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ABSTRACT

The proceedings are composed of nine papers that discuss different aspects of the rehabilitation teacher of the blind in his effort to teach the newly blinded homemaker. The introductory paper explains briefly the way in which different sources work together toward rehabilitating the blind homemaker. The following three papers then discuss, in turn, the future vocational opportunities for the blind, the relationship of the rehabilitation teacher and the home economist, and the rehabilitation teacher and future services to the blind. Then follow subject matter outlines for teaching food preparation, home management, meal planning, food buying and storage, textiles, clothing, and grooming. A copy of the institute program and schedule is included, with a short description of three films shown at the institute film theater. Then listed and clarified are 14 needs and rights of the newly blinded homemaker concerning topics such as emotional treatment, rehabilitation program, community resources, family role, help from sighted persons, individuality, personal needs, free time, security, and recognition for success. The final paper focuses on Illinois' experience with the extension home economist. Appended are seven papers related to the institute. (CB)

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PROCEEDINGS
of
TRAINING INSTITUTE FOR REHABILITATION TEACHERS OF THE BLIND
TEACHING THE NEWLY BLINDED HOMEMAKER

Prepared by

University of Nebraska
College of Home Economics

In Cooperation with

REHABILITATION SERVICES ADMINISTRATION
U. S. Department of Health, Education and Welfare

August 1970

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PROCEEDINGS
of
TRAINING INSTITUTE FOR REHABILITATION TEACHERS OF THE BLIND
TEACHING THE NEWLY BLINDED HOMEMAKER

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In Cooperation with

REHABILITATION SERVICES ADMINISTRATION
U. S. Department of Health, Education and Welfare

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WORKING TOGETHER TOWARD OUR GOALS

The Institute for Rehabilitation Teachers of the Newly Blinded Homemaker is but a step in an ongoing program started in December 1966 when persons interested in the homemaking achievements of the blind person, such as Mr. George Magers, Ruth Kaarlela, Dr. June Bricker, Robert LaDuke, Mrs. Sammie Rankin, I. N. Miller, Margaret Oliver, and many others met at Western Michigan University to explore new cooperative programs. In August 1968, the first Training Institute for Rehabilitation Teachers of the Newly Blind Homemaker was held at the University of Maryland with the assistance of a grant from the Social and Rehabilitation Service of the U. S. Department of Health, Education and Welfare. There, as in our forthcoming program, team teaching with the blind rehabilitation teacher and the sighted home economist set forth not only techniques and procedures suited for the blind homemaker but also gave the opportunity for learning and updating in four areas of subject-matter in home economics.

The extension home economist is included in the Institute because extension is an out-of-school, voluntary informal educational program for the homemaker, and the professionals of other agencies who work with families in other ways. The program is geared to the needs of contemporary living with emphasis on consumer education, management, food and nutrition, human development, and family economics. Extension cooperates with other agencies, such as health, welfare, and others, in working with families disadvantaged by economic, social, physical, and mental handicaps, and in the training of the professionals and program aides who work with these families. Extension is a local program with directed activities and personnel; a county agent in agriculture and the county agent in home economics are found in most of the 3,000 counties. These local extension programs have many features, may I mention a few:

- 1) Use of volunteer leaders to help carry new knowledge to other adults;
- 2) Giving homemakers new ideas for better meals, teaching them about nutrition for young and old, planning, buying, and preparing food;
- 3) Teaching homemakers to make efficient use of time, energy, and money, for better living for all the family;
- 4) Teaching methods for applying judgment and technical proficiency to such areas as floor care, laundry methods, clothing construction, and work simplification -- all basic to effective living in today's homes; and
- 5) Teaching parents more about the developmental tasks of children, family relationships at different stages in the life cycle, and community resources available to help them.

On the other hand, the Services for the Blind, through a state-federal program, seeks to help individuals (as found eligible) through medical, training, and adjustment services.

Talk given by Dr. Lois O. Schwab, Associate Professor, Family Economics and Management Department, College of Home Economics, University of Nebraska, July 13th, 1970.

Both rehabilitation teacher and home economist in extension are working to improve the lives of individuals in the home. The following days are planned so that you may become better acquainted with each other -- not only as individuals but as representatives each of one of the helping professions -- interested in working together in giving to persons a better, richer way of living.

WHAT'S AHEAD FOR THE BLIND

This is the 50th Anniversary of the State-Federal Vocational Rehabilitation Program. It is significant to note that the national rehabilitation to symbolize our 50th Anniversary is a blind paraplegic. A former engineer in the Marines, an explosive accident with lighter fluid left him paralyzed from the waist down and blind. After extensive hospitalization, he found that he needed to do something about his life. Physical therapy, services from a rehabilitation teacher, vocational rehabilitation counseling, and instruction in the computer sciences have equipped him for a rich life including the satisfaction of gainful employment.

Last year, 7,500 blind persons were rehabilitated. They include the following estimates in broad, general occupational categories:

2,000 - rehabilitated as homemakers or other family workers

1,000 - rehabilitated as professional men and women in jobs ranging across the board (Presently, rehabilitation services are supporting 2,500 blind persons in the institutions of higher education across the United States in such representative areas as chemistry, physics, linguistics, law, and home economics. These individuals have prospect for excellent jobs in the future).

1,000 - rehabilitated in clerical positions

1,500 - rehabilitated in service occupations ranging from the unskilled to the technical

2,000 - rehabilitated in industry, that is, they are hired by manufacturers of products or in sheltered workshops

But this is just a part of the story, the new careers program is bringing new opportunities to the blind. The blind are being placed in new careers, for example:

1. Teaching This profession is no longer closed to the blind. More than 344 individuals are teaching sighted children at the elementary and secondary school levels. Last year at least 50 blind persons received new teaching contracts.
2. Computer Sciences Today more than 400 persons are employed in this growing technical field with another 100 persons in training.
3. Service Representative Field This newly developing career or occupational field is already paying significant dividends for trained and qualified blind persons.

Talk given by George A. Magers, Assistant Chief of Division for the Blind and Visually Handicapped, Rehabilitation Services Administration, at Training Institute for Rehabilitation Teachers of the Blind, University of Nebraska, July 12, 1970.

Already, 40 trained taxpayer service representatives are employed with the Internal Revenue Service. That agency intends to at least double that number in the next two years.

More service representatives jobs are being opened; the Social Security Administration is looking at their service representative positions. Private business as represented by the airlines, telephone companies, and hospitals are opening new positions in this field.

The State-Federal vocational rehabilitation agencies are continuing to explore and open new training and employment opportunities for blind and visually handicapped individuals.

As I mentioned earlier, approximately 2,000 blind homemakers and other family workers were rehabilitated last fiscal year. As you can easily note, this is a sizeable group of rehabilitants, and it is the deep concern of the Rehabilitation Services Administration that vocational rehabilitation services to newly-blinded homemakers be continually strengthened. It is through training programs such as you are initiating here tonight that we hope to find better and more effective delivery systems for serving this group of disabled Americans.

THE REHABILITATION TEACHER AND THE HOMEMAKER

First, I want to say how glad I am to be here. This is the second Training Institute for Rehabilitation Teachers of the Blind--the first having been held at the University of Maryland almost two years ago. We should all feel most grateful for this opportunity to further develop depth and outreach to our services.

There are five points to which I would like to speak this morning. One has to do with the effects of blindness and the other four with the relationship between the Rehabilitation Teacher and the Home Economist.

