

AER Vision Rehabilitation Therapy (VRT) Division http://vrt.aerbvi.org

VRT News Fall, 2015

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MESSAGE FROM THE CHAIR Ian Shadrick, CVRT, CRC

Greetings, I hope the start of fall has you enjoying all of the changes that fall offers, from changing leaves and start of football, to cooler temperatures and fall festivals. With the start of a new season, I would like to encourage each of you to take an active role in both the Division activities as well as those within the field as a whole; and doing our best to advance the profession. I encourage you to document your work and consider publishing an article in either the VRT News or a professional journal such as JVIB. Often we are conducting activities that represent our use of evidence-based research or practice, and we should be doing our best to document and develop best practices and provide additional credibility to our work.

We are excited about the upcoming AER conference on Aging and Veteran's renewing our desire to address issues of concern for our field and our commitment to take action. I encourage you to get involved members on a committee or projects and to support additional professional development relevant to our Division. Our field is full of people who often have excellent ideas to help move the field forward. We encourage you to take action by volunteering for one of the following committees. I invite you to contact me or any of the Division officers if you have any questions. We are looking forward to hearing from you!

Please let one of your division leaders know if you are interested in serving on one of the following committees:

- Awards
- Membership
- Nominations

As we look to nominations, I regret to inform the Division that Cammy Holway-Moraros has resigned as Chair-Elect of the Division, due to work responsibilities. I want acknowledge and thank Cammy for all of her hard work as Chair-Elect and for her work to the Division over past nearly year and a half. We truly appreciate all of her contributions to the Division, and her support for the profession.

As per the Policies and Procedure manual, the vacancy of Chair-Elect will not be filled until our biennial election. As a result the Division will be seeking nominations for both a Chair and Chair-Elect at that time. If you or someone you know who is a Division member would be interested in either position, please feel free to contact me with any questions.

Warmest regards,

Ian Shadrick M.A., M.A., CVRT, CRC VRT Division Chair

MARK YOUR CALENDARS

- November 4-6, 2015 AER Conference on Vision Loss in Older Adults & Veterans: Leveraging Our Collective Wisdom-For more information, visit the conference website at http://aerbvi.org/aerconf2015/.
- December, 15, 2015 Deadline for articles for next issue of VRT News-send articles to Jennifer Ottowitz jennifer@hadley.edu
- April 11-17, 2016 VRT Appreciation Week-Please note that the dates have changed from June to April to help celebrate the birthdate of Annie Sullivan. Stay tuned for future communications regarding this week of celebration.

Conference Update Ian Shadrick, CVRT, CRC

We hope the each of you is planning to attend the upcoming AER Conference on Vision Loss in Older Adults & Veterans in Norfolk, VA November 4-6, 2015. The conference focus on aging and veterans includes and emphasis on TBI-related vision loss which

will highlight both military and civilian causes and consequences. We are very excited about the continuing education opportunities provided to the membership. There is a large VRT presence currently slated to present and a number or related topics.

Keynote Speakers include Dr. John Crews DPA, VRT from the CDC, B.J. LeJuene M.Ed., CVRT, CRC from the National Research & Training Center on Blindness & Low Vision at Mississippi State University, and Commissioner Janet LaBreck from the Rehabilitation Services Administration. The conference has at least 50 high quality presentations, including providing CE credit. Additionally, there is a Pre-conference workshop entitled "Bodies in Motion". There are also a number of exiting exhibits.

This conference is also a wonderful opportunity to re-connect with friends and colleagues and to make new ones. Again, this is an exciting opportunity for professional development and we hope to see you in Norfolk!

For more information or to register visit: http://aerbvi.org/aerconf2015/

Rehabilitation Professionals in Visual Impairment: JVIB needs your expertise!

Dr. Jane Erin, Associate Editor, JVIB

Are you a Vision Rehabilitation Therapist or another professional who works with adults with visual impairments? The Journal of Visual Impairment and Blindness welcomes your participation in developing the literature of your field through practice articles. As the Associate Editor for Practice, I want to publish more articles that appeal to professionals who work with adults. There are two ways in which you can be part of this process.

Peer reviewer for Practice Perspectives and Practice Reports: Each new article that is submitted must be read by two people who are practicing professionals. As a reviewer, you will receive an email from me with the title of the submitted article—you will not know who the author is. You will be asked read the article and to answer seven questions, including one that asks whether the article is useful for professionals. I will use reviewers' comments to decide how the article can be improved and whether it should be published. I try not to ask peer reviewers to review more than once a year.

Practice author: If you have a teaching strategy that worked or a unique idea for instruction, please consider writing a practice article. See http://www.afb.org/info/publications/jvib/12 under For JVIB Authors and Practice Perspectives for more information. There are two types of practice articles.

