CONSULTANTS'

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R FALL 2009

Volume 12 Issue 1

Editor: Riki Nitz



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SD School for the Blind and Visually Impaired

If and that this thing
must be attained."

Maríe Curíe

CALENDAR OF EVENTS

Aberdeen Area Family Support Group September 29, 2009

APH Annual Meeting October 14-18, 2009—Louisville KY

National White Cane Day October 15, 2009

SD Special Education Conference March 14-16, 2010—Pierre SD

AER Dakotas Chapter Conference April 8-9, 2010—Aberdeen SD

INCIDENTAL LEARNING...OR "LEARNING OUTSIDE OF THE BOX" WHAT IS A POTATO???

Incidental learning is learning that takes place without any intent to learn. The participant is not aware that he or she is learning. It has no curriculum and is not professionally organized, but rather originates accidentally or sporadically in association with specific occasions.

This method of learning is very difficult for children who are blind or visually impaired. Therefore, these children need to be taught about their environment through hands-on learning experiences. For example, a child may be aware of a "potato," but does she know that the potato first had to be planted from a potato "eye" and then dug up out of the ground? And does the child realize how many different ways potatoes can be prepared as a food, such as French fries, baked potatoes, mashed potatoes, potato chips, hash browns, potato salad, potato soup, etc.

Additional potato activities:

- Feel a potato-meat, skin, eyes
- Scrub a potato
- Peel a potato
- Mash a potato
- Make potato prints or stamps

Books about potatoes:

- Brave Potatoes by Toby Speed and Barry Root
- Mr. Potato Head Book Series (mrpotatohead.net)
- One Potato by Sue Porter

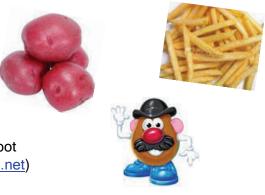
And what about eggs, apples, tomatoes, grapes? The list goes on and on!

Be creative in teaching and provide opportunities to expand your child's knowledge of the world.

Common Misconceptions About Vision

- Glasses do not always help to correct limited vision. Some kinds of eye disorders are not correctable with glasses, and sometimes visual impairments are not completely correctable. The glasses help, but do not correct to normal vision.
- Holding a book close to the eyes will not harm the eyes. In young children, bringing materials closer sometimes makes it larger and easier to see. Allow children to hold materials at whatever distance is comfortable for them.
- Sight cannot be "saved" or "conserved." Unless there is some special reason (usually medical), it is safe to encourage a child to use whatever vision is present.
- Dim light will not harm children's eyes; adequate lighting makes vision more comfortable. Some visually impaired children will need more light than others; some visually impaired children will see best under minimal lighting conditions. Adequacy of lighting will vary by child, task, and environment.
- Lack of vision in one eye does not reduce vision by 50%. It will result in a loss of depth perception and, in some cases, the ability to judge distances. It does not make vision less clear in the better eye, unless there is a defect in that eye as well.

http://www.tsbvi.edu/Education/preschool.htm



TOP 10 REQUESTS FROM A YOUNG CHILD WHO IS VISUALLY IMPAIRED

PLEASE ...

- 1. Tell me your name and use my name each time you speak with me. Then I will know for sure who you are and who you are talking to.
- 2. Tell me before you touch me, make a loud sound, or walk away from me. That way I won't startle or worry about where you are.
- 3. Explain things to me, using physical demonstrations and/or short, clear descriptions. Remember that I may not be able to see you point or gesture.
- 4. Refrain from controlling or manipulating my hands. If physical guidance is necessary to show me something, please place your hands under mine or quide me from under my upper arms/elbows instead of grasping my hands.
- 5. Let me hold your fingers or wrist when we are walking together. It is much more comfortable to me if I am holding your fingers rather than having you holding my hand and pulling me along.
- 6. Help me to use ALL of my senses, including hearing, touch, smell, taste, and any vision that I have. Keep in mind that most people who are visually impaired have some useable vision.
- 7. Show me how to do things for myself as much as possible, by doing things with me, not for me. I can only learn new things by experiencing them myself, not by watching you do them.
- When handing me something that I cannot see, make a sound with the object and/or gently touch the back of 8. my hand with the object as you tell me what you are doing. Give me plenty of time to think it through!
- 9. Reduce clutter and set boundaries in my play space. I can then see things more easily and objects won't fall or roll away from me.
- 10. Give me lots of hugs and pats. I may not see your loving eyes and smile.

