

DOCUMENT RESUME

ED 391 277

EC 304 526

AUTHOR Graham, Terry; Bosarge, Zackie
 TITLE Alabama 622 Project Services to Deaf-Blind Children.
 Final Report.
 INSTITUTION Alabama Inst. for Deaf and Blind, Talladega.
 SPONS AGENCY Special Education Programs (ED/OSERS), Washington,
 DC.
 PUB DATE 31 Dec 95
 CONTRACT H025A50021
 NOTE 52p.; Colored charts may not reproduce well.
 PUB TYPE Reports - Descriptive (141)

EDRS PRICE MF01/PC03 Plus Postage.
 DESCRIPTORS *Deaf Blind; Delivery Systems; Disability
 Identification; Early Intervention; Elementary
 Secondary Education; Infants; Inservice Education;
 Parent Education; Preschool Education; *State
 Programs; *Technical Assistance; Toddlers;
 Transitional Programs
 IDENTIFIERS *Alabama

ABSTRACT

This report describes activities and accomplishments of a 3-year federally supported project to improve services to children (ages 0-21) with deaf-blindness in Alabama. The project utilized a service delivery model based on provision of state, regional, local, and individual technical assistance to service providers and families through three strands: infant and toddler services, ages 0 through 2; school age services, ages 3 through 21; and transition services, ages 14 through 21. Activities were designed to assure that public and private agencies, institutions, and organizations provide more effective early intervention, educational, transitional, vocational, early identification, and related services to children with deaf-blindness. The project provided preservice and inservice training activities, individual and group consultation services, and statewide workshops and conferences where exemplary and effective strategies to work with the targeted population in the home environment, center-based settings, and the community were demonstrated. The project also provided technical assistance to families and service providers. Individual sections of the report provide information on the project's purpose, goals, and objectives; conceptual framework; accomplishments, outcomes, and contributions; problems and their resolutions; evaluation findings; and impact. An appendix provides supporting information on the project's summer learning institute, the registry data report, the interagency agreement, and coalition/advisory board members. (DB)

 * Reproductions supplied by EDRS are the best that can be made *
 * from the original document. *

This document has been reproduced as received from the person or organization originating it
 Minor changes have been made to improve reproduction quality

• Points of view or opinions stated in this document do not necessarily represent official OERI position or policy

ED 391 277

Final Report

ALABAMA 622 PROJECT SERVICES TO DEAF-BLIND CHILDREN

December 31, 1995
Project period: October 1, 1992-September 30, 1995

U.S. Department of Education
Severely Handicapped Branch
CFDA 84.025A
Project #:HO25A50021

Dr. Terry Graham, Project Administrator

Mrs. Zackie Bosarge, Project Director

Alabama Institute for Deaf and Blind
Talladega, Alabama

BEST COPY AVAILABLE

2

EC 304526

I. ABSTRACT

The Alabama 1992-93 project for providing services to the persons with deaf-blindness, ages 0-21, was a statewide service delivery program that provided both centralized and community program options to infants, toddlers, children and youth with vision, hearing, or dual sensory impairments. The purpose of this proposal was to address the special needs in Alabama of this population and their families through a statewide technical assistance program to agencies and other concerned agents serving or attempting to serve the children with deaf-blindness in this state. The activities of this proposal were designed to assure that public and private agencies, institutions, and organizations which are providing early intervention, educational, transitional, vocational, early identification, and related services to children with deaf-blindness and their families were more effectively 1) providing special education, etc. to children whom they are obligated to serve; 2) were providing preservice and/or inservice training to paraprofessionals, professionals, or related services personnel preparing to serve or serving children with deaf-blindness; 3) were providing replications of successful, innovative approaches; 4) were providing activities to facilitate parental involvement; 5) were providing consultative and counseling services to professionals, paraprofessionals, parents; and 6) were promoting the integration of children with deaf-blindness with children with other disabilities and without disabilities.

This project utilized a service delivery model based on provision of state, regional, local and individual technical assistance to service providers and families through specific strands. These strands were:

- Strand I: Ages 0 through two, infant and toddler services,
- Strand II: Ages three through 21, school age services, and
- Strand III: Ages 14 through 21, transition services

This service delivery model allowed technical assistance activities to overlap in sequence and function where strand commonalties occur so that fragmentation of programming was diminished and a continuum of lifelong planning occurred.

Goals and objectives of the proposal were met by preservice and inservice training activities, individual and group consultation services, and statewide workshops and conferences where exemplary and effective strategies to work with the targeted population in the home environment, in center-based settings, and within the community were demonstrated.

The project provided technical assistance to the families and service providers of the children and youth listed on the deaf-blind registry, as well as to newly identified children, families, and service agents.

All project goals were based on previous results, research and evaluation findings, or other information related to the problems and issues of appropriate service provision and technical assistance to consumers and other agents concerned with deaf-blindness. Products of the project promoted the adaptation and usefulness to others in conducting related or similar projects and activities. Implementation and completion of project activities significantly and positively impacted the unique special needs of the targeted population, infants, toddlers, children, and youth with deaf-blindness and their families in Alabama.

TABLE OF CONTENTS

I. TITLE PAGE

II. ABSTRACT1

III. TABLE OF CONTENTS2

IV. PURPOSE, GOALS AND OBJECTIVES3

V. CONCEPTUAL FRAMEWORK4

VI. DESCRIPTIONS OF THE PROJECT'S ACCOMPLISHMENTS,
OUTCOMES, AND CONTRIBUTIONS4

VII. PROBLEMS/RESOLUTIONS6

VIII. EVALUATION FINDINGS7

IX. PROJECT IMPACT8

X. REFERENCE STATEMENT12

XI. ASSURANCE STATEMENT12

XII. SUPPORTING INFORMATION Appendix

IV-PURPOSE, GOALS, AND OBJECTIVES

The purpose/goal of this project was to ensure that service providers and families of deaf-blind children and youth were knowledgeable of existing service options; to design and implement effective education and transition services, and to act as facilitators for developing services to meet unmet needs of the targeted population.

Goals and objectives were achieved through preservice training, direct consultative services, statewide workshops and conferences, and parent workshops and support activities .

Objective: Identify and track children and youth with deaf-blindness.

Two hundred and seventy five children, ages 0-22 were reported on the Alabama Deaf-Blind Census by the Spring of 1995. This was better than a 100% increase since 1992 when the project started with 163 children statewide. Tracking and updating with service providers and family groups throughout the state will continue in the 93-99 project.

Objective: Provide training and consultation for service providers, families .

As of the Spring of 1995, a total of 327 professionals, 315 paraprofessionals, and 5,628 consumers and family members participated in the activities described below:

1-Pre-service training-A Summer Learning Institute for professionals, parents, and children was conducted each summer of the project life. In cooperation with the University of Alabama in Birmingham (UAB) credit courses in visual impairments , multiple disabilities (including deaf-blindness), and communication were provided

2-Parent activities/training-A Parent Congress Conference was held each Summer/Fall where parent delegates from every county were able to develop a support system that networked the entire state allowing them access to resources and service agents, and to organize group interaction for accomplishing goals and improved services. Parents also had access to all pre and post-service training activities promoting parent/professional partnerships and involvement/interaction.

3-Dissemination activities -Dissemination of project products and information was accomplished via a number of channels and avenues including: 1) project brochures provided to LEA's, and other state and private agencies serving children with deaf-blindness; 2) best practice materials available from training activities and the project's resource library for assessing and working with infants, young children, and youth with deaf-blindness; 3) identification information disseminated to appropriate sources for determining numbers, location, and needs of children in the state with dual sensory impairments; 4) parent and project newsletters offering information about resources, networking, and training events being offered by the project; and, 5) quarterly reports made to the project's advisory board made up of representatives of all major state service agencies and the state parents' organization specific to deaf-blindness.

4-Evaluation activities-The project's accomplishments and impact was measured by a number of specific activities including quarterly reports submitted to the Project Advisory Board, evaluation information submitted on each technical assistance activity by presenter and consumer, data analysis of registry information, TA evaluations, information and referral requests, and outcomes of student/parent progress and change

V-CONCEPTUAL FRAMEWORK

Alabama's Services to Children who are Deaf-Blind was designed to develop information, resources, and exemplary services to affect quality education for children who are deaf-blind to enable them to lead productive adult lives.

The conceptual framework of the project was based on the following goals, components, and activities of the project:

- 1- The development of a statewide understanding of the definition of "deaf-blindness" to ensure appropriate and complete identification of children in the state eligible for the registry and project services.
- 2- The development of training and technical assistance activities that will demonstrate best practices and offer follow-up user specific assistance to service providers and families involved with children with deaf-blindness.
- 3- Development of collaborative activities with colleges and universities so that pre-service training is available and appropriate for newly trained and retrained professionals.
- 4- Development of continuing education/in-service activities that are responsive to the individual and group needs of professionals, paraprofessionals, and families relative to involvement with the child with deaf-blindness.
- 5- Development of parent/professional partnerships to ensure an improved and dynamic quality of education, vocational and community living preparation, and local community support exists for the targeted population as needed.

