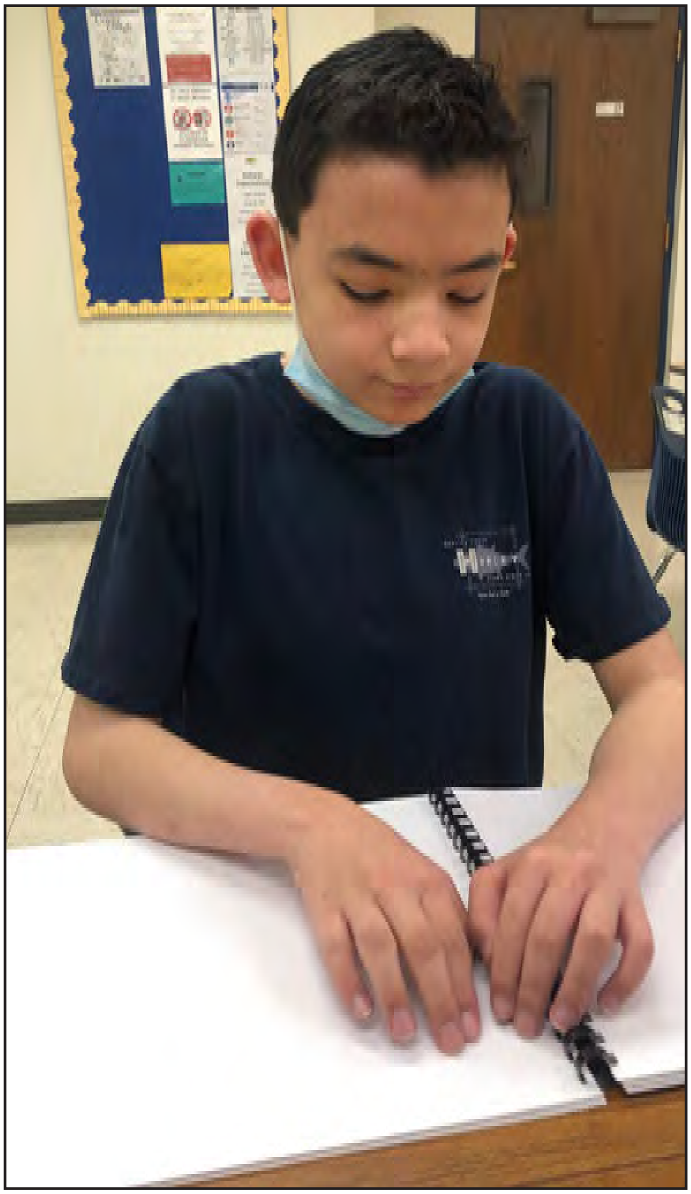
Aidan's Story–continued



Aidan now reads contracted Grade Two braille!

tactually and cognitively, allowing him to make the progress his team had wanted.

Aidan's success was the result not only of Sherry's dedication, perseverance and creativity, but also her understanding of what was important and meaningful to Aidan. She recognized the gap between his oral functioning and his tactile/sensory performance, and she felt that he could do more. She saw his potential learning ability and knew his strengths. She was also willing to "think outside the box" when traditional methods of instruction didn't work. She didn't give up. She created a program of instruction based on HIS individual strengths, interests, and needs. It worked! Sherry continues to teach Aidan to use his tactile skills in meaningful ways and provides him with experiences that make other abstract concepts meaningful as well.

We know that there are other students like Aidan—non-traditional tactile learners who have difficulty learning abstract representations like braille. Sherry and Aidan have taught us that there IS more than one way to learn and to teach, and that a creative approach can open a world of literacy to students who are non-traditional learners. We hope that Sherry's unique and innovative approach to braille instruction will help other students and their teachers discover their own path to literacy. *There is an alternate path to braille and literacy!*

> *"If a child can't learn the way we teach, maybe we should teach the way they learn."*

Ignacio Estrada ⬢

TSBVI In the New Year

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

Abstract: TSBVI's superintendent shares her message on changes that happened in education in 2020 and new directions for 2021.

Keywords: in-person learning, virtual learning, parent organization, Business Advisory Council, post-secondary opportunities, well-being, safety

Our community at TSBVI includes many students who historically don't adapt well to breaks in routine. We go out of our way to pre-teach any changes to their calendar and continuously remind them when something new is coming. As you can imagine, our ability to keep them prepared for the unexpected was severely challenged in 2020. Change is hard and we've all seen plenty lately.

