

Teaching and Care of Deaf-Blind children

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DVD presentation of working with Young children who are deaf-blind and a mental retardation



Deaf-Blindness

“Blindness separates a person from things, but deafness separates him from people”, said Helen Keller. This potential isolation is one important reason why it is necessary to engage the services of persons familiar with the combination of both blindness and deafness when planning an educational program for a child who is deaf-blind.

It may seem that deaf-blindness refers to a total inability to see or hear. However, in reality deaf-blindness is a condition in which the combination of hearing and visual losses in children causes "such severe communication and other developmental and educational needs that they cannot be accommodated in special education programs solely for children with deafness or children with blindness or multiple disabilities.

Children who are deaf-blind are in need for a unique education approach because of their combined and interwoven sight and hearing disturbances in order to ensure that these children have the change to develop their full potential.

A person who is deaf-blind has an unusual relationship with the world. For people who can see and hear, the world extends outward as far as his or her eyes and ears

can reach. For young children who are deaf-blind, the world is very narrow; his or her experience of the world extends only as far as the fingertips can reach. Such children are effectively alone if no one is touching them. Their concepts of the world depend upon what kind of opportunity they have had to physically contact. If a child who is deaf-blind has some usable vision and/or hearing, her or his world will be enlarged, and many do. Some children called deaf-blind have enough vision to be able to move about in their environments, recognize familiar people, see sign language at close distances, and perhaps read large print. Others have sufficient hearing to recognize familiar sounds, understand some speech, or develop speech themselves. Therefore the range of sensory impairments included in the term "deaf-blindness" is great."

Major Causes of Deaf-Blindness

Below you find a list of possible causes of deaf-blindness.

Syndromes

- Down
- Trisomy 13
- Usher

Multiple Congenital Anomalies

- CHARGE Association
- Fetal alcohol syndrome
- Hydrocephaly
- Maternal drug abuse
- Microcephaly

Prematurity

Congenital Prenatal Dysfunction

- AIDS
- Herpes
- Rubella
- Syphilis
- Toxoplasmosis

Post-natal Causes

- Asphyxia
- Encephalitis
- Head injury/trauma
- Meningitis
- Stroke

Adapted from Etiologies and Characteristics of Deaf-Blindness Heller & Kennedy, (1994), p. viii, Table 1.

Some people are deaf-blind from birth, while other may be born deaf or hard-of-hearing and become blind or visually impaired later in life; the reverse may be the case too. Still others may be adventitiously deaf-blind: they are born with both sight and hearing but lose some or all of these senses as a result of accident or illness.

Challenges taking a child who is Deaf-Blind

A child who is deaf-blind must somehow make sense of the world using the limited information available to him or her. If the person's sensory disabilities are great, and if people in the environment have not made an effort to order the world for him or her in a way that makes sense, this challenge may be overwhelming. Quite often behavioural and emotional difficulties go together with deaf-blindness and are the normal outcomes of the mutual misunderstanding and communication between child and adult.

The challenge of learning to communicate is without doubt the greatest one that children who are deaf-blind face. It is the greatest opportunity, since communication and language hold the power to make their thoughts, needs, and desires known. In order to learn language, children who are deaf-blind must depend upon others to make language accessible to them. Learning to move about in the world as freely and independently as possible is another challenge for the child who is deaf-blind.

Communication

The impairment of deaf-blindness presents unique challenges to families, teachers, and caregivers, and they should open up for the child who is deaf-blind the world beyond the limited reach of his or her eyes, ears, and fingertips. The people in the environment of the child who is deaf-blind should introduce him or her to the physical environments that surround him or her. Not doing so, the child will be isolated and will not have the opportunity to learn and to grow. If they do, the child will be able having the opportunity to develop to his or her ultimate potentials.

For parents, caregivers and teachers the meaningful communication with the child who is deaf-blind is perhaps the most important task.

Communication involves more than mere language. Communication can be seen as conversation, that employs body language and gestures, as well as both signed and spoken words. A conversation with a child who is deaf-blind can begin with a partner who simply notices what the child is paying attention to at the moment and finds a way to let the child know that his or her interest is shared.

This shared interest, once established, can become a topic around which a conversation can be built. Mutual conversational topics are usually established between a parent and a sighted or hearing child by making eye contact, by gestures such as pointing or nodding, or by exchanges of sounds and facial expressions. Lacking significant amounts of sight and hearing, children who are deaf-blind will often need touch in order for them to be sure that their partner shares their focus of attention. The teacher may, for example, touch an interesting object along with the child in a nondirective way.