VI-ACCOMPLISHMENTS/OUTCOMES/CONTRIBUTIONS

Activities of the project have resulted in the provision of the following services to families and providers for children and youth in Alabama who are deaf-blind:

Increased Parent/Family Involvement - An integral goal of the project was to increase the quality of education to children with deaf-blindness through developing strong parent/professional relationships. Parent participants in project activities became involved in the assessment process, were significant members of planning teams, became involved in educational strategies to promote the child's development, and became committed to long-term involvement and advocacy for their child. Professionals began to value parent relationships as having positive impact on the child's learning process. The family became the primary source of information about the child.

Improved and increased Identification, including both diagnosis and educational evaluation - Both parent and service provider participants in project activities became knowledgeable of the special needs of the targeted population and how to access or develop resources to address assessment and training needs. Infants, toddlers,

children, and youth with deaf-blindness, ages 0-21 were identified in all but 10 of the 67 counties of the state, and referred for integration into the educational system to receive appropriate services.

Improved programs for adjustment, education, transition, and orientation for children with deaf-blindness - Service delivery options and opportunities became more accessible in schools and in community environments as a result of community awareness activities, expanded parent and service provider training, and improved service delivery by the use of best practice information.

Increased services to the families - Families/parents were informed and empowered to seek out resources and advocate for their needs and the needs of the child with deaf-blindness in the community. Families had access to trained peer counselors to assist them in adjusting, coping, and planning for the future needs of their child. Parents were given opportunities to network and support each other as advocates and support workers.

Coordinated and comprehensive plans for each child - Emphasis on interagency collaboration and cooperative planning, as well as recognition of the strong parent role in educating the child with deaf-blindness, led to better, more comprehensive, and realistic goal setting.

More effective special education - Qualified/trained personnel utilized best practices and strategies to ensure that children with deaf-blindness received age-appropriate experiences with non disabled peers. These improved services promoted ultimate child functioning in his/her environment, and led to improved opportunities for adult lifestyles for the targeted population.

More effective preservice and inservice training was provided -Professionals, paraprofessionals, parents, and agencies serving, or preparing to serve the targeted population, received training and technical assistance to enable them to more effectively provide comprehensive services.

Personnel were trained to replicate and expand use of successful innovative approaches - All technical assistance activities were centered around a self-perpetuating concept so that recipients of training could become trainers. This "trickle down" effect was

a critical part of ensuring that rural and economically impoverished state areas had access to best practices and strategies for service delivery to the child with deaf-blindness.

Parents were involved in project activities - Parents were included in technical assistance and training provided to teachers and service providers. Parents were used as participants in planning, as peer counselors, as workshop presenters, as resource and networking contacts, and as community placement agents. This utilization of parents in these many roles ensured lifelong planning, interagency collaboration, increased committed manpower in both rural and urban environments.

Children with deaf-blindness were included/integrated into environments with children with other disabilities and with children without disabilities - Because of technical assistance by the project to a variety of service agents and environments, community attitudinal changes increased the options and opportunities available for educational and social integration.

VII-PROBLEMS/RESOLUTIONS:

The project had two major obstacles to overcome in accomplishing goals and objectives in a timely and effective manner:

- 1) Identification of the registry population.
- 2) Rural access to training and assistance for families and service providers.

Alabama is classified as a rural state and is considered minimally in compliance for meeting the needs of its special children especially in rural areas. Addressing, or even recognizing the needs of a low incidence population is not necessarily a high priority in its state educational or personnel preparation plan.

While the project has not eliminated the above named problems, collaborative endeavors with the State Department of Education(SDE), other major service providers, and the state parents' organization, ADBMA, have initiated systems to reach resolution in these areas through the following activities:

*Working with the SDE in their state and regional in-service training for LEAs to ensure understanding of registry definition and benefits of access to project resources.

*Utilizing the project's advisory board made up of major service providers to disseminate information about the project's activities and the need/benefits of registry enrollment.

**Training trainers(professionals and parents) from all regions of the state to be able to locally assist programs and families on an on-going basis-this has been

the single most effective method of rural access provided by the project during its life

VII-RESEARCH OR EVALUATION FINDINGS:

The objectives of the project responded well to the needs of children with deaf-blindness in Alabama, their parents, and service providers. At the end of each project year, as part of a comprehensive internal self-examination process that was undertaken by the project, a survey using a sampling of its constituency was completed. Approximately twenty percent of all families, TA recipients and service providers in the state were polled. The survey questions were designed to get a broad overview of the project's responsiveness, effectiveness, and the appropriateness of services offered, as well as to determine improvements needed. Also, as part of its internal review, throughout the program year the project collected information to establish or modify services to best meet the needs of deaf-blind children and youth, their families, and service providers. An analysis and interpretation of this data collected indicates the following results:

-The average number of children with deaf-blindness in Alabama in any age group is 14%

-interpretation-services will be needed on a regular basis for the next 20 years; no age group has an influx of deaf-blind citizens; no specific cause of deaf-blindness as seen with rubella.

-The school districts report students with deaf-blindness primarily in the category of Multidisabled.

-interpretation-TA should be concentrated on the multidisabled classes and staff to reach the most students with deaf-blindness; teachers recruited for the Summer Learning Institute should come primarily from the multidisabled, hard-of-hearing, and deaf classrooms in local communities.

-The majority of multidisabled children on the registry have non-conclusive vision and hearing test results.

-interpretation-school systems need TA relative to evaluation of sensory losses, auditory and vision training, and hearing and vision aid assistance.

-The majority of Alabama's registry children are being educated in the educational setting of a public school.

-interpretation- few children are receiving services specific to the dual sensory disability.

-The majority of the registry reported children reside in their home community.

-interpretation-TA should include assistance to parents, siblings, and community agents.

-The majority of children reported on the registry did not indicate cause of disability.

interpretation-there is a need for parents, health-care professionals, and educators to receive training in identifying the causes of deaf-blindness to assist in prognosis for future needs.

IX-PROJECT IMPACT:

The priorities for this project were established in response to identified state needs and supported by current and definitive research relative to strategies and techniques for more effective service delivery, family support, training, technical assistance, and interagency collaboration. The project objectives included a large menu of services to families including counseling, home intervention, training, and family learning experiences through both group instruction and individualized family service plans.

The services provided in the grant were not direct services but were designed to empower the receivers to meet their own needs. This training supported the role of the parent as an advocate, leader, decision maker, parent/professional partner, and case manager of a life-long plan for the child with deaf-blindness. The project activities resulted in:

- 1) enhanced development of infants and toddlers with or suspected of having deaf-blindness so as to minimize the risk of developmental delays;
- 2) reduced educational costs by minimizing costs of future special education services for infants and toddlers by providing more specific and realistic life-planning at an early and formative age;
- 3) increased integration of the child with deaf-blindness into least restrictive environments in community-based placements;
- 4) enhanced capacity of the families to meet the special needs of their children with deaf-blindness .

Providing responsive services to children with deaf-blindness, their families, and service providers in Alabama necessitated consideration of a number of factors which were particularly characteristic of the state. These included:

A large geographic area with numerous rural school districts - The state is predominantly rural except for a few major urban centers scattered throughout the state. Many of the smaller, especially rural school districts do not have trained staff or sufficient resources to provide optimum programs for children with deaf-blindness. In many of these areas, infant-preschool services as well are very limited. Through a variety

of technical assistance options and training events sponsored by the project, service providers in such areas received the support and training needed to best accommodate children with deaf-blindness in their home communities.

Frequently, families and service providers in rural areas feel isolated from their peers. Through such activities as the annual Parent Congress for parents the Summer Learning Institute, the Family Day-care Training Program, and various local workshops and meetings, the project provided opportunities for families of these children, and services providers to meet and learn from each other.

Limited training programs - The special education preservice training programs in the state are primarily generic in nature. There are three universities that have programs in hearing impairments; and one university (University of Alabama at Birmingham) with a program in vision impairments with training in dual sensory impairments. Those colleges and universities which do have programs in severe disabilities do not generally address deaf-blindness adequately. Thus, the preservice and inservice opportunities provided by the project were essential to the development of expertise in deaf-blindness in the state.

Response to Other Needs - In addition to the training and educational state-specific needs, the project recognized the critical importance of support to families, the dissemination of information, and interagency linkages when quality service is its intent. The project included the following activities to address each of these factors:

The Alabama project included a data base for information, referral, resource directory, and research related to deaf blind citizens. The data was used to identify/research/ validate service needs, resources, and best practices/strategies to develop appropriate and improved planning for future educational and community living for children with deaf-blindness in Alabama.