Yet, our students have shown us time and again that they can handle these strangest of times. They can even thrive within the unknown. One of the silver linings of 2020 is that we've all had to stretch ourselves to reimagine education, which has empowered our students to reimagine learning.

We continue to offer our services to the 11,125 students identified as blind, visually impaired, or deafblind in Texas. Within our on-campus programs, we are providing hybrid instruction to accommodate in-person and virtual learning. Within Short-Term Programs, we're providing a menu of virtual options and planning forward to a time when in-person will be possible. Within Outreach, we're creating huge virtual events and bi-weekly professional development while also offering virtual consultations across the state. In Curriculum, we continue to publish new materials and provide training across the state and even across state lines.

My expectations for this school year have already been exceeded by our community. As we continue to re-create our typical programs, our teams are also building new avenues for student success. For example, 2021 is going to see a new parent organization in our midst, which has been needed for so long! We've formed a Business Advisory Council, which will ensure our students have access to employment and post-secondary opportunities. 2021 is also going to show an increased focus on accessibility, inclusion, diversity, equity, well-being, safety, and creativity that will expand student possibilities at TSBVI. We are raising the bar.

I am wishing our community and partners great things in 2021. As we march forward, let us not forget the resiliency we cultivated during 2020. We'll continue to empower students and ask you all to do the same. They, too, can embrace the unexpected. ⬢

Job Choice? A New Career Assessment May Ask Your Student the Right Questions and Help Them Discover Interests and Potential

Josephine Stouter, Psychological Associate, Vocational Diagnostic Unit, Texas Workforce Commission

Abstract: Career assessments can help students, families, and professionals in planning for the employment future of the student. Dr. Jo Stouter explains how Texas Workforce Commission's Vocational Diagnostic Unit provides career assessments that have been developed specifically for students who are blind and visually impaired. These assessments can also be completed virtually during a pandemic.

Keywords: career assessment, VR Transition Counselor, Comprehensive Vocational Evaluation System, CVES, aptitude, achievement, emotional functioning, personality type measures, occupational fields, student's values

What do you want to be when you grow up? This is a question we are often asked as children. We all know people who "just knew" from a very early age what they wanted to study and the career they wanted as adults. For these lucky few who always knew they wanted to be nurses, accountants or actors, that is super. Or sometimes early on, one develops an affinity or fascination—almost an obsession—with a single topic like drawing or trucks, and later develops that into a passion or life's work. Sometimes one's family background helps to answer the question. A family devotion to military service, health care, or even a family business can help a young student answer the question of what she wants to do in the future.

But for most students, who don't yet have a clear sense of a calling, passion or a mentor helping to answer questions about what they want to be when they grow up, the process happens over time as they navigate adulthood. Often it is a trial and error process, which can be costly in terms of time and resources.

For students with disabilities, it is the goal of Vocational Rehabilitation (VR) Transition Counselors and the team of professionals who assist them to identify and develop the potential in their students, and make sure that at every point along the way, they have the supports they need to be successful.

For students and young adults who are still discovering their interests and talents and finding their place in the world, a transition counselor's role is also to guide and mentor students and help them see in themselves the possibilities in their future.

Career Assessments are Key to Unlocking Success

The value in educational assessments is to help set goals, involve and empower students, and is a starting point to determining what success will look like for each student. The Comprehensive Vocational Evaluation System (CVES) is the only test battery designed and standardized for a person who is blind or has significant visual impairment. The CVES is a neuropsychological, psychological, or vocational service depending on the qualifications of the person administering and interpreting it. The CVES is only administered in person, which meant that during our current in-person restrictions, there was a need for students to receive a remote career assessment.

So, in the summer of 2020, a specialized service was developed to address the needs of some students who are customers of Texas Workforce Solutions-Vocational Rehabilitation Services. Developed by the Vocational Diagnostic Unit (VDU) within the Vocational Rehabilitation Division of TWC, it includes a group of licensed mental health professionals who specialize in assessment with individuals who are blind or visually impaired. The new Vocational Diagnostic Unit Career Assessment (VDUCA or 'Career Assessment') meets the need for a student career assessment and may be given either remotely via a video platform like Zoom or Teams or over the phone. Because the Career Assessment is a new service, TWS-VRS staff anticipate a process of improvement in it over time.