Practice Perspectives articles are about strategies for instruction, and they should include a specific description of what you did and what evidence of success you had. They must be 500-2000 words long.

Practice Reports may include systematic, focused investigation of a topic, which may include basic data. They may be 1,000 to 2,500 words in length.

Please contact me at jerin@u.arizona.edu if you are interested in becoming a peer reviewer or if you would like to develop a practice article!

Jane Erin, Associate Editor for Practice jerin@u.arizona.edu

Navigating the accommodations for a college course Kendra Farrow. CVRT

Learning is a lifelong pursuit. I was recently reminded of this as I registered for a college course. Planning and preparing for just one course found me feeling like an inexperienced freshman. Since I have both an undergraduate and master's degree, and have worked with college students facing the experience, I was frustrated to find that this was not enough. Technology advances have changed much about college courses. In addition, my visual disability affects my functioning very differently from the last time I was a student.

First, the application process has transitioned from pen and paper to an online format. Filling out these detailed forms was not completely accessible, and so it required sighted assistance. In addition, requesting transcripts from my previous colleges and registration for the course was online. While this helps the process to move more quickly, verification by sighted assistants was required for each step.

One detail which has not changed much is the need to contact the professor to work out accommodations. However, the process was made less personal by using email, instead of just stopping by the office or calling on the phone. Carefully wording a disability disclosure felt complicated. I did not know if this information would make the professor feel overwhelmed, and if I gave enough information that would help put him at ease. Would he feel that he could ask follow up questions if I did not explain it in a way he could understand? I got a friendly response with the syllabus attached and his ideas of some accommodations which he thought would help me. He suggested I register with the disability services office. After carefully reviewing the syllabus, I replied with some suggestions of my own. Although I did not know exactly what would work for each barrier I envisioned, I tried to focus on the basic accommodations I needed. Once I had researched some possible solutions for the more complex elements, I planned to speak with the professor again.

Registering with the disability services office required providing medical documentation of disability and filling out their application. They explained the testing accommodations and offered me a digital version of one of my needed textbooks.

Next, I registered with BookShare, a service for accessible textbooks, and searched for the two books to be used in the class. One was available and the other was available in an older version, not the most current edition. I had a new braille note-taker ordered and hoped to use it to read the textbooks and other class materials. Although I had done a lot of visual studying, it was tedious and I planned to try out some new strategies. One month prior to the semester's beginning, I received the note-taker. Unfortunately, the time needed to set up and learn to use it took longer than I had.

One requirement gleaned from the syllabus was a website with learning tutorials. Knowing that interactive websites can sometimes be unfriendly to screen readers, I visited the website and searched for accessibility information. There was a fee to register and since the course had not started yet, I could not try out the tutorials. Although they had a link to accessibility information, only a very brief paragraph talked about using a screen reader. Google searches also came up empty. I joined a blind student listserv and asked if anyone had experience with these tutorials. This also did not yield any helpful information. Finally, I stumbled across an email which was asking for assistance for the same company which ran the website. I sent an email. This email got routed to a person who was going to look into my question. She sent me at least one follow-up message asking about the versions of software I was using. Although this seemed promising, I did not receive a response prior to the beginning of the semester.

The format of the class was not online, however this did not exclude me from needing to interact with Blackboard. This online software is often used for posting grades, administering tests, and submitting assignments. My brief introduction to the platform had proven to me that the details involved with using this interface distracted me from the focus of the task I intended to complete. As a result, I hoped to discover if the professor would provide this information by email instead since these details were not really integral to taking the class.

The class was set to begin on a Monday. On the Friday prior to class beginning I received an email stating that the course's professor had changed. This news was potentially good since I had never verified that the tutorial website was accessible, but it also meant that the new professor had no knowledge of me and my accommodations. I quickly went to the website and clicked the box to have an automated message sent to him from the disability services office. I did not have time to informally meet him, nor review the syllabus.

Monday came and I went to class. Materials were provided as physical handouts. The professor asked us to review them and then ask any questions we had. I struggled with my magnifier, but my efforts were futile. The textbooks were also different. The first assignment was due in one week and required the reading of the first 67 pages of the new text. I had spent quite a bit of time anticipating the obstacles I would encounter. Yet now I was in the situation I had tried to avoid--scrambling to catch up and the first class not even over.

As soon as I got home the race began to find the textbook. BookShare did not have it and my husband helped me look online for a digital version. Not finding what I needed, I called the professor the next morning and asked if he knew where to get a

digital copy. He told me to check with the publisher. I finally found a digital copy from this source. I had not stopped long enough to actually think about the class's content since I was so focused on the accessibility. My coworker, also taking the same class, came and spoke with me about the syllabus and the course's focus. With the new professor came a slightly different emphasis. We had both signed up hoping to improve skills we needed for our job. But after looking over the objectives my coworker was unsure it would meet our needs. We resolved that if we did not think the class met our needs, we should drop the class.