I. Functional effects of blindness

It is important that we, who are involved in helping people who become blind or who are blind, be aware of the consequences of blindness. Blindness may limit, distort, or eliminate sight. There may be discomfort, fluctuation of sight, cosmetic effects, and/or related physical conditions. With respect to function, blindness interferes with the perception of a variety of external stimuli. These may be organized as follows:

1. Form. Perception of form is essential for purposes of identifying objects, persons and other animate beings. Form is the base of written communication. Form is an integral aspect of interpreting likenesses and reproductions. Blindness requires the development of other than visual informational intake for perception of form.
2. Space. Space is related to distance and size. Blindness interferes with the perception of distance and size, and adaptations must be made to help the blind person in this respect.
3. Movement. Not only does sight ascertain that movement is taking place--but also the direction, and approximate speed. Blindness interferes with this.
4. Color. The perception of color assists in differentiation, discrimination and identification. Blindness interferes with this.

The occupation of rehabilitation teaching has been established to help the blind person to accommodate to, compensate for, or develop alternate adaptations to, the problem of perception. This is the "reason for being" of the rehabilitation teacher. The vehicle through which the rehabilitation teacher helps, is in the instruction in the basic activities of daily living. Incorporated into the instruction are training in use of the other senses, new techniques, modified techniques, use of special aids and appliances, and/or support in continuing with previously learned methods.

The areas of instruction include personal management, communication skills, homemaking skills and leisure time activities. Personal management involves grooming, care of the person and clothing, essential social skills, and those

Talk given by Ruth Kaarlela, Assistant Director, Program for Training Home Teachers, Western Michigan University, at Training Institute of Rehabilitation Teachers of the Blind, University of Nebraska, July 13, 1970.

minor activities which are a part of every day life, such as handling money, lighting cigarets, and so forth. Communication skills include teaching braille, typewriting, script writing, use of record machines and tape recorders. Also essential to communication is the spoken word--adjusting the voice to the situation, and facing the person to whom one is speaking. Homemaking skills include cooking, marketing, cleaning, laundering and general home management. Leisure time activities include hand work, table games and outdoor activities.

Your workshop will focus primarily on homemaking and personal management information. As you proceed with your tasks, you will become increasingly conscious of how the information which the sighted person acquires through form, space, color and movement can be made meaningful to the blind homemaker, thereby assisting her (or him) to function independently and effectively.

The next four points, as indicated earlier, concern the relationship of the rehabilitation teacher and the home economist.

II. Home Economist or Consultant

The home economist is the person who can help keep the rehabilitation teacher up-to-date regarding home economics information and homemaking skills. It is difficult for both the blind rehabilitation teacher, who has less access to visual information, and for the sighted teacher who does not have home economics background to keep up with all current literature regarding products and methods. New fabrics, new appliances, convenience foods, new fashions and "bargains" are a few of the many areas of information which can be most useful to the rehabilitation teacher, and in turn, to the blind learner.

III. Team Teaching

There are situations in which the two, rehabilitation teacher and home economist, can work together as a team. This could take place as a public education program or it might involve direct teaching of blind persons.

IV. Rehabilitation Teacher as Consultant

The rehabilitation teacher can help the home economist with the techniques of teaching blind people, with the understanding of blindness, with information regarding the special aids and resources available to blind persons, and regarding the agencies which serve the blind. It is obvious that the two disciplines can offer consultation to each other, as well as to work as members of a service team.

V. Expanding areas of need

There are two groups of people whose special needs, we rehabilitation teachers, have not yet fully identified-- and for whom we should enlist the assistance of home economists.

1. The blind mother who has a new baby, an older baby or even older children needs more help. In rehabilitation teaching we have done little to conceptualize the techniques which a blind mother might

use in caring for a young infant. Mr. Magers has mentioned the 2,500 blind students in college. These students are going to be parents. What concerns will they have regarding the care of their children? The peak of the retrolental fibroplasia blind children are now college age. They too may be potential parents. I hope that we can begin to consider very seriously what special help a blind parent needs for taking physical care of the child and what assistance in parent-child relationships is necessary to permit the child to be free and the parents to be comfortable. Perhaps we can focus more upon the blind parent with the baby.

2. At the other end of the developmental spectrum is the older person. Our image of a household includes a husband, wife and children; and the concern of the mother is to look after her family. The statistics on blindness show that the longer one lives, the greater are the chances of becoming blind. The incidence of blindness increases with age. Large numbers of older persons live in one--or two--person families.

Most old people remain in the community; only five percent live in institutions. They want to be independent. They don't want to live with them. Furthermore, there is a large proportion of aging women--who are likely to have established patterns of keeping a home--and who want to continue to maintain themselves, even though they are alone.

This is a neglected group. They tend to be poorer than the rest of the population, thereby multiplying the problems of maintaining themselves. We must begin to look at what we can do for them. There is some precedence for serving the aged. Preliminary information from research and demonstration projects sponsored by the Office of Aging attest to the following:

- a. There is a fallacy that the aged aren't interested in nutrition programs. The demonstration projects showed that not only are the aged interested in nutrition but they come to the programs in rain, snow and summer heat. They will wait patiently for hours to insure themselves of a place at mealtime--if away from home.
- b. Another fallacy is that the aged won't or cannot learn about nutrition. We do know that old people learn. In the project, the aged learned as they were provided with a better understanding of nutrition, food preparation, budgeting, efficient shopping, and given a better orientation in beneficial eating patterns. It was also discovered that many of the aged in the program were receiving adequate food for the first time in many years.
- c. In addition to the nutritional aspect of the program, virtually all program directors in the project reported a startling change in the other practices of the elderly. They began to dress better as they learned to eat better. Furthermore, they developed more friendships and generally became more conscious of health care and showed a more lively interest in social activities. The by-product of an effort to help people to eat better was widespread. Evidence tends to indicate that improvement in one area of living can enhance the quality of life in other areas as well.

- d. This leads to another way in which I hope that the rehabilitation teacher and home economist can work together. This is in working with groups of people. Traditionally, we have stressed individual instruction for blind people. They do need individual instruction because they must be shown. On the other hand, if it were possible to bring blind people together, with the rehabilitation teachers and home economists in a team situation, the combination of more than one learner and more than one instructor could serve as a stimulus to both teaching and learning, it would involve the student in active participation in seeking learning, it would provide an outing for the learner, and economize on the professional persons travel time.

We have talked about what blindness has done to persons and the benefits of working in the community. You have some ideas of new areas in which you may wish to work, as with the mothers and children and the old people. It is important that the concern remain one for people.

THE REHABILITATION TEACHER AND FUTURE SERVICES TO THE BLIND

We often really wonder what is ahead for workers with the blind and visually handicapped in the 1970's. Our average life span is increasing and blindness is increasing with it. We have right now approximately 430,000 blind people in the United States. Now, of course, this is not a great population figure to think about, but it is still an awful lot of blind people. This number breaks down as follows:

- 215,000 - 65 years and over
- 43,000 - children (10 percent of total)
- 43,000 - multi-handicapped with blindness as only one of the person's handicaps
- 107,500 - gainful employment (This includes homemakers, family workers, and those in the competitive labor market.)
- 21,500 - active caseloads of the State-Federal vocational rehabilitation services

Now you may wonder how these figures might affect our goals. Last year we rehabilitated 7,500 individuals. If we are to provide a really sound program of services to all blind people who need and desire them, the State-Federal vocational rehabilitation programs alone are going to have to reach 15,000 by 1980. One of the factors that is going to prove rather vital and have considerable impact on rehabilitation teachers and their working relationship with the extension home economist as well as on the whole area of rehabilitation services is the plan for social services.

Today, we have two pieces of national legislation in the congressional mills, both of which most probably will become law if not this year in the next. The bills may be changed slightly, but basically they will remain the same.