Kay Clarke, Ph.D.

☆

☆ ☆

"One of the secrets of life is to make stepping stones out of stumbling blocks."

Jack Penn

CONGRATULATIONS TO ... ☆

☆ JULIE VAN DOVER ☆

Julie, Eastern Outreach Vision Consultant, has been selected as an American Printing House for the Blind (APH) Scholar for 2009. She will be attending the APH Annual Meeting October 14-17, 2009 in Louisville, ☆ KY. Julie has been a faculty member of SDSBVI for 13 years and has a teaching degree in elementary and ★ special education, an endorsement in visual impairments, and national certification as a Low Vision Thera-着 pist.

AMY SCEPANIAK

 $\stackrel{\land}{\land} \stackrel{\land}{\land} \stackrel{\land}{\:} \stackrel{\:}{\:} \stackrel{}{\:} \stackrel{\:}{\:} \stackrel{\;}{\:} \stackrel{\;}{\;} \stackrel{\;}$ Amy, North Central Outreach Vision Consultant, was honored at the end of the 2008-2009 school year for 15 continuous years of service with SDSBVI serving children who are blind and visually impaired. ☆

RIKI NITZ

Riki, Western Outreach Vision Consultant, was honored at the end of the 2008-2009 school year for 20 con-* tinuous years of service with SDSBVI serving children who are blind and visually impaired.

DR. MARJE KAISER

Marje, SDSBVI Superintendent, was selected as the recipient of the Council of Schools for the Blind (COSB) 2009 Bill English Leadership Award. This prestigious award will be presented to her at the annual * COSB banquet in Louisville, KY, on October 14, 2009 during the APH Annual Meeting. This award is in 🕈 recognition of outstanding contributions, leadership, and service to the field and to students who are blind or 🆄 $\frac{2}{4}$ visually impaired.

Marje has also recently been recognized for receiving both the Lions International Presidential Medal and 🖌 the Gus Zachte Memorial Award of the SD Association of the Blind. She was congratulated for her amazing 🖟 accomplishments and dedication to improving opportunities for people who are blind and visually impaired. ******

ABERDEEN AREA FAMILY SUPPORT GROUP



Dinner in the Dark-an adventure to experience first-hand the world in

which the blind and visually impaired live—was held in June in the SDSBVI gym. While <u>under</u> <u>blindfold</u>, guests enjoyed a three-course meal, prepared and served by SD NAPVI and Aberdeen Lioness Club members. A silent auction was held and wonderful door prizes were given away. All proceeds went to support the South Dakota Chapter of the National Association for Parents of Children with Visual Impairments (SD



NAPVI). The group is already starting to plan the next **Dinner in the Dark** to be held next spring. Keep this in mind as all are welcome to attend.

In July, Lela Holcomb, a teacher at the SDSBVI, shared information about Transition.



Ryker

And in August, the group met at the Aberdeen Aquatics Center for the 3rd annual evening of swimming, pizza, and connecting with other families.



Vincent

September 29th will be our next meeting with Parent Connection representative, Sandy Ellenbolt, presenting on **Rights**, **Responsibilities & Resources**. Parents (and those who work with their children) need information about the rights and responsibilities built into special education laws. This workshop provides information about the procedural safeguards in special education laws, parent and school responsibilities for implementation, and resources to assist in helping children with disabilities succeed. A light supper will be provided by Parent Connection. The meeting will be held at the SDSBVI at 6:00 pm Tuesday, September 29th. Please contact Amy Scepaniak to register.