In the end I dropped the class, but gained a wealth of experience on preparing for taking college courses. I learned that no matter how organized you are, you still might be playing catch-up. I learned that every time I go to a meeting where an exercise is not accessible, I should think about how it could have been made accessible. Often when there is no test at the end of a training session, you just overlook the inaccessible elements. If it were part of a course where you needed that information to make the grade, how would you work it out? Thinking on your feet and speaking up about proper accommodations is an everyday exercise which builds skills and confidence. On the job and in life there are ways to avoid certain tasks which pose challenges. These can be rearranged or avoided completely by reassigning tasks. It does not work that way for a college course. If one is to gain the information and skills from the class, one must fully participate in exercises and complete all assignments. Although I have known this information for years, it now has greater meaning due to this experience.

We invite you to share your feedback and suggestions on this topic with Kendra by emailing her at kfarrow@colled.msstate.edu

History: Receive Your Braille Transcriber Certificate from the American Red Cross Bob Kozel, CVRT, CLVT, COMS

Many individuals in the career field started their professional preparation by participating in the Braille Transcriber Program offered by the Library of Congress. If one were to take the Transcriber course from the Library of Congress today the contract for managing the course has been awarded to the National Federation of the Blind. This has not always been the case. The Library of Congress' involvement in modern Braille transcription has its roots in the World War I era.

In 1917 Ms. Gertrude Rider was Librarian in Charge, Reading Room for the Blind, Library of Congress. She also served on a committee established for the Surgeon General of the Army to explore rehabilitation services for war blinded soldiers and sailors. The committee recommended a government operated facility for Vocational Rehabilitation. This facility was established at the Evergreen estate in Baltimore, MD. It was initially operated by the War Department as General Hospital Number 7. The task of providing vocational rehabilitation services was then transferred to the Federal Board of Vocational Training, an agency created in World War I to assist in the establishment of a wartime infrastructure to support America's war effort.

The American Red Cross set up support services for General Hospital Number 7 at the request of the Surgeon General of the Army, this support service was known as the Red Cross Institute for the Blind. Shortly after assuming control of the Rehabilitation Center at Evergreen the Federal Board of Vocational Education contracted with the Red Cross to manage the entire facility. A task they would perform from the end of May 1919 until the end of 1921. During that time the entire facility was referred to as the Red Cross Institute for the Blind. The newly formed Veterans Bureau assumed control of the facility in 1922 and managed it until its close in 1925. During that time it was referred to as Evergreen or the Evergreen School.

Ms. Rider in addition to her duties at the Library of Congress also was a member of the staff of the Red Cross Institute for the Blind. One of pressing needs for the rehabilitation center was a Braille library. The target was a 1500 book collection. This came at a time of the first unification of tactual print in America in the form of Grade 11/2 Braille. Many existing books were in New York Point and no longer useable, making the task of creating 1500 hand produced books even more daunting. Braille at this time was not commonly machine produced in America, and the American Printing House did not have the excess capacity or funding to fill this additional demand for Braille books. Note, for those interested in a full explanation of "The War of the Dots" go to the following AFB website:

http://www.afb.org/warofthedots/book.asp

During World War I the American Red Cross provided support services to the War Department on a magnitude that is difficult to comprehend today. The Red Cross helped recruit medical personnel, raised money, purchased supplies, provided support and recreation at military hospitals, provided home services and performed a number of other tasks and services in America and Europe. The role of the American Red Cross was so important that President Wilson, was the first President to serve as the Honorary President of that organization. This is a tradition that continues today with President Obama serving, with a title that has been changed to Honorary Chairman. Ms. Rider turned to the Red Cross to help provide Braille books for the facility at Evergreen. A system was established and volunteers could create 50 pages of Braille to be sent to the Library of Congress to be examined and graded. Successful completion led to the award of a Braille Transcriber Certificate from the American Red Cross. Progress towards the creation of 1500 books is chronicled in Outlook for the Blind, Summer 1921 edition on page 111-113, in an article entitled: "Braille Reproduction New Field For Volunteer," by Adelia M. Hoyt. Ms. Hoyt was Ms. Rider's assistant, and would succeed her at the Library of Congress after Ms. Rider's retirement in 1925. By the time of Ms. Rider's retirement there were 900 volunteer Braille transcribers in 149 Red Cross nationwide chapters. The history of this is chronicled in The Unseen Minority: A Social History of Blindness in the United States, Koestler pages 123-124.