As a tactual equivalent of the actions of a mother who instinctively imitates her child's babbling sounds the mother may imitate a child's movements, allowing the child tactual access to that imitation.

These children frequently have slackened response times. Therefore teachers, parents and others can go on in conversations with children who are deaf-blind by pausing after each turn in the interaction to allow time for response.

Respecting and following the child's own pacing is essential to establishing well doing interactions. Pausing to allow the child to take another turn in the interaction, then responding to that turn, pausing again, and so on—this back-and-forth exchange becomes a conversation. Such conversations build relationships and could become the basis for language learning.

As the child who is deaf-blind becomes familiar with the nonverbal interaction with others, she or he becomes open to receive some form of symbolic communication as part of those interactions. Often it is helpful to accompany the introduction of words (spoken or signed) with the use of simple gestures and/or objects, which serve as symbols or representations for activities. Doing so may help a child develop the understanding that one thing can stand for another and will also enable him or her to anticipate events.

For example, a teacher may use gestures or sign language to name the object teacher and child are both touching and name the movement that they share. This naming of objects and actions, over and over again, may begin to give the child who is deaf-blind a similar opportunity afforded to the hearing child—that of making meaningful connections between words and the things for which they stand.

Some principal communication systems for children who are deaf-blind are:

- touch cues
- gestures
- object symbols
- picture symbols
- sign language
- finger spelling
- Signed language, for example signed Dutch or English
- Braille writing and reading
- Official Sign Language
- large print writing and reading
- lip-reading speech

Together with nonverbal and verbal conversations, a child who is deaf-blind needs a reliable routine of meaningful activities and ways that this routine can be communicated to her or him. Touch cues, gestures, and use of object symbols are some typical ways in which to let a child who is deaf-blind know what is about to happen to her or him. Each time before the child is picked up, for example, the caregiver may gently lift his or her arms a bit and then pause, giving the child time to ready her or himself for being handled. Such consistency will help the child to feel secure and to begin to make the world predictable, thus allowing the child to develop expectations. Children and adults who are deaf-blind and are able to use symbolic

communication may also be more reliant on predictable routine than people who are sighted and hearing. Predictable routine may help to ease the anxiety that is often caused by the lack of sensory information.

Orientation and Mobility

The child who is deaf-blind need help learning to move about in the world. Without vision, or with reduced vision, the child will not only have difficulty navigating, but may also lack the motivation to move outward in the first place. Helping a young child who is deaf-blind learn to move may begin with thoughtful attention to the physical space around him or her (e.g. the crib or the so called Little Room of Lilly Nielsen) so that whatever movements the child instinctively makes are rewarded with interesting stimulation that motivates further movement.

The Family

Clearly, the challenges for parents, teachers and caregivers of children who are deaf-blind are many. Since such a child does not necessarily respond to care in the ways we might expect, parents will be particularly challenged in their efforts to include her or him. The mother or father of an infant who can see is usually rewarded with smiles and lively eye contact from the child. The parent of a child who is deaf-blind must look for more subtle rewards: small hand or body movements, for instance, may be the child's way of expressing pleasure or connection. Parents may also need to change their perceptions regarding typical developmental milestones.

Individualized Education

Children who are deaf-blind are in dire need of highly individualised education, considering the limited channels available for learning. Each child has his or her unique ways of interests and learning. Children who are not only deaf-blind but also mentally retarded are even in much greater need of individualised education.

Assessment is a crucial element on the road of learning at every step of the way. Sensory deficits can mislead into underestimating or overestimating intelligence and constructing inappropriate programs, however there are children with approved additional disturbances. Children with real mental retardation, for example, are in urgent need of good assessment in order to fulfil their needs and to set up an adequate support profile.

Summary

In this DVD presentation we show you how teacher and caregivers work with the deaf-blind children with a mental retardation.

This group is founded in 2000 in answer to parents who were in search for education for their children.

Royal Visio the national organisation for care, education and rehabilitation for visually impaired and blind people; the Royal Effatha Guyot Group (KEGG) is an organisation for the deaf, the hard of hearing and the communicative impaired people.

Visio and KEGG cooperate with each other in this group and in this combination of mutual knowledge we teach and care the young children who are deaf-blind and mentally retarded.

The children live in their families and visit daily, from Monday till Friday, one of the two groups of the school. There is an individualised programme for each child each child has his own learning program. During the day the children have individual activities and group activities.