> *"The VDU Career Assessment began with the seed of customer feedback, and particularly from Transition students' cases. Vocational evaluation helps us take stock of abilities, aptitude and achievement. Career assessment empowers customers with insight on personality, passion, purpose fulfillment, and perception enhancement. These tools help students make better vocational choices while they are navigating adulthood, and ideally light the path to more enriching and stable employment,"* said VDU Developer and Evaluator Timothy White, PhD.

The Career Assessment service is specifically designed for students age 16 and older who are at least a junior in high school. Students should have at least a sixth-grade reading level due to the level of vocabulary included in the test measures. The Career Assessment is administered by a VDU evaluator and may take six-to-eight hours to complete, depending on the individual's pace.

Vocational Diagnostic Unit Career Assessment Process

One-on-one Interview

- The Career Assessment consists of several segments, all of which require the active involvement of the student. First, the student tells her or his own story to the evaluator through a structured, in-depth interview.
- Next, the student is asked several questions and does a few tasks to help the evaluator (and transition counselor) learn more about the stu-

(cont.)

Career Assessment–continued

dent. This includes a brief cognitive screening and measures related to personality, vocational interests and values.

Four specific topic areas are included in the assessment:

- **Emotional functioning and mental health screening** help the evaluator discern if the student may benefit from specific mental health services. This can be an especially important factor during the current pandemic, as coping with stress may be part of what a student is facing.
- **Personality type measures** include research on occupations often preferred by particular personality types. Soft skills, such as behavior, attitude, and social skills, are also a part of this factor. Behavior and attitude reflecting social skills and interpersonal relations can be developed with training and experiences to help a student become more successful as an employee.
- **Jobs or occupational fields** that are of interest to the student are also a part of the assessment. More than one measure is utilized for this step, and multiple options for career development are applied for comparison. Each measure is well-researched with peer-reviewed studies and literature.
- The **student's values** related to activities and employment are also examined and very specific questions are aimed at identifying preferences. For example, does the student like to be in charge or not? Does he actively prefer recognition or like to do his job without specific notice of others?

Once the Career Assessment interviews are complete, a comprehensive report provides the roadmap for students and transition counselors. The report includes recommendations for next steps for personal growth and development, gaining work experience, career resources, self-directed career exploration and more. Transition counselors, students, parents and the evaluator discuss the recommendations and how the process can inform an employment plan moving forward. Ideally, results and recommendations provide quality services that help the student reach their employment goal.

Parents or teachers may ask how a student can reliably answer these questions if they have little life experience. The VDU Career Assessment Evaluators understand that although a student's volunteer activities, work history, and life experiences may be limited, their imagination is not. The Career Assessment is designed to generate responses that are deeper motivational drivers which are more meaningful than simply filling out questionnaires. The goal of the career assessment process is to develop curiosity and to facilitate further exploration about potential careers. Eventually, new career and life experiences can ultimately lead to more-informed career decisions.

To learn more about Career Assessment or other services that the Vocational Diagnostic Unit provides, contact your student's Vocational Rehabilitation Services Transition Counselor. If your student does not have a transition counselor and you are interested in services, call 1-512-936-6400 or email VR.office.locator@twc.texas.gov. ⬢

TSBVI Short-Term Programs: Connections Despite Separation

Cheryl L. Austin, Short-Term Programs Teacher

Abstract: TSBVI's Short-Term Programs (STP) has adapted to remote learning just like other educational programs. This article describes how they creatively modified their existing classes and also developed new classes to meet the needs of students throughout Texas.

Keywords: Short-Term Programs, STP, COVID-19, pandemic, remote learning, Zoom, Google Classroom, social skills, access technology, self-determination

On March 11, 2020, TSBVI Short-Term Programs teachers gathered off-campus at an annual retreat to plan the calendar of classes for the 2020–2021 school year. Spring Break began two days later, and shortly thereafter, the landscape changed as the COVID-19 pandemic became a widespread reality. Faced with the need to accept and embrace a fully remote model, the group employed creativity and flexibility to modify existing classes and to also develop new offerings to meet student needs and foster meaningful connections across the State of Texas.