The Red Cross volunteers would continue to produce Braille material not only used by Veterans, but also by the general blind public. Later in the decade, the machine process to produce copies of Braille material would soon become available in the United States, easing some of the need for hand produced books.

Interesting connections run through this era and the facility at Evergreen. M.C. Migel served on the Board of Direction of the Red Cross Institute for the Blind and would go

on to be the guiding force in the establishment of the American Foundation for the Blind, AFB, he was also a key individual in the effort to adopt a uniform Braille system. Robert Irwin would be commissioned to perform a study on State organizations providing Vocational Rehabilitation by the Red Cross Institute for the Blind. He would go on to have a distinguished career at AFB also.

Low Vision Focus @ Hadley: A useful tool for your toolbox Ed Haines, Instructor, Hadley School for the Blind

Do the following scenarios sound familiar?

- Your caseload and territory limit the frequency and duration of consumer visits.
- You don't have time to reinforce the training you provide.
- You'd like to leave family and friends with teaching materials so they understand more about the rehabilitation process.
- You're forced to tell a referral that your eligibility guidelines prohibit service provision.

If you've encountered any or all of these challenges, then perhaps a new initiative from The Hadley School for the Blind can help! Low Vision Focus @ Hadley is a program to address the concerns of seniors with low vision in a free, easy and accessible format. Low Vision Focus (LVF) is designed to help those living with low vision maintain their independence by sharing practical ways to address daily living skills made difficult by vision loss.

The core component of LVF is a free series of ten audio recordings. These recordings are available as CDs, audio downloads, and in Digital Talking Book format on an NLS cartridge. Each recording is approximately 30 minutes long and covers a different aspect of living independently with low vision. The topics include:

- Making the Kitchen User Friendly
 Making the kitchen safer and more functional, clearing clutter and using contrasting color and shape recognition
- Low Vision Cooking
 Safe cooking techniques to make cooking an enjoyable experience
- Doing Simple Kitchen Tasks
 How to make those daily kitchen and household tasks easier
- Basic Tactile Marking
 Using various materials to create tactile markers, marking different household items to distinguish them
- Simple Home Modifications
 Tools and strategies to make your household more low vision-friendly

- Getting Around the House
 - Techniques to increase your indoor mobility at home
- Looking Your Best
 - Low vision tips to make your bathroom routine easier, ways to make laundry more manageable
- Keeping Prescriptions in Order
 Taking your medications, getting your prescriptions and managing your prescription routines
- Going Out for a Meal
 - Tips and tricks to go out and enjoy a meal in public
- Going Out with a Friend
 Using a sighted guide to navigate places and situations outside of your household

So how can LVF help you, the VRT?

LVF recordings can save you time. If you know that your next home visit includes teaching in the kitchen, why not ask your consumer to review the recording 'Low Vision Cooking" beforehand? When you arrive with your lesson they'll already have an introduction to the subject and you won't spend as much time explaining basic concepts.

We all know that no learning is complete without reinforcement. Knowledge retention is always a concern, so providing an audio recording covering the subject of your most recent lesson will help your consumer remember and apply the skills you've worked on. You won't be playing catch-up on your next visit.

Recruiting family to engage in the learning process can be a huge help, but isn't always easy. Often scheduling prohibits their ability to observe home training. Sometimes the consumer learns best without family distractions. Family members can even reinforce dependence. LVF recordings can bring your voice and agenda to the family when you're not there. Have your consumer and spouse or adult children listen to the recordings together. LVF will help your consumer's family understand that independence is realistic and possible and give them a basic understanding of what the consumer is trying to achieve.

Finally, everyone hates telling a referral that for budgetary or eligibility reasons they can't receive services. LVF will enable you to provide assistance to almost every person who calls. The recordings can serve as an introduction to your intervention if they are eligible in the future, and they'll come away with real solutions to their concerns.

For additional assistance, the LVF website is available to download the audio recordings, access webinars, learn about Hadley distance education courses that are relevant to those with low vision and get tips and resource lists. In the future, Hadley will

provide free, "quick tip" videos through the Web site that complement the audio recordings.

All of these tools are provided free of charge, and while LVF is geared toward older adults, the program is open to any individual who is experiencing sight loss or caring for someone who may be losing his or her vision. If you think LVF can be a useful tool in your VRT toolbox, please visit the website: www.lowvisionfocus.org for audio downloads, or for CDs or NLS cartridges, please call 1-855-830-5355.

Vision Rehabilitation Therapy Division Board

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Please let me know of any questions, concerns, errors, or comments that you have regarding the VRT newsletter. I also welcome any articles or ideas for articles that you may have. Best wishes for a happy autumn and a healthy and fun-filled upcoming holiday season!