The project built a system of cooperation and coordination for the delivery of services with other related state agencies. The interagency referral process resulted in a more effective and timely delivery of needed services. As staff from the related state agencies received technical assistance from the project, they became more familiar with the needs of this population and developed strategies for serving them more effectively.

The project maintained and utilized input from a project advisory board. Through the advisory board members, families and service providers had an avenue to participate in the planning and monitoring of services to children with deaf-blindness ensuring that the project activities were implemented in an effective and appropriate manner. This board served as an outside evaluation team for the project.

Families and service providers were provided with resource information and reference materials related to deaf-blindness. Through the project, families and service providers had timely access to current resources at little or no cost.

The project provided parents with a supportive and informational link with other parents as well as gave families opportunities to learn from one another. The parent initiated activities also promoted parents' self-advocacy skills. Feedback to the project from parent representatives (parent contacts) from different technical assistance sites assisted the project in developing or modifying services to be more responsive to family needs. An annual statewide Parent Conference was sponsored by the project.

The project utilized technology to produce materials, protocols, curricula, etc. for parent and professional technical assistance, presentation, student needs and other user specific activities and programs. This expanded accessibility and state-of-the-art knowledge to rural and economically deprived regions and provided more readily available support and training.

State education agencies have developed a computerized resource directory of services targeted for children with disabilities, ages 0-5. The directory lists public and private early intervention services, research and demonstration projects, professionals, and other groups providing assistance to these children and their families. The information in the state's computerized resource directory was supplemented and expanded by resource information specific to the child with dual sensory impairment.

Service providers throughout the state had access to training opportunities to provide a quality program which supports the optimum development of the student or client with deaf-blindness in the least restrictive environment.

The project provided support to families of children with deaf-blindness so that they are better able to cope appropriately with the growth and development of this child with severe disabilities in the family. A major focus of the grant was to train and utilize parents as peer counselors, service advocates, job coaches, and competent service coordinators of their child's life-long plan.

The project provided preservice and inservice training and consultation services to programs involved in personnel preparation of instructional personnel who will be working with, or preparing to work with, the child with deaf-blindness - The activities of this objective ensured that professionals and paraprofessionals had access to credit and non-credit training on preservice and inservice levels relative to the needs of the targeted population. Parents were included in all TA activities.

Due to the identified gaps, the project focused upon improving education and related support services through a statewide technical assistance network. The technical assistance network utilized existing resources and support from various agencies within the state, as well as regional and national programs. Through collaboration and interfacement with statewide services provided by SDE/Division of Special Education, Vocational Rehabilitation Services, the statewide parents group-ADBMA, the Alabama Part H project, and the Alabama Deaf/Blind/Multidisable Coalition, the project improved the quality of services to persons who are deaf-blind, and their families.

Technical assistance and training included early identification and evaluation, communication, functional education, related services, job coaching and community integration, and transition. Additional technical assistance services were added to the menu annually following analysis of annual needs assessment surveys.

X-REFERENCE:

Further information about project activities can Be found in reports sent to ERIC, CEC, Alabama Deaf-Blind Coalition Advisory, quarterly reports, project administrator reports, and information sent to TRACES.

XI- FINAL REPORT ASSURANCE:

The final report was submitted to ERIC on 12/28/95 in compliance with monitoring and review practices pertaining to the 622 project's completion requirements.

SUPPORTING INFORMATION

Section I -
Summer Learning Institute

Section II -
VI-C Registry Data Report

Section III -
Deaf-Blind Coalition Interagency Agreement
Deaf-Blind Coalition/Advisory Board Members

SLI

- 1 - Classes
- 2 - Day Care

History of UAB Teacher Training in Vision

During the academic years of 1990 through 1995, a summer learning institute and the week-end college plans were implemented with 15 to 20 students and 10 to 15 parents enrolled in each of the graduate sensory impairments courses each year. These courses were funded with collaboration of UAB, Alabama State Department of Education, 307.11 deaf-blind project, Alabama Institute for the Deaf and Blind (School for the Blind and the Helen Keller School) and a grant from the Conrad N. Hilton Foundation through Perkins School for the Blind. By combining professionals, recruitment procedures, small pools of funds, and in-kind services such as housing, facilities and audio visuals, graduate courses and family education were provided for students and parents.

It was determined by participant evaluations that the model of weekend and summer courses is conducive to completion of graduate degrees since the convenience of housing, food, and less weekly travel for class attendance was involved. This was especially beneficial for those teachers who were presently teaching without proper certification and for parents who could not leave jobs or children each week.

Student and parent satisfaction surveys have indicated that students prefer:

- 1) summer concentrated courses with access to the children and families for clinical experiences,
- 2) week-end classes with two to three weeks between classes for Braille and mobility,
- 3) anatomy classes weekly with clinical hours in the classroom and clinic for reinforcement of the class instruction.
- 4) practicum experiences in many settings for a variety of observations and class planning, and
- 5) clinical hours throughout the coursework to design an interest area for each student to concentrate on practicum hours.

Parents have also suggested the development of family ecological surveys, communication materials that are portable and teacher-made to be used at home, and resource directories.

The objectives of the model involve training in visual impairments, with opportunities for electives in sensory impairments. The competencies for the course of study are based on accepted practice of Spungin and Ferrell's "The Role and Function of the Teacher of the Visually Handicapped" (1992). Teacher roles are categorized as specialized because of blindness expertise in:

1. assessment and evaluation
2. learning environment strategies
3. unique curriculum strategies
4. guidance and counseling
5. administration and supervision
6. school and community relations (31-34)

The electives in deaf-blind sensory impairments education correspond to those taught at colleges such as Boston College, Texas Tech, and other universities receiving Hilton-Perkins funding for visual impairments and sensory impairments. The courses include augmentative communication and technology, basic sign language, assessment, and anatomy of the hearing mechanism. From data received through the 1995 Alabama 307.11 Deaf-blind project, it is estimated that training for students and parents will be needed for the next twenty years.

Since 1981, 151 students (an average of 11 students per year) have been enrolled in the visual impairments classes with:

- 84 students receiving graduate degrees,
- 55 students receiving teacher certificate endorsements
- 12 students receiving continuing education credit in visual impairments.

Of the students enrolled in course work:

- 35 are currently in public school settings,
- 7 direct regional services for early intervention,
- 1 is the consultant for the state resource center for the visually impaired,
- 1 is contract state consultant for the visually impaired
- 2 are Alabama Child Find early interventionists
- 49 are employed by Alabama Institute for the Deaf and Blind (31-School for the Blind, 16-Helen Keller School, 5 vocational facility)
- 2 are low vision specialists in ophthalmology/optometry
- 23 are employed in rehabilitation for the blind.
- 1 occupational therapy department low vision rehabilitation

Partnership

June 26-30, 1995
July 10-14, 1995
July 17-21, 1995

Summer Institute Training
for
Parents, Professionals
and Children
in visual impairments,
multiply disabled, deaf-blind
and communications

To:

Liz Moore Low Vision Center
50 Medical Park East Drive
Birmingham, AL 35235

Partnership Summer Institute Training for Parents, Professionals and Children

- I am interested in parent/non-credit training.
 I am interested in graduate credit courses.
 I am interested in financial assistance.*

Name: _____ Social Security No.: _____

Address: _____ Telephone (Home): _____

Zip: _____ Telephone (Work): _____

*Limited stipends are available for parents and professionals. Please return by May 15, 1995.

Please cut along dotted line and return to Liz Moore Low Vision Center • 50 Medical Park East Drive • Birmingham, AL 35235

For more information, call (205) 838-3162.

Partnership

Summer Institute Training

for Parents in:

- Futures Planning
- Self-Esteem
- Audit of Graduate Courses
- Sign Language

for Professionals in:

- Nature and Needs of the Visually Impaired
- Methods and Materials of the Visually Impaired
- Advanced Topics in Special Education

Daycare Setting for:

- Training Activities
- Parent Assistance
- Graduate Practicum

Course Descriptions

Graduate credit is provided through the University of Alabama at Birmingham (UAB) School of Education, Department of Special Education. Admission to graduate school is required.

- **ECY 661 - Nature and Needs (3 hrs)**

July 10-14, 1995

Definitions and characteristics of blind, partially sighted, multiply impaired deaf-blind with educational considerations.

- **ECY 662 - Methods and Materials (3 hrs)**

July 17-21, 1995

Curriculum design and educational planning for the visually impaired, blind and deaf-blind.

- **ECY 689 - Advanced Topics in**

Special Education (3 hrs)

June 26-30, 1995

Group Seminar on communications and instructional techniques for the deaf-blind multiply handicapped. Held in Tuscaloosa during the State Department of Education Division of Special Education Services Summer Academy.