First is the Family Assistance Plan. This is the minimum family maintenance proposition aimed at welfare reform. It will have some impact but it will not have nearly the significance as the new Social Service legislation that will move along as companion to the family assistance plan. We have been involved in writing some of the policy backup material which concerns special services for the blind persons. This social service legislation will mean a number of things, for example:

1. There will be a greater amount of Federal money moving into social services including special services for blind persons.
2. A much closer working relationship will be generated between the rehabilitation teaching programs in the State and the overall Federal program for the provision of these services. Special services to the blind will be increased to include, as a minimum,

Talk given by George A. Magers, Assistant Chief of Division for the Blind and Visually Handicapped, Rehabilitation Services Administration, Training Institute of Rehabilitation Teachers of the Blind, University of Nebraska, July 13, 1970.

mobility training, communication skills, and activities of daily living. Of course, there will be other services involved, such as, planning and provision for appropriate housing.

The whole gamut of services will be directed toward the individuals being as independent as possible. In other words, we think these two pieces of legislation will probably be the landmark where we begin to switch over our approach to welfare as far as the blind of America are concerned from dependence to independence. This is going to undoubtedly have a very significant impact on what happens to you as rehabilitation teachers and to you as extension home economists. It is going to mean that the rehabilitation teachers are going to need the extension home economists and the many resources they have available not only the particular knowledge of the home economist but also the kinds of volunteers which have been developed in the communities. This type of resource is going to be vital if we intend to provide programs and services to all blind people who need and desire them.

This the second Training Institute for Rehabilitation Teachers and Extension Home Economists of the Blind aimed at delivering services to newly-blinded homemakers. We hope in the next two years to hold two more of these programs. One would be held in the west and the other is planned for the southeastern part of the country. It is our intent to include both the rehabilitation teachers and extension home economists in both parts of the country.

When you go back home, both rehabilitation teachers and extension home economists are challenged not to forget the subject matter of the Institute and your obligation to generate the kind of in-service training among your colleagues at home that can effect the kinds of patterns in services that we need and are going to need if we are really going to meet the needs of blind people who want and need to be independent in their own homes.

Teaching Outline
for
FOOD PREPARATION

I. OBJECTIVES:

- A. To review or learn the techniques and procedures appropriate for the newly blind homemaker in food preparation.
- B. To learn methods of instruction to be used in teaching the newly blind homemaker.
- C. To experience setting the table with appropriate linens and placing food on plates for the blind person.
- D. To review or learn the techniques and procedures appropriate for the blind homemaker to use in clearing the table and washing dishes.
- E. To evaluate different methods of cooking, such as broiling, baking, frying and pressure cooking for use by the blind homemaker.
- F. To evaluate kitchen equipment in terms of use by the blind homemaker.

II. CLASS OUTLINE:

- A. KITCHEN MANAGEMENT
 - 1. Storage in the kitchen to conserve time and energy
 - 2. Arrangement of utensils and food products
 - 3. Marking techniques
 - a. Braille
 - b. Non-braille
- B. MEASUREMENT TECHNIQUES
 - 1. Dry
 - 2. Liquid
 - 3. Solids
 - 4. Devices for measurement
- C. KITCHEN SAFETY
 - 1. Clothing
 - 2. Kitchen equipment
 - 3. Kitchen clean-up
- D. KITCHEN ORIENTATION
- E. FOOD PREPARATION TECHNIQUES
 - 1. Peeling (floating blade peeler, knife)
 - 2. Slicing
 - 3. Use of new equipment (blender, magna-wonder knife, etc.)
 - 4. Frying
 - 5. Baking
 - 6. Cooking (stove top)
 - 7. Quartering
 - 8. Pouring

9. Scraping
10. Heating
11. Measuring

F. MEAL CLEAN-UP TECHNIQUES

G. SHARING OF ADDITIONAL EXPERIENCES

1. Additional equipment used in food preparation
2. Additional techniques of food preparation
3. Additional teaching techniques
4. Additional table service techniques

Instructors: Mrs. Berit Yank,
Rehabilitation Teacher for the Blind

Valerie Kehm,
Home Economist

Teaching Outline
for
HOME MANAGEMENT

I. OBJECTIVES:

- A. To understand the concepts, purpose and function of Home Management.
- B. To learn certain basic techniques and skills in various areas of Home Management, i.e., social, financial, physical.
- C. To attain an understanding working relationship between the Rehabilitation Teacher and the Home Economist.

II. CLASS OUTLINE:

- A. GOALS AS A PART OF HOME MANAGEMENT
 - 1. Explanation of various kinds of goals: human and material
 - 2. Role-playing for demonstrating and for class interest (optional)
- B. RESOURCES AS A PART OF HOME MANAGEMENT
 - 1. Explanation of the kinds of resources: personal, community, abstract.
 - 2. Role-playing: reaching into a decision (optional).
- C. PROCESS OF MANAGEMENT
 - 1. Values, standards, priorities, objectives and goals
 - 2. Collecting and analyzing information
 - 3. Planning and decision-making
 - 4. Assessing human resources and inter-personal skills
 - 5. Implementing and coordinating
 - 6. Evaluating, adapting and re-directing
- D. ORIENTATION WITHIN THE HOME AND THE IMMEDIATE ENVIRONMENT
 - 1. Importance for orientation to Home Management
 - 2. Special problems of orientation as they relate to Home Management (group discussion and demonstration).
- E. GROUP DISCUSSIONS
 - 1. How does blindness affect the role of the homemaker in the family?
 - 2. How does blindness affect living as a family?
 - a. Attitudes of family members
 - b. Attitudes of the blind member
- F. APPLICATION OF CONCEPTS TO THE PERFORMING OF HOME MANAGEMENT: TASKS AND DEVELOPMENT OF SKILLS

Instructors: Mrs. Lillian Rosenbom,
Rehabilitation Teacher for the Blind

Gary Hansen, Ph. D.
Home Economist

Teaching Outline
for
MEAL PLANNING, FOOD BUYING AND FOOD STORAGE

I. OBJECTIVES:

- A. To review the basic principles of nutrition, meal planning and economical food buying.
- B. To introduce the extension home economists to methods of food shopping and storage appropriate for blind homemakers.
- C. To acquaint the rehabilitation teachers with food and nutrition services available from extension home economists.

II. CLASS OUTLINE:

- A. MEAL PLANNING
 - 1. Basic four food groups
 - 2. Facts about foods
 - 3. Importance of good nutrition
 - 4. Individual needs
 - 5. Facts about special diets
- B. FOOD FADS AND FALLACIES
 - 1. Detecting faddism
 - 2. Dangers
 - 3. Food myths and misconceptions
- C. TABLE ETIQUETTE
 - 1. Exploration of place setting
 - 2. Orientation to contents of plate
 - 3. Cutting meat and eating salads
- D. FOOD SHOPPING
 - 1. Who to ask for assistance
 - 2. Importance of shopping list
- E. FOOD STORAGE
 - 1. Organization and methods
 - 2. Fresh fruits, vegetables and meats
 - 3. Canned and packaged foods
 - 4. Frozen foods
- F. ECONOMICAL FOOD BUYING
 - 1. Meats, fruits and vegetables
 - 2. New foods; convenience foods
 - 3. Cost and nutrition comparisons
- G. EXTENSION SERVICE EXPANDED NUTRITION PROGRAM
 - 1. Purposes of program
 - 2. Work of nutrition aides

H. BRAILLED AND LARGE TYPE BULLETINS

Instructors: Mrs. Norma Spencer,
Rehabilitation Teacher for the Blind

Mrs. Margaret Wilkinson,
Home Economist

Teaching Outline
for
TEXTILES, CLOTHING AND GROOMING

I. OBJECTIVES:

- A. To present consumer information and adaptations needed when working with the blind homemaker.
- B. To introduce the Extension Home Economist to various methods, procedures and aids used when working with the blind homemaker.
- C. To train the Rehabilitation Teacher and the Home Economist in the use of visuals when working with the blind homemaker.