For more information about the Aberdeen Area Family Support Group, contact Amy Scepaniak at 626-2580 or toll free at 888-275-3814 or email her at scepania@sdsbvi.northern.edu.

SIOUX FALLS AREA FAMILY SUPPORT GROUP

For information regarding upcoming meetings for the Sioux Falls Area Family Support Group, contact either Indira Dillon at 605-995-8191 (email: <u>indira.dillon@sdsbvi.northern.edu</u>) or Julie Van Dover at 605-626-2580 (email: <u>vandovej@sdsbvi.northern.edu</u>).

SD NAPVI

SD NAPVI, a newly formed Chapter of NAPVI, was organized with funds from a mini-grant from the SD Foundation for the Blind and Visually Impaired. Anyone can join the SD Chapter by simply becoming a member of NAPVI. The cost to become a member of NAPVI is \$40. The Foundation has agreed to "match" any interested parent by paying half of their membership for the first year. For more information about joining, contact an officer.

SD NAPVI BOARD MEMBERS:

Co-Presidents:	Karla Schlosser, 1424 N Arch, Aberdeen SD 57401, 605-225-5482, <u>dschlossr@msn.com</u>
	Elaine Fritz, 500 Kyle Ave, Baltic SD 57003, 605-529-6052, <u>efritz@siouxfalls.org</u>
Co-Vice Presidents:	Kelli Meister, 1228 Thomas Dr, Aberdeen SD 57401, 605-225-3432, rkmeister@nvc.net
	Krystal Stuwe, 202 4th Ave, Ipswich SD 57451, 605-426-6224, Ikstuwe@valleytel.net
Secretary:	Joleen Schaffer, 1803 S Lincoln St, Aberdeen SD 57401, 605-380-3332, vortwork@yahoo.com
Treasurer:	Rhiannon Zahm, 36755 162nd St, Cresbard SD 57435, 605-380-9375

STUDENT CORNER

We welcome any and all special presentations, awards, writings, etc. achieved by our outreach students. If your student/ child has such a contribution and would like to be featured in our Student Corner, please contact your area Outreach Vision Consultant or email the contribution directly to Riki Nitz, Editor, at: <u>riki.nitz@sdsbvi.northern.edu</u>.

The best policy is to calmly take life as it comes, and to make the best use of the gifts it brings.

LIGHT BOX ACTIVITIES

APH Light Boxes have a lighted translucent white work surface, providing a high contrast background for opaque materials and a source of illumination for colored transparent and translucent items. With the use of unique sets of materials from APH, as well as many everyday items, they help develop awareness of light, color, and objects and assist in the instruction of tracking, scanning, eye-hand coordination, visual discrimination, and visual perceptual skills.

- ✦ Scatter small candies (M&Ms, Skittles, etc.) on the surface
- Scatter cereal (Cheerios, Fruit Loops, etc.) on the surface
- Scatter small or large crackers on the surface
- Place Jell-O or juice in a clear cup or bottle and see it glow
- "Set a table" by having your child match plate, cup, and spoon with a transparent outline of these items on the Light Box
- + Use colorful see-through bowls and cups and work on feeding with see-through spoons and forks
- Set plate with slice of bread and a jar of light-colored jelly on the Light Box; help your child shift gaze from bread to jelly jar
- + Help your child mix Kool-Aid into a clear glass of water and watch the color develop
- + Put sock and shoe on the Light Box and have your child point to item needed next
- + Put wash cloth and toothbrush on the Light Box and ask your child to choose which he/she wants to do first
- + Show your child transparency symbols of daily living activities (computer, library, doctor, store, etc.)
- Start or stop the APH "Spinner" to motivate reaching
- Wrap one end of a Slinky to your child's wrist and connect the other end to the Light Box handle, letting it
 hang over the lighted surface, to encourage arm movement
- Stack up blocks and knock them down
- ✤ Put a Koosh ball on the Light Box
- Put a vibrating pillow with an attached pressure switch on the Light Box and position your child so that slight
 pressure will make the pillow vibrate
- ✦ Have your child use an adaptive switch to turn the Light Box off and on
- ✤ Position small infants in a prone position on the Light Box for tummy time
- + Support a small child in a 90 degree sitting position on the Light Box to crinkle Mylar paper under their feet
- ✦ Have your child look to choose one of two items on the Light Box
- Set a basket or bin on the Light Box and encourage your child to bend over or kneel down to put objects in and take objects out

ASK YOUR CHILD WHAT HE/SHE WANTS TO DO ON THE LIGHT BOX!