Parent Course Training

- **Self-Esteem/Coping Skills**

Coursework on maintaining self-esteem as a parent, a care giver, family member and individual.

- **Transition/Personal Futures**

Coursework for parents to view total life plan for family and child.

- **Communication Skills**

Various levels of sign language training for beginners and the more advanced.

Special Opportunities

- Parents and professionals will have opportunities to attend all classes.
- Parents and professionals will have a picnic each week to begin training sessions.
- All courses will be conducted at the Helen Keller School, Alabama Institute for the Deaf and Blind campus, in Talladega, Ala.
- Daycare center will be available for families participating in family training.
- Grand staffing finale for parents and professionals.

Funding and Support provided by:

- Hilton-Perkins National Program through a grant from the Conrad N. Hilton Foundation
- Alabama Institute for the Deaf and Blind, 307.11 Deaf-Blind Project
- University of Alabama at Birmingham, School of Education and Optometry
- Eastern Health System, Inc. Liz Moore Low Vision Center
- Alabama State Department of Education, Department of Special Education
- Alabama Deaf-Blind-Multihandicapped Association
- Very Special Arts-Alabama.

**ADBMA Day Care Center
Region IV
Talladega, Alabama**

**Telephone Numbers
Day - 761-3600
Night - 362-8320**

My child _____ will be attending the ADBMA day care program this summer, located on the Helen Keller School campus.

My child will attend Monday _____, Tuesday _____, Wednesday _____, Thursday _____, Friday _____. The hours are 8:00 A.M. - 5:00 P.M.

I understand I will provide, on a daily basis, a sack lunch for my child and transportation to and from day care.

I agree to pay \$20.00 per week (each Monday) for my child regardless of the days or hours he/she attends.

I will notify the school a full week in advance if my child will not be in attendance unless my child is ill.

I agree to pay the \$20.00 each week to keep the slot open for my child.

My child's doctor is _____. His office telephone number is _____. In case of an emergency, I give permission for my child to be treated by the above named doctor or local hospital if I cannot be contacted. I will be responsible for all medical bills.

I give my permission for my child to go on local field trips.

I give my permission for pictures to be taken of my child and for Channel 6 T.V. to do a story involving my child and the day care program.

I agree to send an extra change of clothes, bathing suit and a towel to be left at school for my child.

I give permission for _____ to pick up my child from school.

Signature _____ Date _____

Ecological Inventory for Deaf-blind Children and Their Families

Parent Survey

Note: This is the list of items developed by the parents for the ecological survey.

Questions that parents would like to know from the professionals or the referring agency are as listed below:

1. Are there tutors available for children in the home of parents who are blind? (Often the parents are blind and the children are sighted with other handicaps.)
2. Are there mentors for the parents through organizations or agencies so that parents can network?
3. Is there employment that is available for handicapped children? How can we work with the school to teach the children the skills needed for these types of jobs?
4. Is there hope of community housing for my child when he/she is of age?
5. How do I obtain more contact with the other parents and the teachers so that I know more about my child?
6. What does my child do at daycare, school, or employment all day?
7. What does the teacher like to do outside of school? How can I learn more about this person so that I "really know" the teacher?
8. Is there additional financial assistance for medical and other bills that is available?
9. Have the doctors done all there is to do? Is there somewhere I need to go to find more medical help?
10. Does the teacher know what I do with my child at night, weekends, and every minute that the child is not in school?
11. How can I help get community housing for the future so my child is taken care of in my old age?

12. I there any help for parents to be able to go to the grocery store, doctor, or just have time away?

13. Please let me learn everything I can and do not hold me back.

Note* Parents were very helpful in asking and developing these questions. The parents in the class setting also reinforced some of the items and stated that sometimes they are afraid to ask questions.

VI-C
REGISTRY DATA REPORT

**Alabama Deaf Blind Project
1995 Registry Data Analysis**

Prepared by
Mary Jean Sanspree, PhD
Research Professor and Director of Low Vision Services
University of Alabama at Birmingham
for VI-C Advisory Board of Review
December 1, 1995
Montgomery, Alabama

Page 1 Age of Deaf-blind students in Alabama

Analysis: In the age groups from 0 to 21 years, the average number of students per age group is 14%. Data is reported across the school districts in all age groups.

Interpretation: When analyzing the data for future services, the research indicates that services will be needed on a regular basis for the next twenty years. Also, no age group appears to have an influx of deaf-blind citizens, indicating no specific cause of deaf blindness as seen with rubella.

Page 2 Part B Primary Reported Handicaps

Analysis: School districts report students with deaf-blindness primarily in the category of Multidisabled. Deaf and Hard of Hearing appear to be the second most populated areas reported.

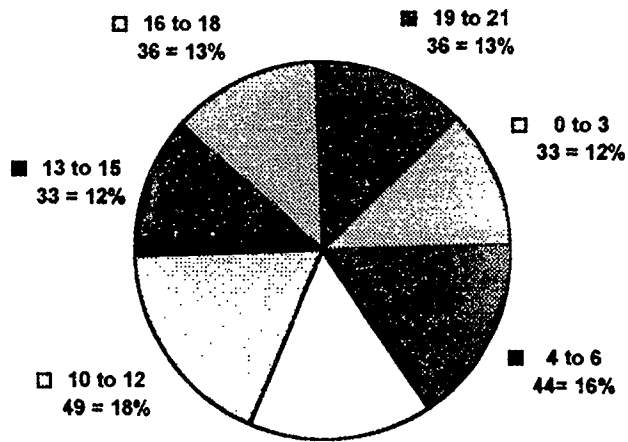
Interpretation: Technical assistance should be concentrated on the multidisabled classes and staff to reach the most students with deaf-blindness. Teachers recruited for graduate training should come from the multidisabled, hard of hearing, and deaf classes in the local communities.

Page 3 Part B Secondary Reported Handicaps

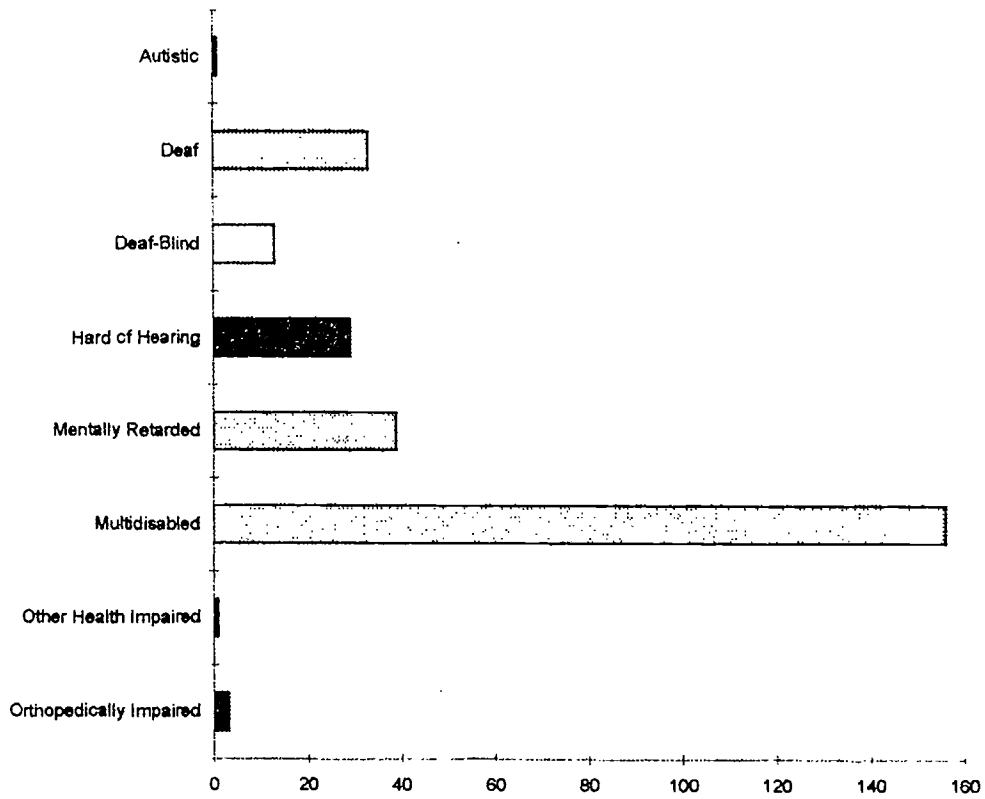
Analysis: School districts report students with mental retardation in the second handicapping condition area. Orthopedically Impaired and Other Health Impaired are the other secondary groups. Deaf-blind is not frequently used as a secondary condition for placement.

Interpretation: Technical assistance should also be concentrated on these classes and staff to reach the other students with deaf-blindness. Some of these students will be in the multidisabled classes with these secondary conditions a related services.