Here are a few of the innovative classes offered by Short-Term Programs during 2020–2021:

Fall and Spring Book Clubs (Grades 6–8)

Before COVID-19, STP Book Clubs were solely asynchronous classes. This year, the Book Clubs included a "live" component. In the Fall 2020 semester, students met online twice, once at the start of the class to review course expectations and for an introduction to the book chosen for the book study, *A Blind Guide to Stinkville* by Beth Vrabel. They met again at the end of the course for a "Question & Answer" session with the book's author. In the weeks between, students responded to discussion questions and polls within a Google Classroom and received feedback from the instructor. The Spring 2021 class is following a similar format and reading *A Blind Guide to Normal* by the same author. This time, however, there are more frequent Zoom meetings to discuss the book several chapters at a time, a request made by the students for even more significant interaction.

Focus on Low Vision Series (Grades 6–8, 9–12)

With the intent to serve students with low vision whose needs and interests might not be addressed in other programs, this afterschool series was created with a focus

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Short-Term Programs–continued

on access technology, self-determination, and social connections with like peers. Two groups, co-facilitated by three vision professionals who have low vision themselves, meet by Zoom monthly. The groups address high-interest topics within areas of the expanded core curriculum such as recreation and leisure, social interaction, and independent living skills, to name just a few. Approximately 20 students now participate regularly in the low vision series and have begun to develop a very supportive community.

STP students practiced cooking skills remotely during COVID-19.

Winter Social (Grades 1–12)

A total of 30 students joined together in Zoom on a Saturday in December 2020 to celebrate the winter season. Students were assigned to breakout rooms, arranged by grade and facilitated by instructional staff, and engaged in a variety of social skills and self-determination lessons and games. Activities included interactive icebreakers and conversation games, trivia, sensory (sound) experiences, and dance parties with songs requested in advance, all with the primary objective of creating social connections.

Writer’s Workshop Series (Grades 6–8)

The Writer's Workshop series provides students with instruction on the writing process, elements of writing, and peer editing and revision. The class focuses on fictional writing. Starting in February 2021, students met remotely once a month to review a highlighted topic and worked collaboratively to gather feedback on their writing. In between the live sessions, students had access to online content through a Google Classroom for lessons on writing, including character and setting development, writing effective story introductions, and descriptive language.

The common thread and inspiration for all of these classes can be summed up in one word: connection. While not the same as in-person experiences on TSBVI’s campus, what we have heard repeatedly is a desire for increased interaction. Since social opportunities are limited in most communities, a virtual connection has been an important tool for engagement. TSBVI Short-Term Programs quickly pivoted during COVID and adapted its regular mode of instructional delivery to successfully answer that call, serving more students in our great state in 2020-2021 than in a typical school year.

For more information on TSBVI’s Short-Term Programs (and an awesome video!), see https://www.tsbvi.edu/short-term-programs. ⬢

Summer College Prep Training

Is college in your child or student's future? Think about helping them prepare for this next step by attending the Texas Workforce Commission's Summer College Prep Training conducted by Criss Cole Rehabilitation Center (CCRC). This is CCRC's premier summer program for students ages 16–22 who are first time or returning college students. Although College Prep 2021 has yet to be planned and dates scheduled, rest assured the CCRC program administrators already have their wheels turning on how to be able to deliver the same quality program and results whether it is virtual, live or some combination of both.

Here are a few highlights of the program:

- Gain valuable college readiness tips & strategies
- Learn about financial aid services & the tuition waiver
- Take part in lectures with Texas State University professors
- Learn about accommodations and services
- Participate in seminars, field trips & classes
- Gain hands-on experiences with assistive technology
- Practice organization/time management, note taking & study strategies
- Improve O&M skills related to navigating a college campus
- Recreational activities designed to cultivate good social habits, fitness & nutrition

Dates: June 2021 – exact dates are yet to be determined

Virtual or Live @ Texas State University in San Marcos, TX – TBD

To be accepted to CCRC's Summer College Prep, your student must meet the following requirements:

- Legally blind or visually impaired (eye report must be submitted)
- Ages 16–22
- Must be in good academic standing
- Performing at or above grade level with a goal of attending college
- CCRC referral for training program (submitted by TWC Vocational Rehabilitation Counselor)
- General physical required
- Must possess a valid state issued ID

As we move into the New Year and determine how we will navigate and prepare the program with the health and safety of our customers in mind, we will be sure to provide the most up-to-date information to your child/student's TWC VR Counselors and will continue to post about the program on our CCRC Facebook page https://www.facebook.com/crisscolerehabilitationcenter/. Additionally, if you have any questions about college prep, please feel free to contact Marlo Mrak, CCRC Admissions Recruiter at marlo.mrak@twc.state.tx.us or 512-377-0549. ⬢

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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

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