APH Materials—Recreation and Leisure

http://www.aph.org

SQUID Tactile Activities Magazine

SQUID Magazine is intended to be deceptively fun—that is, while your child or student enjoys a variety of activities, he or she will build and acquire skills needed to become a more proficient tactile reader. These puzzles, games, and brainteasers promote the following areas:

- Texture discrimination
- Systematic searching skills
- Shape identification
- Tracking various line paths
- Pattern building and recognition
- Spatial concepts
- Understanding of symbols

Another important goal of SQUID is to familiarize young tactile readers with a variety of tactile modes including thermoformed graphics, embossed paper, and thermography. Each issue of SQUID will provide 25 activities such as:

- Tactile mazes
- Pattern-completing puzzles
- Counting/math tasks
- Coloring pages
- Connect-the-dots
- Word searches
- Word play
- Brainteasers
- Break the code
- Interactive games

Most of the tactile puzzles, games, and activities included with each SQUID issue are reusable and are intended to grow with the child or student as they acquire new skills and tactile understanding. Activities that are fun today from a 5-year-old's viewpoint may be appreciated and enjoyed differently by the same child years later.

SQUID issues are published biannually—Summer and Winter.

Recommended Ages: 5 years and up

These products are available from the American Printing House for the Blind (APH) for purchase and can also be borrowed from your area Outreach Vision Consultant. For more information on these products or other APH products, please contact your area Outreach Vision Consultant.

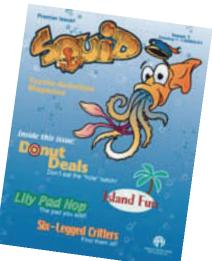


Ohio State School for the Blind Band in 2010 TOURNAMENT OF ROSES PARADE!

The Ohio State School for the Blind, the **ONLY BLIND** marching band in the nation, possibly the world, applied and their application was accepted to march in the 2010 Tournament of Roses Parade on January 1, 2010.

Co-Directors of the OSSB Band are Dan Kelley and Carol Agler. The band became a marching band in 2005 when the Ohio School for the Deaf revived its football program after a 30+ year hiatus. There are currently 35 members in the band and about as many sighted marching assistants.

A video of the 2008-2009 17-member band performance at Ohio State University can be viewed at the following website: <u>http://ossb.sh.gov/CurrentNews.html.</u>





BOOKSHARE

Does your student/child with print disabilities have timely access to textbooks? Wouldn't it be great if they could study independently and keep up with their classmates?

Bookshare can help your student/child gain access to a growing online library of over 50,000 digital books, including hundreds of textbooks! It's easy to use and FREE for qualified U.S. students, thanks to an award from the U.S. Office of Special Education Programs.

Sign up now and get your student/child the books they need to succeed www.bookshare.org.

BOOKS OF INTEREST

In Celebration of Grandparenting: For Grandparents of Children with Visual Impairments

by Debra K. Chapuis

This book helps grandparents of children with visual impairments or blindness better understand how they can engage constructively in direct and indirect support of their loved ones dealing with visual impairment.

Available from the National Association for Parents of Children with Visual Impairments (NAPVI) at <u>www.napvi.org</u>.

Price: Member \$15.00; Non-Member \$18.00

Drawing with your Perkins Brailler®

An Activity Guide to Creating Tactile Drawings

Written by Perkins Braille & Talking Book Library Director, Kim Charlson, this book contains step-by-step directions for creating 36 different drawings ranging from basic to highly intricate. Drawings include shapes, various animals, and pictures with holiday and transportation themes. Actual braille pictures are included to show what the drawings will look and feel like when completed.