Age of deaf-blind students in Alabama N-275

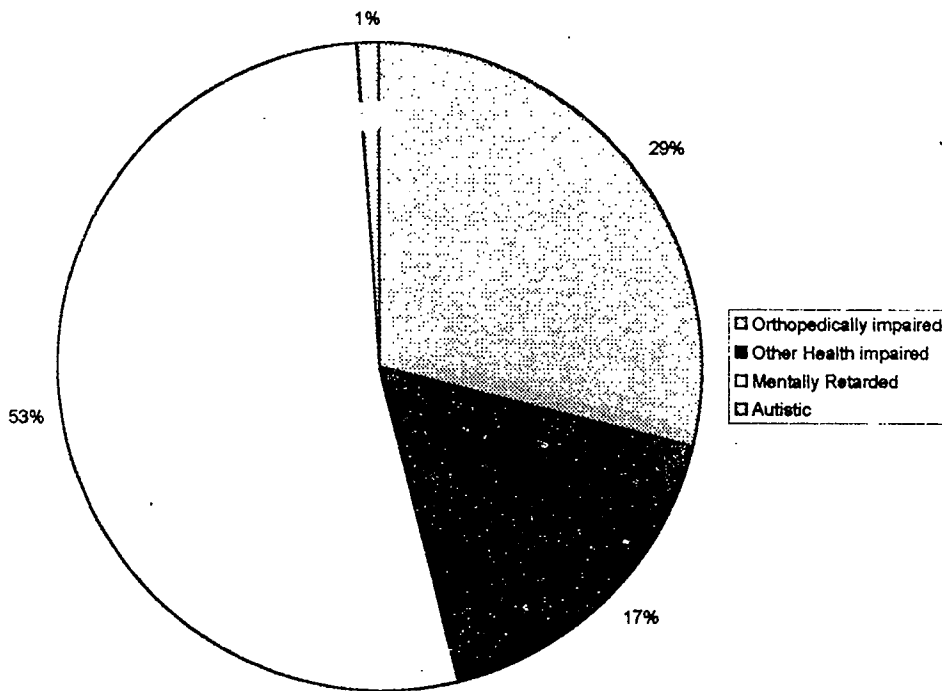


Primary Reported Handicaps N=275



Orthopedically Impaired = 3
Other Health Impaired = 1
Multidisabled = 156
Mentally Retarded = 39
Hard of Hearing = 29
Deaf-Blind = 13
Deaf = 33
Autistic = 1

Secondary Handicaps N=275



Orthopedically Impaired = 80
Other Health Impaired = 47
Mentally Retarded = 146
Autistic = 2

Multidisabled 0%
Hard of Hearing 0%
Deaf-Blind 0%
Deaf 0%
Other Disabilities 0%

**Alabama Deaf Blind Project
1995 Registry Data Analysis**

Page 4 Degree of Vision Loss

Analysis: School districts report that students are partially sighted and legally blind. Many students are reported with "test non-conclusive".

Interpretation: The students with visual assessments on record are not totally blind. This indicates that vision stimulation and some visual communication can be possible. The non-conclusive group indicates that school districts may need assistance with securing appropriate vision assessments for the students on the deaf-blind roll.

Page 5 Degree of Hearing Loss

Analysis: School districts report a large group of students with "mild" hearing losses. The moderate, severe, and profound losses make up the largest assessed group. Many students are reported with "test non-conclusive" and "not tested".

Interpretation: The students have significant hearing losses. This indicates that auditory training and hearing aid assistance should be a goal for technical assistance. The not tested and non-conclusive groups indicate that the school districts need assistance with evaluation of hearing losses.

Page 6 Educational Settings

Analysis: School districts report that students are placed in the public school setting in regular, separate, or resource room settings.

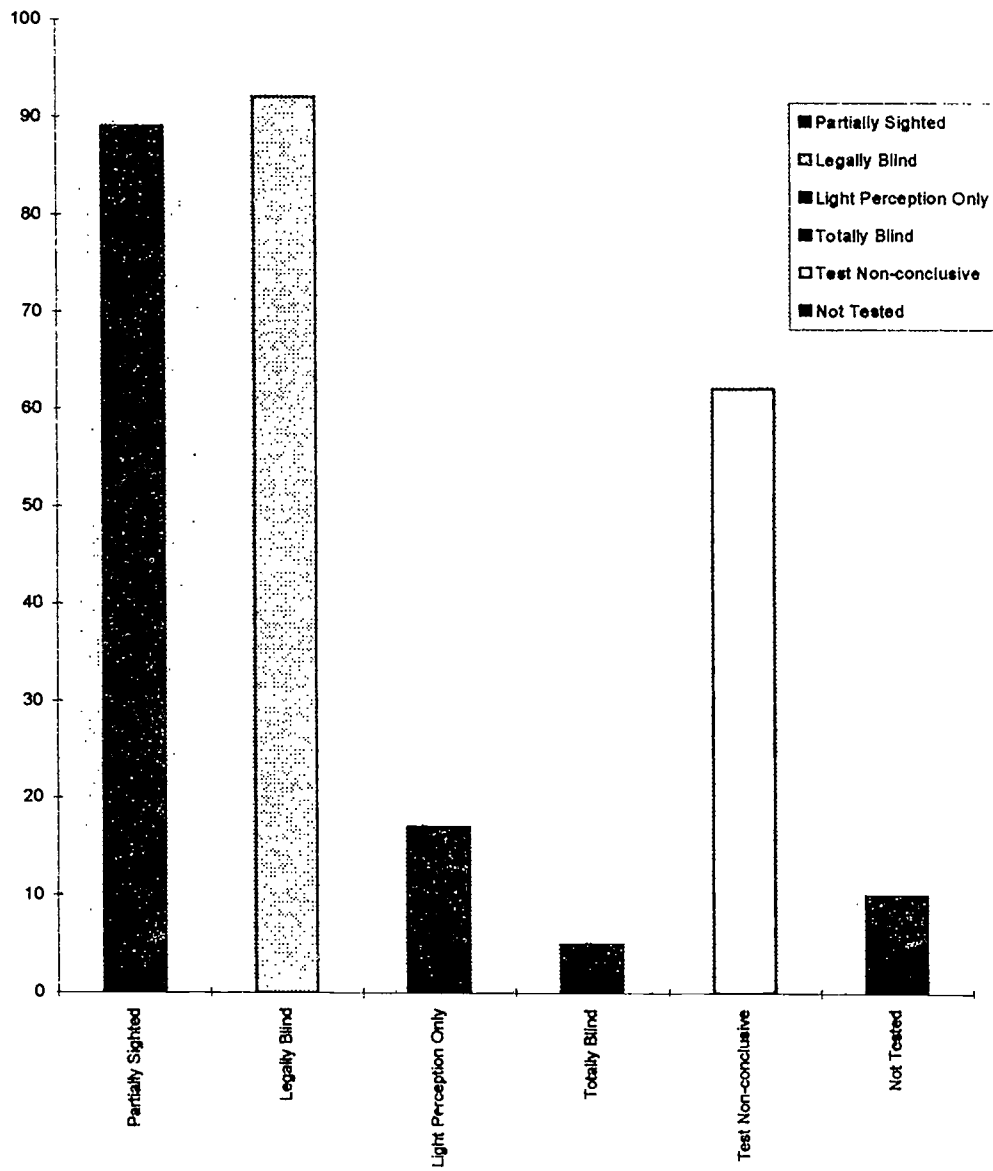
Interpretation: The data indicates that the majority of students are in the public school districts. It appears that many are served in the regular class or resource setting with support from special services. Some are separated and it may be assumed that the teacher is a teacher of the multidisabled (from previous data).

Page 7 Living Settings

Analysis: School districts report that students live in the home community with the birth or adoptive parents.