II. CLASS OUTLINE:

A. COMMONLY USED FABRICS

- 1. Characteristics: Advantages versus disadvantages of a certain fiber.
- 2. Finishes: Effect upon characteristics.
- 3. Performance: Consumer expectations.
- 4. Identification: Possibilities and difficulties
- 5. Importance of hang tags and labels
- 6. Information one needs for the sales person.

B. CLOTHING SELECTION

- 1. Universal sociological-psychological desires
- 2. Individual choices

C. CLOTHING CARE

- 1. Laundering: hand or washer
- 2. Cleaning: coin-op machines or dry cleaners
- 3. Regular care: brushing, folding, hanging
- 4. Pressing and ironing: advantage and use of steam iron
- 5. Shoes
- 6. Minor repairs: mending, buttons, equipment

D. PERSONAL IDENTIFICATION FOR THE INDIVIDUAL

- 1. Touch: texture, line, trim
- 2. Marking clothing: methods and means

E. GROOMING

- 1. Importance of good grooming: psychological reasons and effect, personal satisfaction
- 2. Posture: sitting, standing, walking
- 3. Meeting others: voice direction, shaking hands, facial expression, etc.
- 4. Personal care: skin, hands, hair, makeup

F. CLOTHING CONSTRUCTION

- 1. Possibilities for the visually impaired
- 2. Discussion of methods and procedures

Instructors: Miss Vera J. McClain,
Rehabilitation Teacher for the Blind

Mrs. Jane Speece,
Clothing Specialist

INSTITUTE PROGRAM

UNIVERSITY OF NEBRASKA
Nebraska Center for Continuing Education
July 12 - 17, 1970

TRAINING INSTITUTE
FOR
REHABILITATION TEACHERS OF THE BLIND

TEACHING THE
NEWLY BLINDED
HOMEMAKER

University of Nebraska College of Home Economics
In Cooperation with
REHABILITATION SERVICES ADMINISTRATION
U. S. Department of Health, Education and Welfare

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GENERAL INFORMATION

The number of each floor is marked in raised numbers on:

- a. the panel of the elevator call buttons
- b. the left side of the elevator floor

Meeting rooms are located in the Nebraska Center unless otherwise specified.

There is a radio in each room for use of guests.

Dogs may be walked beyond the Youth Wing in an area to the north or in the area to the north-east of the Center along a crushed rock road.

Lift the phone off its cradle to obtain services of the desk clerk.

All classrooms are on Second Floor of the Center.

Breakfast and lunch will be served in the Columbus Room (first floor) at 7:30 a.m. and 12:00 noon on the weekdays of the Institute.

Check central desk in lobby for incoming mail or messages daily.

Hours for Dining Service:

Lincoln Room is open for dinner, 5:30-7:30 p.m.

Cafeteria in Youth Wing is open for snacks and meals from 7:00 a.m. to 7:00 p.m.

Coffee breaks: Coffee will be available in the Second Floor Lobby at 10:30 a.m. on Monday-Thursday.

Coffee and cold drinks will be available in the Second Floor Lobby at 3:00 p.m. on Monday-Thursday.

SCHEDULE

Sunday, July 12th, 1970

- 9:00 a.m. Breakfast - Columbus Room
- 10:00 Orientation for Home Economists
in Extension - Minden Room
- Robert LaDuke
- 12:15 p.m. Dinner for Institute Staff and
Extension Home Economists
- Columbus Room
- 2:00 Planning Session for Institute
Staff - Minden Room
- 4:00 Registration - Second Floor Lobby
- 6:30 Get-Acquainted Supper for Workshop
Staff and Participants
- Columbus Room
- Master of Ceremonies - Dean McDermott
- Welcome - Dr. Hazel Anthony
Miss Agnes Arthaud
- Introductions - Dr. Lois O. Schwab
- What's Ahead - George Magers

Monday, July 13th, 1970

- 7:30 a.m. Breakfast - Columbus Room
Dr. Lois O. Schwab presiding

Monday, July 13th (Continued)

8:30 a.m. Talk: The Rehabilitation
Teacher and the Homemaker
- Ruth Kaarlela

Remarks: George Magers

Working Toward Our Goal: The
Rehabilitation of the Newly
Blinded Homemaker

9:30 a.m. - 5:00 p.m. Workshops

Group A. Food Preparation - Food and Nutrition
Bldg., Room 225

Group B. Home Management - Alliance Room

Group C. Meal Planning, Food Buying, and
Storage - North Platte Room

Group D. Clothing, Textiles and
Grooming - Minden Room

12:00 Luncheon - Columbus Room

Tuesday, July 14th, 1970

7:30 a.m. Breakfast - Columbus Room

9:00 a.m. - 4:30 p.m. Workshops

Group A.. Home Management - Alliance Room

Group B. Meal Planning, Food Buying
and Storage - North Platte Room

Group C. Clothing, Textiles and
Grooming - Minden Room

Tuesday, July 14th (continued)

9:00 a.m. - 4:30 p.m. Workshops (continued)

Group D. Food Preparation - Food and Nutrition
Bldg., Room 225

12:00 Luncheon - Columbus Room

Wednesday, July 15th, 1970

7:30 a.m. Breakfast - Columbus Room
Agnes Arthaud presiding

9:00 a.m. - 5:00 p.m. Workshops

Group A. Meal Planning, Food Buying
and Storage - North Platte Room

Group B. Clothing, Textiles and
Grooming - Minden Room

Group C. Food Preparation - Food and Nutrition
Bldg., Room 225

Group D. Home Management - Alliance Room

12:00 Luncheon - Columbus Room

Thursday, July 16th, 1970

7:30 a.m. Breakfast - Columbus Room
Mary Dale McGregor presiding

9:00 a.m. - 4:30 p.m. Workshops

Group A. Clothing, Textiles and
Grooming - Minden Room

Thursday, July 16th (continued)

9:00 a.m. - 4:30 p.m. Workshops

Group B. Food preparation - Food and Nutrition
Bldg., Room 225

Group C. Home Management - Alliance Room

Group D. Meal Planning, Food Buying
and Storage - North Platte Room

12:00 Luncheon - Columbus Room

4:00-6:00 Expense Account Assistance - Library
(Second Floor)

7:30 p.m. Meeting for Extension Home
Economists - Minden Room

Friday, July 17th, 1970

7:30 a.m. Breakfast - Columbus Room
Dr. Gary Hansen presiding

9:00 The Opportunity That Lies Ahead
- Workshop Participants

10:30 Adjourn

11:00 Evaluation Meeting - Minden Room
- Institute Staff

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Addition - Rehabilitation Teacher

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Chicago, Illinois 60601

INSTITUTE SCHEDULE

Clothing, Textiles,
Grooming
Mindens Room
Team: Vera McClain
Mrs. Jane Speece

Meal Planning,
Food Buying
North Platte Room
Team: Mrs. Norma Spencer
Mrs. M. Wilkerson

Home Management
Alliance Room
Team: Mrs. L. Rosenbom
Dr. Gary Hansen

Food Preparation
Food and Nutrition
Building 225
Team: Mrs. Berit Yank
Miss Valerie Kehm

Group D
Mrs. Susan P. Barnes
Thomas D. Doss
Mrs. Faith Cahalan
Joyce Johnson
Mary Frances Lamison
Gloria Ristow
Mrs. Gertrude C. Smith
Viola E. Woodruff

Group C
Barbara Fite
Ralph Hilgendorf
Mrs. Jennie Hutten
Mrs. Sue Illingworth
Mrs. Mary Powers
Mary A. Blythe
Mrs. Mary Wilson

Group B
Mrs. Mary Atterbury
Mrs. Irene F. Hewitt
Dr. Evelyn H. Johnson
J. Norman Mashburn
Mary Dale McGregor
John S. Smith
Martha Stobaugh
Angelita Sanchez

Group A
Mr. Marjorie Y. Baker
Mrs. Carolyn O. Bebee
Mrs. Eugenia P. Folts
Mr. Gene Hewitt
Mrs. Mary Hubbard
Timothy Seither
Mrs. Madge S. Wallace

Tuesday
July 13

Group C

Group B

Group A

Group D

Wednesday
July 14

Group B

Group A

Group D

Group C

Thursday
July 15

Group A

Group D

Group C

Group B



FILM THEATER

"MAY I HELP YOU"

Program for Training Home Teachers
Western Michigan University
Kalamazoo, Michigan 49001

A film demonstration of how the sighted person can "help" the blind person in his mobility.

A 16 mm. color, sound film available through the University free of charge.

"A CHANGE FOR THE BETTER IN SIGHT"

Community Rehabilitation Services
Minneapolis Society for the Blind
1936 Lyndale Avenue South
Minneapolis, Minnesota 55403

A filmstrip designed for the specific purpose of training staff in agencies and facilities serving the elderly, visually handicapped population. The filmstrip includes general information on visual impairment, technical guidance on recognition and subsequent care in dealing with visually impaired persons, as well as psychological aspects of blindness and nursing home care. Specific techniques for assisting the visually impaired to help themselves are also included.

The 35 mm. filmstrips has an accompanying sound track on Cassette tape. May be purchased for \$10.00 or may be rented.

"HELP ON WHEELS"

College of Home Economics
University of Nebraska
Lincoln, Nebraska 68503

The film shows an innovative local program on behalf of the physically disabled homemaker and portrays:

- a community organizing its local leaders, professional and volunteer to help the handicapped
- a trained homemaker rehabilitation consultant working with the handicapped
- adaptations and devices which may be used by the physically disabled
- community leaders planning to remove barriers in buildings and streets

Copies of the 35 mm. sound color film are available in each state through the State Services for Rehabilitation and the Home Economics program at the Land Grant College.

THE NEEDS AND RIGHTS OF NEWLY BLINDED HOMEMAKERS

A Statement of Philosophy

Many of you are aware of the fact that working in this field is a new and challenging encounter for me. This Training Institute has been an opportunity to gain knowledge and new perspectives. On the first day of the Institute, something impressed me very strongly and must be shared. You know, there are many beautiful people throughout the world. I have been thrilled with the confirmation of this reality, which I've enjoyed so much in working with all of you.

I have been impressed with your enthusiastic spirit and dedication to the goals of homemaker rehabilitation. Throughout this Institute you have spontaneously shared important principles which serve as guidelines for work with the newly blinded homemaker. The principles represent a philosophy which would be declared as a "Statement of Needs and Bill of Rights" for the newly blinded or otherwise disabled homemaker.

The newly blinded or otherwise disabled homemaker has a
NEED FOR and a RIGHT TO:

1. Empathetic concern, understanding and supportiveness.
2. A comprehensive and co-ordinated rehabilitation program.
3. Continuous access to public and private community resources.
4. The "chosen" quality and style of life.
5. Co-operative interdependence in the family and community.
6. Timely information, counsel, and help from sighted persons.
7. Protection from pressures of the uninformed or prejudiced.
8. Respect for "Being" and personal integrity.
9. Free agency, individuality and self determination.
10. Fulfillment of needs to be accepted, to belong and to be loved.
11. Opportunities for personality development and self actualization.
12. Free time for rest, relaxation, and renewal.
13. Safety and security within the home and community.
14. Recognition for success in learning, in daily living, and for special achievements.

A declaration of rights is an important statement of guidelines for work with the newly blinded and other disabled homemakers. Philosophy and practice however, can be integrated only through continuous effort and evaluation. The actual fulfillment of client needs can only be achieved through the intelligent application of these guidelines with the professional knowledge and technical skills of the rehabilitation team.

1. Empathetic concern, understanding and supportiveness

Rehabilitation workers need to develop a very special balance in their

Talk given by Gary D. Hansen, Ph.D., Chairman, Department of Family Economics and Management, University of Nebraska, Lincoln.

relationships with the client, the family and "significant others" in the client's life. The normal human responses of pity, sympathy, over solicitation, protectiveness, and paternalism must be controlled along with the opposite tendencies to become too calloused, insensitive, cold or indifferent. Your attitudes and emotional responses may be the crucial source of hope and guidance for the patient who is struggling desperately to adjust to the initial trauma of blindness and the concomittant physical, social, economic and emotional difficulties. Your example and teaching of family members will also be crucial in their acceptance of and adjustment to blindness in the family.

2. A comprehensive and co-ordinated rehabilitation program

The fulfillment of this need obviously depends upon many inter-related factors including a supportive public, cooperative families, co-ordination between agencies and institutions, adequate funds, competent personnel, organized rehabilitation teams, timely diagnosis and service, referral and continuity of care systems, training equipment and facilities, and experimental and research projects. We will be unable to fill this need and right of the newly blinded homemaker both efficiently until these goals become conditions of reality throughout the nation.

3. Continuous access to public and private community resources

Special ongoing efforts should be made to inform clients and families about existing and newly developed community resources that are relevant to them. Adult education, recreation, social, financial, housing, health care and other services will be invaluable to all clients at some time. Sources of information such as Community Chest or UGN agencies, mass media, the extension service, libraries, adult education programs and information and referral services, should be emphasized. This may be part of an overall effort to increase inputs of non-visual information.

4. The "chosen" quality and style of life

We should not encourage the newly blinded homemaker to make unreasonable sacrifices or compromises in her preferred life style. I agree with Mrs. Lillian Rosenbom that if you want to have fine linen, china, crystal, and silver as part of your life style, then that is the way it ought to be. Rehabilitation teaching should help the client develop and maintain those habits and practices which enrich the quality of life and sustain healthful environmental standards. This may require considerable remotivation for the client and learning of new techniques of management and work. It may also involve more participation of family members and a new division of labor. It is important to help the client become keenly aware of what she wants and be comfortable about avoiding the pressures of conformity and social competition with others. Her own values, sensitivities, and aesthetic notions should be the overriding considerations.

5. Co-operative interdependence in the family and community

We live in a society and a world in which all of the elements are interrelated. There are dominate patterns of interaction and reciprocity. We are interdependent--individual upon individual, and group upon group. All should recognize the fact that we influence and help each other in an infinite variety of ways. Thus co-operation, mutual concern, sharing and helping are fundamental processes for success and satisfaction in family and community life. It is reasonable for each person to do what he or she is able and no one should expect more. A realistic recognition and acceptance of our limitations and capabilities, by ourselves and others, is an integral part of the social ethic of co-operative interdependence. This ethic can help us avoid the fears of dependency and the neurotic strivings to be unrealistically independent. Through fostering a sense of interdependence and cooperation, the "wheels" of the household may be kept rolling smoothly and everything will be accomplished that needs to be done while maintaining a good spirit among the members of the family.