"Creativity and individual personal style are so often expressed, particularly by children, through art and drawing. The creation of tactile pictures can be an excellent method of developing drawing and other artistic skills for children who are blind or visually impaired." Kim Charlson

Price: \$24.95 (print or braille) Print edition: 84 pages—14 point type Braille edition: 158 pages—one volume Available online at <u>www.perkins.org</u>

Books Featuring Characters with Blindness and Visual Impairment

Lucy's Picture by Nicola Moon

Lucy creates a special picture for her grandfather who is blind. Preschool—Grade 2

Through Grandpa's Eyes by Patricia MacLachlan

A young boy learns a different way of seeing from his grandfather who is blind. Grades K-2



The Doll on the Top Shelf by Ruth Turk

Annie Mae, a doll who is not as new or pretty as the others still hopes that on Christmas Eve someone will come to take her home. When Natalie, who is blind, and her grandmother walk through the front door, Annie Mae's Christmas starts to look very different. Grades K-2

Mandy Sue Day by Roberta Karim

A young girl who is blind spends her special day with her horse and together they drink in the sounds, smells, and feel of an autumn day. Grades K-3



FOCUS ON THE EYE

CORTICAL VISUAL IMPAIRMENT (CVI)

DEFINITION:

Cortical Visual Impairment is (CVI) is a neurological visual disorder. It is the fastest growing visual impairment diagnosis today.

- Cortical Visual Impairment, or CVI, is a functional disorder in the visual cortex and/or the posterior visual pathways leading to the brain due to damage to these visual systems in the brain.
- The visual systems in the brain do not consistently understand or interpret what the eyes see, resulting in a loss of vision in normal-appearing eyes.
- CVI is not an ocular visual loss, or eye disorder. The eye itself is normal and a routine clinical eye exam and acuities will be within normal limits with no evidence of any ocular pathology. However, it may coexist with an ocular vision loss, such as optic atrophy or optic nerve hypoplasia.
- It is a brain, or neurological, disorder. The part of the brain that is responsible for processing and integrating visual information is damaged.

Definition for Medical Purposes:

Cortical Visual Impairment is bilaterally decreased visual acuity caused by damage to the occipital lobes and/or to the geniculostriate visual pathway. CVI is almost invariably associated with an inefficient, disturbed visual sense because of the widespread brain disturbance.

Definition for Educational Purposes:

Cortical Visual Impairment is a neurological disorder, which results in unique visual responses to people, educational materials, and to the environment. When children/students with these visual/behavioral characteristics are shown to have loss of acuity or determined by their performance to be visually impaired, they are considered to have CVI.

MYTHS:

- Children with CVI are visually inattentive and poorly motivated.
- All children with CVI will have cognitive deficits.
- CVI is not a true visual impairment.
- Children with CVI are totally blind.
- Children whose visual cortex is damaged are Cortically Blind.

DIAGNOSIS:

CVI is a difficult diagnosis to make. It is diagnosed when a child has poor or no visual response and yet has a normal eye examination. The basis for diagnosis is an MRI (Magnetic Resonance Imaging) in combination with a Functional Vision Evaluation.

MAJOR CAUSES:

- Asphyxia
- Perinatal Hypoxia Ischemia

(Hypoxia—lack of sufficient oxygen in the body cells or blood; Ischemia—not enough blood supply to the brain)

- Developmental Birth Defects
- Hydrocephalus
- Head Injury
- Infection—Meningitis / Encephalitis / Cytomegalovirus (CMV) / Periventricular Leukomalacia (PVL)

CHARACTERISTICS OF CVI:

- Children with CVI are complex.
- Not all children with CVI will exhibit all the characteristics, nor will they all exhibit the same characteristics.
- CVI can range from a mild loss to a severe loss to total blindness.
- CVI can be temporary or permanent.
- Eyes appear normal children with CVI generally do not look blind.
- Eye movements are smooth, but often aimless lack of fixation / lack of visual tracking.
- Eye contact is poor.
- Visual threat response is lacking.
- Blink response is lacking.
- Nystagmus (rapid eye movement) is absent, unless there is a coexisting congenital ocular disorder.
- CVI often coexists with an ocular vision loss, making diagnosis of CVI more difficult.
- Blank facial expressions are common.
- Many children with CVI experience improvements in their vision, especially with early intervention.
- Fluctuating vision is common from day to day; hour to hour; minute to minute. A child with CVI may be able to see an object one day, but not the next, or be able to see one object but not another. These fluctuating changes in vision often make it frustrating and difficult to determine if a child's behavior is due to motivation or attention or if it is neurological. As a result, children with CVI are often thought to be lazy, malingering, easily distracted, or inattentive.
- Peripheral (side) vision is often better than central vision. Often children with CVI will look at objects out of the side of their eye or will turn their head to the side when reaching for an object.
- Vision may be better when either the child or the object is moving.
- Color vision is usually normal, though red and yellow seem to be more easily perceived.
- Some children with CVI are photophobic (abnormal sensitivity to light), but more are light-gazers (compulsive staring into lights for longer than 15 seconds).
- Spatial confusion is common; for example, being unable to locate a chair even though it is seen.
- Children with CVI are able to avoid obstacles and navigate within their environment, but are unable to use their vision for near tasks.
- Children with CVI are aware of objects in the distance, but are not able to identify them.
- Children with CVI have difficulty with depth perception, often demonstrated by inaccurately reaching for an object.
- Children with CVI have difficulty with figure-ground differentiating between background and foreground visual information in a picture.
- Children with CVI have difficulty with crowding or clutter in pictures; for example, a picture with 5 objects versus 2 objects.
- Visual learning is fatiguing.
- Children with CVI are visually inattentive.
- Children with CVI exhibit a short visual attention span. They look at objects only momentarily and see little.
- Visual curiosity is lacking. A child with CVI does not want to look at objects, will avoid looking at objects, will listen rather than look, and will often turn away from people and events.
- Children with CVI may close their eyes while listening or when visually moving from one object to another. Sometimes they will close one eye so they can better see objects/people.
- Children with CVI prefer to use their sense of touch.
- Children with CVI will turn their head away as they tactually explore an object with their hands.
- Children with CVI will look at an object momentarily and then turn away when they reach for it. They may be using their peripheral vision when turning away in order to pick up the object. Or, they may be turning away until they understand what their hands are doing or what they are seeing.
- Close viewing of an object is common in order to magnify the object and/or to reduce crowding or clutter.
- Children with CVI are often attracted to bright, shiny, reflective, moving objects.
- Children with CVI tend to ignore black and white pictures/objects.

(Continued on Page 10)

TEACHING STRATEGIES AND INTERVENTIONS FOR CHILDREN WITH CVI:

- Provide materials, such as pictures, that are simple with minimal clutter or crowding.
- Provide high contrast in materials; for example, placing a yellow object on a dark background or an object/picture on a plain background.
- Present objects one at a time.
- Provide space or distance between objects to avoid crowding.
- Present objects in motion, such as motion toys. Children with CVI seem to more easily see objects when they are moving.
- Use color. Bright, fluorescent, reflective colors, such as yellow and red, and colored Mylar materials seem to be easier to see and generate visual response.
- Good lighting is important. Try different lighting situations to determine what gives the best conditions for visual tasks. Be aware of glare.
- Use a light box to illuminate objects and help the child focus on the objects.
- Use illuminated toys or sparkling light sources.
- Be aware of refractive errors and field losses.
- Try different visual fields to determine where the child's best viewing may be.
- Allow lots of time for the child to respond to the presented materials. A child with CVI requires much more time to find and to look at objects. Wait! And then wait some more.
- Use familiar objects to avoid confusion. For example, if the child uses a yellow bowl at home, indicating it is time to eat, use a yellow bowl at school.
- Use real objects rather than abstract symbols, such as an orange versus a circle.
- Use a multi-sensory approach when presenting objects by providing verbal and tactile cuing about what to look for and where to look – pairing touch with vision or sound with vision. However, it is important that the auditory or tactual information does not shut off the visual information. Many children with CVI are unable to attend to both an auditory or tactual modality simultaneously with their vision modality. Allow them to look first and reinforce looking with verbal and touch clues and information.
- Activities need to have a clear beginning and a clear ending.
- Teach systematically whole concepts first, then parts.
- Repetition and routine is important. If changes are necessary, make them slowly and allow time to adapt.
- Visual learning is very fatiguing for children with CVI. Provide instruction in small increments of time, keeping activities short. Allow for breaks.
- Positioning is important. Accommodate all other disabilities first so that the child's available energy is focused on the visual task. Using energy to see should be the only task of the child.
- Provide head support if needed so the child's visual field does not change.
- Allow children with CVI to turn their heads when looking at an object or to move closer to the object.
- Reduce environmental noise, visual clutter, and other outside sensory information. Such stimulation can be distracting and confusing.
- Keep the environment familiar and consistent.
- Be consistent in all learning environments, including materials, language, color, and methods.
- Learn to interpret subtle responses shifts in gaze, closing eyes, blinking, shifts in body position, changes in breathing patterns, etc.
- Outline and color-code numbers / letters / pictures.
- If applicable, enlarge print, increase space within and between words, and skip lines on pages.
- Be aware that visual learning may be very slow. Patience!
- Be creative.
- Re-assess and re-evaluate regularly.



CHARACTERISTIC DIFFERENCES BETWEEN PURE OCULAR DISORDERS AND CORTICAL VISUAL DISORDERS:

CHARACTERISTIC	OCULAR	CORTICAL
Eye Examination	Usually Abnormal	Normal
Visual Function	Consistent	Highly Variable
Visual Attention Span	Usually Normal	Markedly Short
Sensory Nystagmus	Present when Congenital and Early Onset	Not Present
Poorly Coordinated Eye Movements	Present when Congenital and Early Onset	Usually Normal
Rapid Horizontal Head Shaking	Occasionally	Never
Compulsive Light Gazing	Rarely	Common
Light Sensitivity	Dependent on the Eye Disorder	In a Third of the Cases
Eye Pressing	Especially in Congenital Retinal Disorders	Never
Close Viewing	Common; Used for Magnification	Common; Used for Magnification, a Reduction in Crowding, or Both
Color Perception	Dependent on the Eye Disorder	Preserved
Appearance	Appears Visually Impaired	Usually Appears Normal
Peripheral Field Loss	Occasionally	Nearly Always
Presence of Neurological Disorders	Fairly Common	Nearly Always

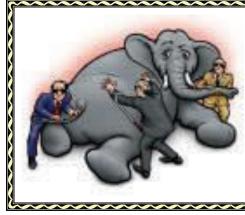
"Vision is more than 20/20 eyesight. Vision is the ability to get MEANING from eyesight."

The Crux of Cortical Visual Impairment:

- \checkmark Eyesight is intact and present.
- ✓ Meaning is missing.

SOURCES:

www.tsbvi.org / www.aph.org / www.blindbabies.org / www.sesa.org / www.blindchildrensfund.org



An Analogy to Ponder...

There are four blind men who discover an elephant. Since the men have never encountered an elephant, they grope about, seeking to understand and describe this new phenomenon. One grasps the trunk and concludes it is a snake. Another explores one of the elephant's legs and describes it as a tree. A third finds the elephant's tail and announces that it is a rope. And the fourth blind man, after discovering the elephant's side, concludes that it is, after all, a wall.



SD School for the Blind and Visually Impaired

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PLEASE SHARE THIS NEWSLETTER WITH STAFF AND FAMILY AND FRIENDS

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CONSULTANTS' CORNER, Fall 2009, Volume 12, Issue 1, edited by Riki Nitz. Published 3 times during the school year by the SD School for the Blind and Visually Impaired, 423 17th Ave SE, Aberdeen, SD 57401. Printed by the SDSBVI at a cost of 30 cents per issue.