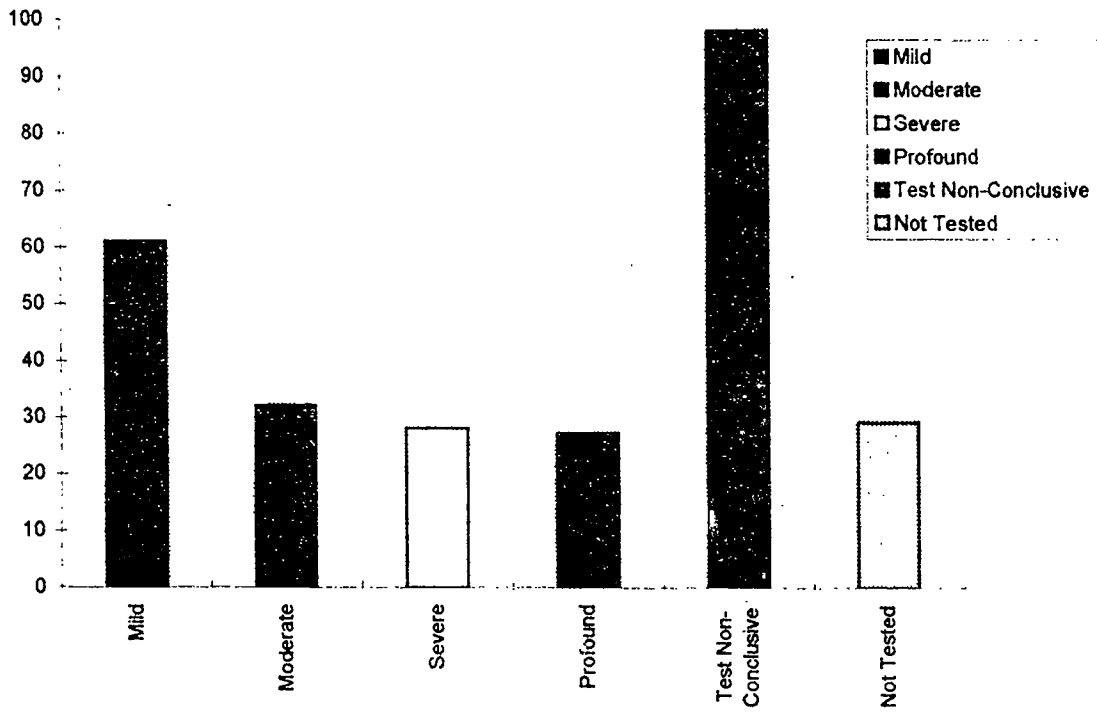
Interpretation: The data indicates that technical assistance should include the parents and siblings. Resources for information and referrals should include parent group information.

Degree of Vision Loss N=275



Partially Sighted = 89
Legally Blind = 92
Light Perception Only = 17
Totally Blind = 5
Test Non-conclusive = 62
Not Tested = 10

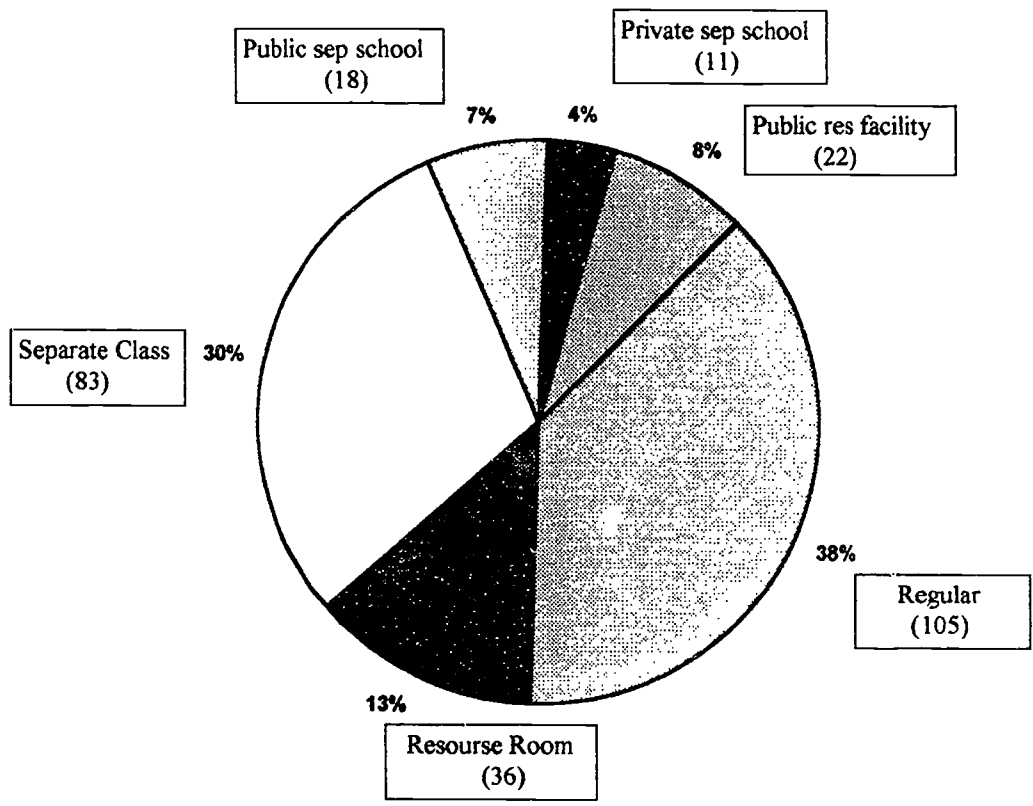
Degree of Hearing Loss N=275



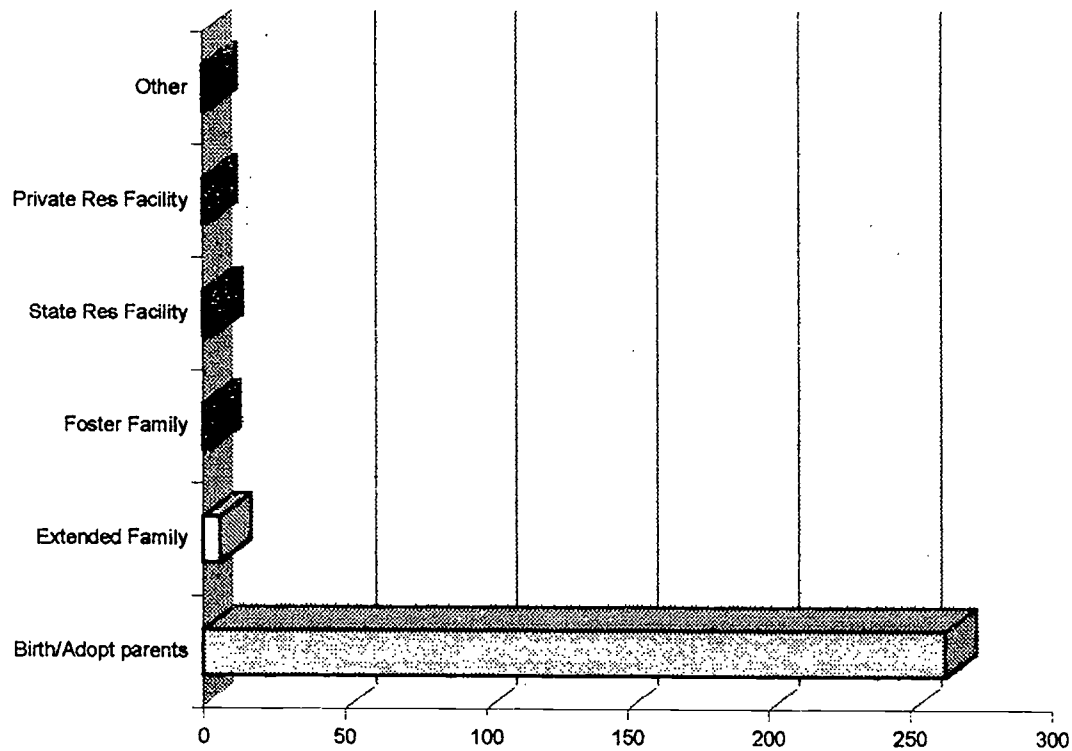
Mild = 61
Moderate = 32
Severe = 28
Profound = 27
Test Non-conclusive = 98
Not Tested = 29

Educational Settings N-275

Educational services
0%
Private res facility
0%



Living Settings N=275



Birth/Adopt Parents = 262
Extended Family = 6
Foster Family = 2
State Res Facility = 3
Private Res Facility = 1
Other = 1

**Alabama Deaf Blind Project
1995 Registry Data Analysis**

Page 8 Causes of Deaf Blindness

Analysis: The major cause of deaf-blindness in Alabama is listed as "other". Hydrocephaly, Downs, and Fetal Alcohol Syndrome are recognized as causes. Other causes reported did not reach above the 0% reportable level, but did form a reportable number as a group (labeled under CHARGE 0%).

Interpretation: The data indicates that causes for deaf-blindness are not recorded or reported to school districts. This indicates a need for parents, health care professionals, and educators to receive training in identifying causes for deaf-blindness. Identification of causes can assist with prognosis of future needs (such as Usher's syndrome, CHARGE, etc.).