6. Timely, information, counsel, and help from sighted persons

The client needs to develop a sense of freedom about asking questions and seeking the information needed to facilitate her decision making, daily activities, and problem solving. The right to counsel is crucial because of the need to have the additional perspectives of sighted persons prior to making some judgments or engaging in certain activities. The film "May I Help You" very adequately portrayed the need and opportunity for the blind and sighted to share in meaningful ways and be helpful to each other. A vivid description of a sunset or a painting, flowers blooming or trees turning in the colors of autumn are as important to share as telling the type and position of food on the plate at mealtime in a restaurant.

7. Protection from the pressures of the uninformed or prejudiced

Public and private agencies of the community need to support educational and community action programs which realistically inform the people about blindness and rehabilitation. One goal would be to develop knowledge and attitudes which help reduce the fear, anxiety, and awkward manners of sighted persons relating to the blind. Emphases should be placed upon the realities of normal, successful adaptation to blindness and the mobilization of community resources to make the broad scope of rehabilitation services available. Schools, other community agencies, and the mass media should co-operate in these efforts. There should be special efforts to help blind persons share their knowledge, skills, and talents with others in the community. This should improve the levels of acceptance, understanding and involvement.

8. Respect for "Being" and personal integrity

I feel that our society is seriously "hung up" on a "functional" definition of the importance of man. I propose that the goodness of man not

be determined so much by function, position, power and resources, but rather on the fact of "being" a human person, sharing this fundamental fact of existence in common with the human race. Would it help us in these troubled times to accept each man and woman as brother and sister and all people as members of the family of mankind?

Would a philosophical determination of the "goodness of man" based upon notions of personal integrity, self control, other-centeredness, cooperativeness, affection, initiative, social responsibility and other such concepts be useful today? Somehow we need to grapple with these issues, examine the conflicting values and develop a philosophy built upon concepts which are not dysfunctional and destructive to our clients and ourselves.

9. Free agency, individuality and self-determination.

I have sensed a strong commitment on the part of Institute participants to encourage the newly blind homemaker to exercise her own judgment, to use her past experience, to have freedom and opportunity to make decisions, and to do the things she wants to do in the future. This is a value which must be at the very center of rehabilitation philosophy and practice. Everyone, including the client, family, friends, and staff needs to understand the immediate and long range implications of free agency and self determination. It is a protection of all individual rights. It is accompanied by the rewards of success and satisfaction and the problems of trial, error, and failure. It allows for some inefficiency and ineffectiveness. It calls for individual expression of thoughts, feelings, and actions in all aspects of life.

10. Fulfillment of needs to be accepted, to belong and to be loved

Negative attitudes of the client may hamper acceptance or lead to rejection. There are serious problems associated with the clients misperceptions and fantasies about what others think and feel. These may prevent the communication and sharing which leads to social integration. Periods of intense anxiety, hysteria, depression, or withdrawal are normal responses to trauma, but all efforts should be made to prevent these from becoming habitual patterns of behavior. If they become dominate patterns, the social pathology, deterioration and losses will be extensive for the client, family and community. Chronic bitterness, pessimism, doubt, and fear are powerful foes of rehabilitation and contribute to alienation from others. On the other hand, optimism, confidence, and other components of a positive self image facilitate acceptance and belonging. Affection can not be legislated or promised as a result of objective planning. However affection is basic to human survival and happiness. Rehabilitation psychologists, social workers and others need to be very creative and concerned about helping clients develop the personal attributes, the interpersonal competency, and the environmental conditions which increase the probabilities of building and maintaining satisfying interpersonal relationships.

11. Opportunities for personality development and self actualization

Although we did not discuss this in developmental terms, it is one of the

most important and all encompassing needs and rights of the newly blinded or otherwise disabled homemaker. This institute has emphasized the development of competence in the activities of daily living and the development of the technical skills essential to managing a household and directing a family. There should also be complementary and parallel opportunities for personal expression and development in other social, intellectual, philosophical, spiritual, recreational, and artistic aspects of life. The challenge is fulfillment of one's own unique potentialities and enjoyment of both the processes and the results. Sometimes we emphasize intensive specialization and other times we want the perspective of a broad liberal education, whether formal or informal. The combination reflects a kind of perfected balance. The homemaker must have the opportunity to express her ingenuity and develop her genius for adaptation to dramatic changes and the fulfillment of the complex needs of her family. The staff of the Extension Service and Rehabilitation Agencies should stimulate and challenge the use of all the ingenuity the homemaker has.

The blind person is often one who has achieved the highest levels of self actualization in the senses of touching, feeling, and hearing. Awareness of the environment, air movement and mobility may also be highly developed. These senses are utilized to perceive and comprehend the nature of the environment and to enable the blinded homemaker to accomplish her goals. They provide brilliant examples of the human adaptive capabilities. One special dimension of these exciting accomplishments is the emergence of insight and understanding without visual perception. Insight achieved by the blind person is especially beautiful. They must occasionally chide "If only our sighted friends could see!".

12. Free time for rest, relaxation and renewal

This is clearly required for relief from the emotional and physical fatigue and literal exhaustion associated with all of the routine and complex managerial tasks in the household and in family relationships. Tasks may require 1/3 to 1/2 more time, on a regular basis, for the blind homemaker. Failure to obtain rest and renewal contributes to physical and mental illnesses. One would expect increases on the incidence of psychoneurotic disturbances, mental frailty, and nervous breakdowns if free time is not available for relaxation and renewal. Although we may not like these harsh concepts, some diversion and escape may be the best protection for the homemaker, during certain periods of her adjustment. The sense of captivity must be overcome to avoid the syndrome of "cabin fever". The pressures of living together and the demands of children need to be balanced with time for privacy.

13. Safety and security within the home and community

Mobility training, the use of common sense, and past experience are probably the keys to safety for the blind homemaker. We can improve the household environment through the use of recommendations from studies on rehabilitation for the blind, disabled, and aged. The work on kitchens and bathrooms is especially relevant. Public buildings can be improved through

the elimination or modification of architectural barriers in existing structures and design for total mobility of the handicapped in new facilities. Home and community environments need more tactile and auditory clues to enhance mobility. The protective agencies of the community should be especially aware of disabled persons, and their special needs. Such agencies could enhance the sense of security among the disabled by providing appropriate and timely services.

14. Recognition for success in learning, in daily living and for special achievements

Personal satisfactions with learning, living, and achievement are enriched and multiplied many times over by the recognition awarded by others, especially from professionals who are not "required" to verbalize praise. Such recognition provides the reinforcement needed to face the problems and perform the labors of tomorrow. Recognition provided by the rehabilitation staff builds motivation and provides inspiration to try again and progress in spite of rugged obstacles.

Those of us from the University of Nebraska look forward to the qualitative continuation of this work and the opportunity of being with you in the future. It is my bias that a more deserving and important group of clients does not exist, than the homemakers of Mid-America. We hope that you will utilize all of the information, extension, research and other services available from Universities in this region and allow us to share with you in building the desired quality of life for newly blinded homemakers and their families through rehabilitation.

ILLINOIS' EXPERIENCE WITH THE EXTENSION HOME ECONOMIST

In Illinois, we were fortunate enough to be involved in that first planning meeting at Western Michigan University in December 1960. Our Superintendent came back with some ideas that he wanted us to try in working with the Extension Home Economist of the State. For planning our program we first contacted the State Leader of Home Economics at the University of Illinois. We then developed a plan for a day and one-half Institute that we held in Chicago. Eight or ten Counties were involved. Part of the time was spent at the Sherman Hotel talking and doing the things that did not require special equipment and special facilities. Then we transferred our work to the Illinois Visually Handicapped Institute for a full day of demonstration and application. This was a very constructive Institute for everyone concerned. We had determined to make every job as pleasant as possible. For example: we gave each lady the assignment to put their lipstick on the next morning without looking in the mirror. Many of those attending offered to be blindfolded and do certain household tasks. This served a purpose in not really understanding blindness but in understanding some of the accomplishments of the blind.

Home Extension like any other big organization has commitments and things to plan for in most cases a year in advance. Further Institutes should be planned for well in advance.

Perhaps an example of how we use the Home Economist in Extension should be given. Recently, we have found that for our sewing classes, the Rehabilitation Teacher can instruct in the basics and techniques of sewing for the blind. The Home Economics volunteers, usually homemakers, sit in on these sessions with groups of clients and observe the techniques of teaching the blind so that they can work individually with clients in the sessions which follow in which the technique is used. We use the homemaker either on the voluntary basis or on a contractual basis.

It may be advisable to seek out the Land Grant College in your State. From that source you should be able to learn the names of the County advisers who in turn may recommend Home Economists in Extension Service in the local communities.

The Home Economists in Extension are valuable resources for helping the blind homemaker. By all means, use them.

Talk given by Mrs. Lillian Rosenbom, Counseling Home Teacher for the Blind, Illinois Community Services for the Visually Handicapped, Chicago, Illinois.

Sequence of Planning and Implementation

The University of Nebraska College of Home Economics was invited in November 1969 to submit a request for a short-term training grant for the conducting of a Training Institute for Rehabilitation Teachers of the Blind for the twenty state area represented in the Middle American Association for Rehabilitation Teachers. The Institute was to be patterned on the previous one held at the University of Maryland in August 1968. Subsequently, funds were made available through a training grant from the Social and Rehabilitation Services, U. S. Department of Health, Education and Welfare.

Because a prototype for the Institute was available, consultants and teaching staff met in March 1970 to make definite plans for the forthcoming workshop. It was decided to accept similar teaching objectives, subject-matter divisions and teaching techniques. The one-day workshop plan would be followed in each of the four subject-matter areas. Each teaching team included one rehabilitation teacher of the blind and one home economist; each team prepared a preliminary teaching plan and determined resources needed for the workshop. The Institute program and selected teaching materials were printed in braille for the blind participants.

The Training Institute was conducted from July 12-17, 1970. It was attended by twenty-one Rehabilitation Teachers of the Blind from the Middle America Association area, nine Extension home economists from nine states, staff members and three consultants, two from the Division of Services to the Blind, Social and Rehabilitation Services.

An evaluation session was held at the close of the session with the entire Institute staff. The following were indicated as outstanding aspects of the Institute:

1. Rehabilitation teachers become aware of the possible contributions of the Extension home economists at the local level;
2. An exchange of information and understanding took place between two groups of professionals;
3. Both groups of professionals learned of further techniques, procedures and resources which are available to them in their work; and
4. Individuals become acquainted with each other through new professional relationships.

The following recommendations were made for strengthening the Institute plan:

1. An additional pre-session for practice of the presenting of the material.
2. Staff from home economics should have more personal experience with some blind homemakers prior to the Institute.
3. A technique approach for various jobs in meal preparation should be used rather than trying to prepare and serve an entire meal.

4. It may be best to have the mobility instructor have a special session during the first day rather than trying to work mobility into each session.
5. The extension home economists should have more time notification for participation in the workshop because the extension program calls for making complete work plans for a year in advance.

It was agreed that the follow-up to the Institute will depend on the unique characteristics of the state agency for the blind and the state extension service, and that regardless of the local situations, there was a commitment to a "follow-up" to the Institute by the participants.

Educational Objectives

- A. It shall be the purpose of this short-term program to help practicing rehabilitation teachers of midwestern United States to:
1. Improve the quality of their services to the newly blind homemaker through an instructional program of techniques, methods and subject-matter knowledge.
 2. Work out procedures for effective cooperation between the rehabilitation teachers and the county extension agents in home economics.
- B. The training program will include appropriate learning experiences so that rehabilitation teachers of the blind may:
1. Develop methods of orienting the blind homemaker to a home and work environment.
 2. Develop competence and confidence in helping the newly blind homemaker plan and evaluate the kind of assistance needed to carry out homemaking activities.
 3. Acquire knowledge and understanding of homemaking problems which confront the blind homemaker.
 4. Learn ways which help the blind homemaker to achieve satisfactory personal and family adjustment.
- C. It will be the purpose of the Institute to consider four phases on home economics subject-matter in the teaching program so that the rehabilitation teacher may help the newly blind homemaker develop safe and effective home-making practices; the subject-matter areas will be:
1. Basic nutrition, food selection, food buying, meal planning and meal preparation.
 2. Selection and care of clothing and home fabrics.
 3. Personal appearance and grooming practices.
 4. Management of family resources (time, energy and money).

The above program will be evaluated in terms of:

1. Follow-up cooperative programs between the Rehabilitation Teachers and the Extension Home Economists; and
2. Increased services to the newly blinded homemaker as measured by:
 - a. Content of the subject-matter being taught to homemakers, and
 - b. Survey as to frequency of types of service (a questionnaire before the Institute given indication of frequency of service to the homemaker before the Institute).

TRAINING INSTITUTE FOR REHABILITATION TEACHERS OF THE NEWLY BLIND HOMEMAKER

Evaluation Questionnaire

1. How have you used the information gained at the Institute?

2. What plans have you for sharing your added knowledge with other rehabilitation teachers?

3. How have you worked with a home economist since the Institute?

4. Now that six weeks have passed do you think you can say which of the classes gave you the kinds of help you needed most?

5. Can you give examples of how this weeks's experience actually helped you in gaining confidence to teach blind homemakers about their home-making responsibilities?

6. If you had the opportunity to participate in another similar Institute, what suggestions for subject content and methods of teaching would you have?

7. Feel free to make any other comments you wish.
Each of us would like to know how you feel now about the Institute.
If the week broadened your concepts of teaching blind homemakers, how have you been able to work with a home economist in your present location?

Planning Committee

Chairman

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George A. Magers, Assistant Chief, Division of Services for the Blind, Rehabilitation Services Administration, U. S. Department of Health, Education and Welfare, Washington, D. C.

Howard Hanson, Director, South Dakota Service to the Blind and Visually Handicapped, 222 East Capitol, Pierre, South Dakota, 57501.

Mori Wells, District Supervisor, Illinois Department of Children and Family Services, 361 Old Indian Trail Road, Aurora, Illinois, 60506.

Miss Ruth Kaarlela, Assistant Director, Program for Training Home Teachers, Western Michigan University, Kalamazoo, Michigan, 49001..

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Please Do Not
Write In This
Space

Code Number 1-3

Card Number 4-5

QUESTIONNAIRE TO REHABILITATION TEACHERS

Would you kindly help by checking or filling in the appropriate blank or blanks.

_____ Interviewee
_____ City
_____ State
_____ Title or
Position Held

What is your age?

_____ years

6-7

How long have you held your present position?

_____ years

8-9

How many years of education have you had beyond high school graduation?

_____ years

10-11

Are you visually handicapped?

_____ yes _____ no

12

If yes, indicate extent of impairment:

- _____ a. field restriction 20 degrees or less
- _____ b. light perception
- _____ c. large object perception
- _____ d. 20/200
- _____ e. 20/150
- _____ f. 20/100
- _____ g. 20/50

13

If yes, how long have you been visually impaired?

_____ years

14-15

If yes, is your impairment congenital?

_____ yes _____ no

16

Have you had classwork in home economics?

_____ a. number of classes in high school

17-18

_____ b. number of classes in college or university

19-20

_____ c. number of classes through Cooperative Extension Service

21-22

_____ d. number of workshops, institutes, please specify

23-25

Do you know any of the home economists on your state staff of the Cooperative Extension Service?

_____ yes _____ no

26

Have you worked cooperatively with any of the home economists in the Cooperative Extension Service?

_____ yes _____ no

27

Have you used materials published by the Cooperative Extension Service?

_____ yes _____ no

28

If yes, how often?

_____ a. seldom
_____ b. often

29

What resources do you use in teaching?

_____ a. plans and materials prepared by others
_____ b. published texts in braille or print
_____ c. self-constructed outlines
_____ d. others, specify _____

30

31

32

33

Indicate by placing an X or ✓ by the states from which you have used printed manuals or guides in your teaching. Include your own state if applicable. Check no more than five primary sources.

<input type="checkbox"/> Alabama	
<input type="checkbox"/> Alaska	
<input type="checkbox"/> Arizona	
<input type="checkbox"/> Arkansas	
<input type="checkbox"/> California	<u>34-35</u>
<input type="checkbox"/> Colorado	
<input type="checkbox"/> Connecticut	
<input type="checkbox"/> Delaware	<u>36-37</u>
<input type="checkbox"/> Florida	
<input type="checkbox"/> Georgia	
<input type="checkbox"/> Hawaii	<u>38-39</u>
<input type="checkbox"/> Idaho	
<input type="checkbox"/> Illinois	
<input type="checkbox"/> Indiana	<u>40-41</u>
<input type="checkbox"/> Iowa	
<input type="checkbox"/> Kansas	
<input type="checkbox"/> Kentucky	<u>42-43</u>
<input type="checkbox"/> Louisiana	
<input type="checkbox"/> Maine	
<input type="checkbox"/> Maryland	
<input type="checkbox"/> Massachusetts	
<input type="checkbox"/> Michigan	
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<input type="checkbox"/> Vermont	
<input type="checkbox"/> Virginia	
<input type="checkbox"/> Washington	
<input type="checkbox"/> West Virginia	
<input type="checkbox"/> Wisconsin	
<input type="checkbox"/> Wyoming	

Do you teach persons other than full time homemakers during a year?

_____yes _____no

If yes, which groups?

- _____a. men
- _____b. women (not full time homemakers)
- _____c. children under 16 years of age

44

45

46

47

Do you include the following in your teaching program for the newly blinded, full time, homemakers?

Instructions:

For the following section please place beside the statement in the blank provided:

- 1 if the item is taught often
- 2 if the item is seldom taught
- 3 if the item is never taught

Food preparation techniques of:
_____frying goods on top of stove
_____broiling meat
_____cooking with pressure pans
_____baking one dish meals
_____roasting meat

Use of kitchen equipment:
_____adapted utensils (made especially for blind)
_____electric mixer on stand
_____hand held electric mixer
_____blender
_____electric frying pans

Use of convenience foods:
_____frozen meals
_____cake and other mixes
_____bake and serve bread

Food serving:
_____setting and arranging the table
_____arranging the food on the plate in a pattern

Dishwashing:

- arranging and sorting dishes in preparation
- use of automatic dishwasher
- techniques of hand dishwashing

Basic nutrition:

- 4 food groups
- conserving nutrients in cooking

Planning meals that are:

- easy or quick to fix
- nutritious
- attractive for others

Selecting food in the grocery store:

- determining size and quality
- adding up the cost as shopping
- how to use sighted help in the store
- best buys for the money

Food storage:

- sizes of cans
- wrapping frozen foods
- arranging food storage for identification
- marking canned and packaged items
- identifying fresh foods

Management in planning and scheduling daily household work.

Management of personal records:

- check writing
- hand writing
- keeping personal financial records

Mobility:

- pre-cane travel within the home
- picking up dropped items
- using sensory cues for traveling
- arranging furniture for safety and mobility
- traveling in yard and neighborhood
- more extensive travel
- becoming acquainted with the various work areas in the home
 - kitchen
 - dining area
 - laundry area

Use of braille devices on:

- ovens
- washing machines
- thermostats
- small electric appliances

Coding

1-3

4-5

Identification of clothing:

- clothing colors
- clothing for different members of the family

Clothing selection:

- costume colors suited to the individual
- costume styles suited to the individual

Grooming:

- care of hands and nails
- choice of hair style that is flattering
- washing and setting hair on rollers
- skin care and make up

Sewing with the electric machine:

- threading the electric machine
- applying zippers
- making buttonholes
- darning on the electric machine

Hand sewing:

- hems
- buttons

Use of sewing aids:

- needle threaders
- self-threading needles
- thimbles
- scissors
- seam guides
- marked measures and marked hem gauge

Mending of:

- socks
- tears
- seams
- hems

- Cutting out costume from an adapted pattern.

Use of storage spaces in the home more efficiently:

- clothes closets
- linen closets
- drawers
- kitchen cabinets

Clothing care:

- ironing of;
 - flat items
 - gathers and pleats
 - shirts
- gauging heat on iron

washing by;

_____ hand

_____ wringer washer

_____ automatic washer

_____ measuring of detergents

_____ marking detergents

_____ drying clothes;

_____ handing on the line

_____ use of automatic dryer

Use of vacuum cleaner:

_____ upright

_____ tank tube

_____ Making the bed with fresh linens.

Cleaning flat surfaces:

_____ table tops

_____ counter tops

_____ floors

_____ Cleaning household appliances.

_____ Inspecting household appliances.

Child care:

_____ feeding from the bottle

_____ feeding from the spoon

_____ preparation of the formula

_____ changing of a diaper

_____ bathing

_____ trimming baby's nails

_____ determining rashes and injury

_____ dressing the child

_____ clearing away and picking up toys

_____ play time activities

Coding

1-3

4-5

Informing clients about services that are available to them

_____ local hair and clothing stylists

_____ local Cooperative Extension Home Economics

_____ local recreation areas

_____ local clients and physical care centers

_____ American Foundation for the Blind

_____ Federal Income Tax compensation

_____ braille library services

_____ braille translating resources

_____ Library of Congress "talking books"

Safety in working with electrical equipment:

- _____ replacing fuses
- _____ using electrical outlets
- _____ replacing bulbs
- _____ repairing electrical plugs

Safety in the home and kitchen:

- _____ storage of sharp utensils and knives
- _____ use of matches
- _____ carrying hot foods
- _____ omission of scatter rugs
- _____ not waxing floors
- _____ traveling with a baby
- _____ pouring hot and cold items

Ways to simplify work:

- _____ analyzing the jobs to be done;
 - _____ it is really necessary
 - _____ where could it be done best
 - _____ wise use of sighted help
- _____ arranging the work place;
 - _____ adjusting the working heights so that they are comfortable and easy to reach
 - _____ selecting the right kinds of tools and equipment to do the job
 - _____ arranging tools and equipment so that they are easy to reach or get to
- _____ use of the body properly;
 - _____ good posture to prevent fatigue
 - _____ sliding heavy things instead of lifting them
- _____ use of convenience items;
 - _____ paper plates and towels
 - _____ disposable linens for garbage containers
 - _____ lazy susans and pull-out drawers
- _____ changing the order in which tasks are to be done;
 - _____ get all of the things ready before starting the job
 - _____ combining jobs when convenient and possible

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