Interpretation of 1995 Deaf Blind Registry Data

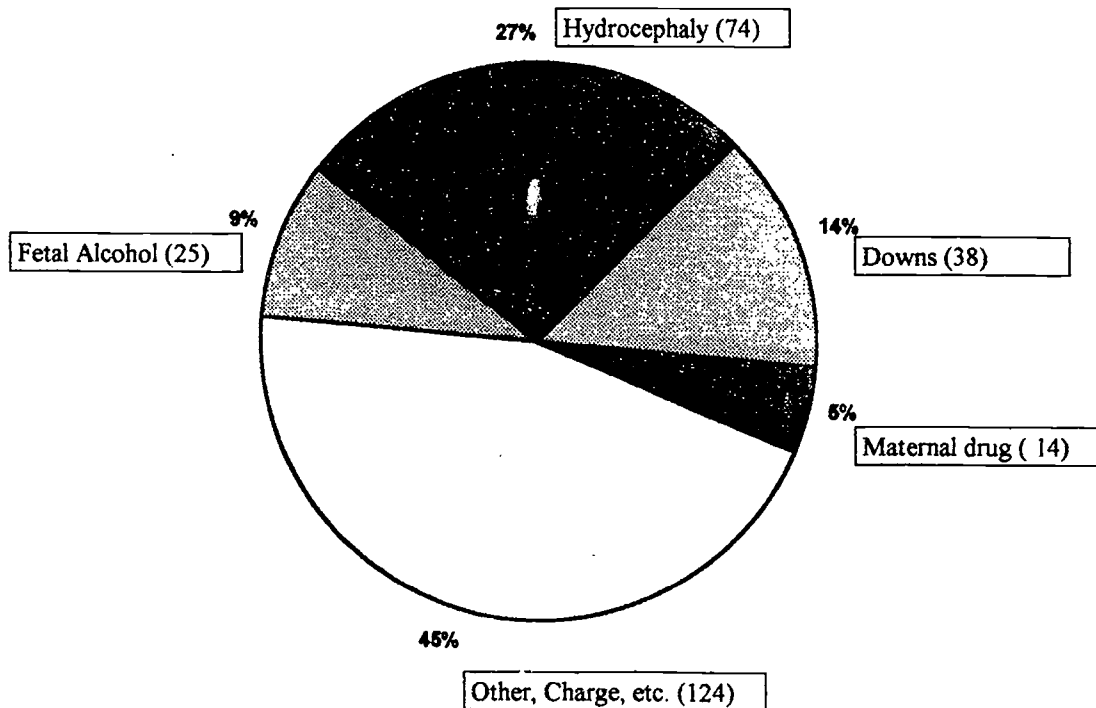
1. There is a need for deaf-blind services in Alabama for at least the next twenty years.
2. Technical assistance should be targeted for the multidisabled teachers and classes.
3. School districts need assistance with vision and hearing assessments.
4. Augmentative communication will be appropriate for most students since the reported hearing and vision losses are not "total".
5. Regular educators should be included in technical assistance and training since most students are placed in that setting.
6. Parents and families should be considered in information and referrals, technical assistance, and other activities since most students live with the parents.
7. Parents, health care professionals, and educators should be included in training to identify causes of deaf blindness.

* * * * *

The attached reports include the data sent to the U.S. Department of Education in March of 1995. Information is as follows:

- Numbers of citizens with deaf-blindness
- Services for children with deaf-blindness
- Reporting of training and other services
- Numbers of students by age groups
- 1995 deaf-blind population map

Causes of Deaf-blindness N = 275



March 24, 1995

TO: Alabama Deaf Blind Coalition

FROM: *MJS*
Mary Jean Sanspree, PhD
Research Professor and Director of Low Vision

RE: 1995 Deaf-blind registry

The March 15, 1995 Alabama Deaf Blind Registry Report to the U.S. Department of Education, Office of Special Education and Rehabilitative Services indicates that the reported numbers of citizens classified as deaf-blind are as follows:

0 - 3 years	26
4 - 16 years	176
17-21 (22) years	73
Total	275
<hr/>	
1994 Deaf-blind count	250
Number added 1995	27
Number deleted 1995	2
Total reported	275

The attached report of training activities and other services indicates state-wide growth in technical assistance. It is projected that training and other services numbers will increase in the 1996 fiscal year. Data collection will continue in order to measure grant activities.

OMB No. : 1820-0532
Exp. Date: 05/31/97

U.S. DEPARTMENT OF EDUCATION
OFFICE OF SPECIAL EDUCATION AND REHABILITATIVE SERVICES
Office of Special Education Programs

SERVICES FOR CHILDREN WITH DEAF-BLINDNESS

PART A: Identification Information	
1. Name of State Alabama	2. Date 3/13/95
3. Name of Grantee Alabama Deaf Blind Project	
4. Address P.O. Box 698, Talladega, AL, 35160	
5. Project Director Mrs. Zackie Bosarge	
6. Person Completing Form Dr. Mary Jean Sanspree	
7. Telephone No. (205)934-6723	8. TTY No. (205)934-2625

ED Form 30-10p, Revised 6/91

State: Alabama

PART C: Report of Training and Other Services Provided to Professionals, Paraprofessionals and Family Members

Activities	Persons Trained		
	Professionals	Paraprofessionals	Family Members
Consultative Services	40	52	360
Training	42	83	30
Information/Referral Services	200	180	4,956
Transportation (of Trainees)	8		150
Other (Specify)			
Parent Congress	27		132

*Many of our paraprofessionals are also family members.
 *Increases in information/referrals is due to publishing of resource directory, the establishment of a resource network, and the establishment of a data base for information/referrals, and presentations to community and service organizations.



Alabama Deaf Blind Registry
Numbers of Students by Age Group

<u>Years</u>	<u>Number</u>	<u>Predicted Technical Assistance</u>	
0-3	22	x	
4-6	40	x	Transition
7-9	44	x	LEA
10-12	42	x	LEA
13-15	38	x	LEA
16-18	42	x	LEA
19-21	47	x	LEA
Total School Aged	275		
Adults	11	x	Rehabilitation

REGISTRY

SUMMARY OF ALABAMA DEAF/BLIND REGISTRY:

The deaf/blind registry of Alabama is maintained on a data base at the University of Alabama School of Optometry. The registry indicates the demographics of the children as well as possible technical assistance that may be needed. In 1994-95 the project registry was put into a data base so that the needs and the location of the children could be examined. 1996 information will detail the technical assistance that is needed, the teacher training or parent training that is required to work with the technical assistance and how the school systems will work together to provide this extra help for the students and their family. The registry (see attached registry sample) is sent to every school system once a year for an update. A survey will be sent this year to determine the many needs within the school district and when and where these needs may be taught as a workshop or one-on-one training. Technology is always available to the teachers, the parents and the students to assure the appropriate communication skills are used and enhanced in each classroom.

DEAF/BLIND DISCHARGE FORM

Reason for Discharge:

Disposition of Care:

Person Making Discharge:

YES

NO

Signature:

Has Signature

No Signature

Program:

DEAF/BLIND REGISTRY FORM

MAJOR CAUSES OF DEAF-BLINDNESS (Check code below)

A. Syndromes

- 1. Down's
- 2. Trisomy 13
- 3. Usher's

4. Other:

B. Multiple Congenital Anomalies

- 1. CHARGE association
- 2. Fetal alcohol syndrome
- 3. Hydrocephaly
- 4. Maternal drug abuse
- 5. Microcephaly

6. Other:

C. Prematurity as sole known cause

D. Congenital Prenatal Dysfunction

- 1. AIDS
- 2. Herpes
- 3. Rubella
- 4. Syphilis
- 5. Toxoplasmosis

6. Other:

E. Post-natal Causes

- 1. Asphyxia
- 2. Encephalitis
- 3. Head injury
- 4. Meningitis
- 5. Stroke

6. Other:

F. Other:

DEGREE OF VISION LOSS: (Circle code below)

- 1. Partially sighted (20-70 - 20-200)
- 2. Legally blind (less than 20-200)
(or visual field less than 20)
- 3. Light perception only
- 4. Totally blind
- 5. Tested - results non conclusive
- Not tested

continued DEAF/BLIND REGISTRY FORM

DEGREE OF HEARING LOSS (pure tone average for better ear) (Check code below)

- | | |
|--|---|
| <input type="checkbox"/> 1. Mild (30-45 dB loss) | <input type="checkbox"/> 4. Profound (91 + dB loss) |
| <input type="checkbox"/> 2. Moderate (46-70 dB loss) | <input type="checkbox"/> 5. Tested - results non-conclusive |
| <input type="checkbox"/> 3. Severe (71-90dB loss) | <input type="checkbox"/> 6. Not tested |

OTHER DISABILITIES: (Check code below)

- | | |
|---|---|
| <input type="checkbox"/> 1. Autism | <input type="checkbox"/> 6. Other health impaired |
| <input type="checkbox"/> 2. Emotional disturbance | <input type="checkbox"/> 7. Speech or language impaired |
| <input type="checkbox"/> 3. Learning disability | <input type="checkbox"/> 8. Traumatic brain injury |
| <input type="checkbox"/> 4. Mental retardation | <input type="checkbox"/> 9. Other: <input type="text"/> |
| <input type="checkbox"/> 5. Orthopedic impairment | |

REPORTING UNDER PART B OR CHAPTER 1 OF TITLE 1: (Check code below)

- | | |
|---|---|
| <input type="checkbox"/> 1. Autistic | <input type="checkbox"/> 8. Orthopedically impaired |
| <input type="checkbox"/> 2. Deaf | <input type="checkbox"/> 9. Seriously emotionally disturbed |
| <input type="checkbox"/> 3. Deaf-Blind | <input type="checkbox"/> 10. Specific learning disability |
| <input type="checkbox"/> 4. Hard of hearing | <input type="checkbox"/> 11. Speech impaired |
| <input type="checkbox"/> 5. Mentally retarded | <input type="checkbox"/> 12. Traumatic brain injury |
| <input type="checkbox"/> 6. Multi-disabled | <input type="checkbox"/> 13. Visually impaired |
| <input type="checkbox"/> 7. Other health impaired | |

EDUCATIONAL:

- | |
|--|
| <input type="checkbox"/> 1. Regular class |
| <input type="checkbox"/> 2. Resource room |
| <input type="checkbox"/> 3. Separate class |
| <input type="checkbox"/> 4. Public separate school facility |
| <input type="checkbox"/> 5. Private separate school facility |
| <input type="checkbox"/> 6. Public residential facility |
| <input type="checkbox"/> 7. Private residential facility |
| <input type="checkbox"/> 8. Homebound |
| <input type="checkbox"/> 9. Other: <input type="text"/> |

SETTING OF SERVICES: (Check code below)

LIVING:

- | |
|---|
| <input type="checkbox"/> 1. Birth or adoptive parents |
| <input type="checkbox"/> 2. Extended family |
| <input type="checkbox"/> 3. Fosters parents |
| <input type="checkbox"/> 4. State residential facility |
| <input type="checkbox"/> 5. Private residential facility |
| <input type="checkbox"/> 6. Group home (less than 6) |
| <input type="checkbox"/> 7. Group home (more than 6) |
| <input type="checkbox"/> 8. Apartment (with non-family persons) |
| <input type="checkbox"/> 9. Other: <input type="text"/> |

DEAF/BLIND REGISTRY & DISCHARGE FORM

ALABAMA DEAF-BLIND REGISTRY FORM

ACTIVE:

NAME: **SSN:**

ADDRESS:

CITY: **STATE:** **ZIP:**

COUNTY: **PHONE:**

DOB: **SEX:** **LEA:**

SCHOOL: **PRIMARY PLACEMENT:**

TEACHER:

ALABAMA DEAF/BLIND DISCHARGE FORM

NAME:

ADDRESS:

CITY: **STATE:** **ZIP:**

DISCHARGE DATE: **DOB:** **SEX:**

Deaf-Blind Coalition Interagency Agreement

**Deaf-Blind Coalition/Advisory Board
Members**

Alabama Deaf-Blind Coalition/VI-C Advisory Board

Lynn Sharp
Associate Director
State Medicaid Office
501 Dexter Avenue
P.O. Box 5624
Montgomery, Al 36103-5624
Phone: (334) 242-5588
FAX (334) 242-0533

Crystal Richardson
Educational Specialist
State Department of Education
Gordon Persons Building
50 N. Ripley Street
Montgomery, Al 36130-3901
Phone: (334) 242-8114

Steve Roth
Regional Director
Dept. of Mental Health
J.S. Tarwater Developmental Ct.
US 231 North, Hwy 9
Wetumpka, Al 36092
Phone: (334) 567-8471
FAX (334) 567-0720

Letta Gorman
Representative Post Secondary Education
Development Disabilities Council
401 Adams Avenue
Suite 170
Montgomery, Al 36104
Phone: (334) 844-4704
FAX (334) 844-4709

Rita Houston
Rehabilitation Specialist
Division Vocational Rehab Services
2129 E. South Blvd.
Montgomery, Al 36111
Phone: (334) 281-8780
FAX (334) 281-1973

Jane Myrick
Parent Coordinator
ADBMA
1124 North E
Talladega, Al 35160
Phone: (205) 362-8320

Charlotte Watson
State President
ADBMA
P.O. Box 55
Scottsboro, Al 35768
Phone: (205) 574-2680
FAX (205) 574-5085

Wanda Key
Policy Specialist
State DHR Office
S. Gordon Person Bld.
50 Ripley
Montgomery, Al 36130-4000
Phone: (334) 242-1350
FAX

John Houston
Executive Assistant to Commissioner
State Department of Mental Health
RSA Union Blvd.
100 N. Union Street
Montgomery, Al 36130-1410
Phone: (334) 242-3643
FAX (334) 242-0796

Jim Harris III
Division Vocational Rehab Services
2129 E. South Blvd.
Montgomery, Al 36111
Phone: (334) 281-8780
FAX (334) 281-1973

Zackie Bosarge
Director of Special Projects
A.I.D.B.
P.O. Box 698
Talladega, Al 35161
Phone: (205) 761-3282
FAX (205) 761-3294

Susan Brooks
Regional Representative
HKNC
1005 Virginia Avenue, Suite 104
Atlanta, Georgia 30354
Phone: (404) 766-9625
FAX (404) 766-3447

Dr. Terry Graham
Director, OHEO
A.I.D.B.
P.O. Box 698
Talladega, Al 35161
Phone: (205) 761-328
FAX (205) 761-3294

Dr. Anita Briggs
TRACES Regional Coordinator
TRACES Project
P.O. Box 1455
Tryon, North Carolina 28780
Phone: (803) 457-5406

Jim Hare
Employment Development Coordinator
Vocational Rehabilitation
#4 Medical Office Park
Talladega, Al 35160
Phone: (205) 362-1300

Diane Roberts
Early Intervention
2129 E. South Blvd.
Montgomery, Al 36111-0586
Phone: (334) 613-2396
FAX: (334) 613-3494

DRAFT

INTERAGENCY AGREEMENT ON SERVICES TO INDIVIDUALS WHO ARE MULTIPLY HANDICAPPED WITH VISUAL AND AUDITORY DISABILITIES

The purpose of this cooperative agreement is to mobilize all available resources on behalf of individuals who are severely multiple handicapped with visual and/or auditory disabilities to assist them in achieving their optimum functional level. This agreement is not intended to deter or counter responsibilities of the parties to this agreement to perform such duties as may be required under federal or state laws.

Under this non-financial agreement, achievement of the following objectives will be necessary for the successful development and implementation of programs and services to the target population:

To promote and maintain an interagency cooperative agreement committee which has the responsibility to review and revise this agreement as may be needed and serve as a clearinghouse for information and activities relative to interagency planning efforts.

To enhance public and agency awareness and understanding relative to needs and concerns of individuals with deaf-blindness and multiple disabilities and regarding services provided by the parties to this agreement through sponsorship of and participation in parent and professional training activities and presentations, development and dissemination of appropriate informational materials.

To conduct an annual needs assessment and to promote incorporation of deaf-blind issues and concerns into other needs assessment activities as may be appropriate, to participate in compilation and analysis of needs data, in order to identify and decrease service gaps and service duplication and promote appropriate service planning and care coordination.

To provide staff contact persons, as needed, for support in the cooperative planning of transition programs for persons who are multiply handicapped with visual and/or auditory disabilities, to participate in developing a cooperative transition plan appropriate to the clients' needs and functional abilities and to participate in other transition activities which may be jointly developed by participating agencies and organizations.

To encourage the staff of our agencies at all levels to participate in joint staff meetings and in-service training for the purposes of exchanging information and creating better understanding of the services provided by the parties to this agreement.

To work toward identifying the service responsibilities of each party to this agreement for persons who are multiply handicapped with visual and/or auditory disabilities.

To serve as the Advisory Board to the state's federal VI-C project for deaf-blind individuals.

DRAFT

This agreement is implemented and effective on this date, _____.

STATE DEPARTMENT OF
EDUCATION

Ed Richardson
State Superintendent of Education

DEPARTMENT OF REHABILITATION
SERVICES

Lamona H. Lucas
Commissioner

DEPARTMENT OF HUMAN
RESOURCES

P.L. Corley
Acting Commissioner

ALAMABA DEAF-BLIND
MULTIHANDICAPPED ASSOCIATION

Charlotte Watson
President

PUBLIC HEALTH

COMMISSION ON AGING

Ms. Martha Beck
Commissioner

DEPARTMENT OF MENTAL HEALTH
AND MENTAL RETARDATION

R. Emmett Poundstone
Commissioner

ALABAMA INSTITUTE FOR DEAF
AND BLIND

Joseph Busta
President

ALABAMA MEDICAID AGENCY

Gwen Williams
Commissioner

ALABAMA DEVELOPMENTAL
DISABILITIES COUNCIL

Tom Holmes
Chairman

ACHE

NOTES: