What are the markers of a good quality life? How can we contribute to the quality of a student’s life through education? These are long-standing questions for parents and professionals alike. Regardless of differences in philosophy or approach, a common denominator among those interested in the public education of children is the desire for students’ lives to be better as a result of having attended our schools; beyond that, there is less agreement about what constitutes quality education leading to personally and societally meaningful outcomes. In part, this can be attributed to the fact that what constitutes “quality of life” is individual, subjective, affected by context, and changes over time (Dennis, Williams, Giangreco & Cloninger, 1993).

In reference to students with disabilities, various paths to meaningful outcomes have been suggested; some of these have included functional life skills, traditional academics, community-based training, social skill development and friendships, peer supports, and educational inclusion with peers who do not have disabilities. Regardless of your viewpoint about these or other approaches, individualization or “goodness-of-fit” between how we plan and implement education is crucial to ways in which education will affect perceived quality of life (Schalock, 1990). Although each child shares some characteristics with all other children, and shares other characteristics with some other children, each child also has characteristics that are uniquely his or her own (Speight, Myers, Cox & Highlen, 1991). This highlights the need for individualization as the linchpin that will link planning to meaningful outcomes.

COACH - Choosing Options and Accommodations for Children: A Guide to Planning Inclusive Education (Giangreco, Cloninger, & Iverson, 1993) is an existing tool for planning inclusive education. It uses an individualized approach that explicitly links the selection of educational learning outcomes and supports to family-selected “Valued Life Outcomes.” (See Table 1.)
Table 1. Valued life outcomes

<table>
<thead>
<tr>
<th>Valued Life Outcomes</th>
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<tbody>
<tr>
<td>1. Having a safe, stable home in which to live now and/or in the future</td>
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<tr>
<td>2. Having access to a variety of places and engaging in meaningful activities</td>
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<tr>
<td>3. Having a social network of personally meaningful relationships</td>
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<tr>
<td>4. Having a level of personal choice and control that matches one’s age</td>
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<tr>
<td>5. Being safe and healthy</td>
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COACH is organized into three major parts. **Part 1** (Family Prioritization Interview) is used to identify family-selected priority learning outcomes for the student. **Part 2** (Defining the Educational Program Components) is used to (a) translate the family-selected priority learning outcomes into IEP goals and objectives, (b) assist the full team (including the family) in identifying other important learning outcomes in addition to those selected exclusively by the family, and (c) determine general supports and accommodations to be provided to or for the student to allow access and participation in the educational program. **Part 3** (Addressing the Educational Program Components in Inclusive Settings) is used to determine options for addressing students’ educational program components in general education class settings and other settings with people who are not disabled (e.g., community, vocational) through the use of a scheduling matrix and a set of lesson adaptation guidelines. Studies of COACH have included an expert and social validation study which established COACH as congruent with exemplary educational and family-centered practices (Giangreco, Cloninger, Dennis, & Edelman, 1993) and a study of its use and impact with students who are deaf-blind (Giangreco, Edelman, Dennis, & Cloninger, in press).

**Case Study of Heidi**

While engaged in study of the use and impact of COACH on students who are deaf-blind (Giangreco, Edelman, Dennis, & Cloninger, in press), our attention was drawn to the experiences of a particular junior high team serving a student named Heidi. It seemed apparent that over the course of three years, changes had occurred for Heidi as judged by her family, team members, and, in her own way, by Heidi herself. Initially, this team had used COACH as one part of the process to transition Heidi from a regional special education classroom in a neighboring school district to her local junior high. While our original intention was to understand the use and impact of COACH, we also sought to understand more fully the changes Heidi experienced, what had been done by this team, and how the team’s practices and subsequent actions affected Heidi’s life.

The purpose of this case study, then, is to relate one student’s successful transition into an inclusive educational program in which COACH served as a supportive tool and to describe some of the ways COACH contributed to positive changes in her life. COACH was used in conjunction with exemplary practices such as collaborative teamwork, transition planning, and family-school collaboration. The account of this experience is based on qualitative data from semi-structured interviews with Heidi’s mother and the special education teacher who served as her inclusion facilitator, site observations, videotaped school and work activities, a review of her IEP prior to and after completing COACH, and written team meeting records of the use of a problem-solving process to facilitate educational inclusion.
Heidi and Her Team

At the outset of Heidi’s transition she was a 14-year-old student with significant vision and hearing impairments, the oldest of three children living with her parents, Jean and Dan Knutson, brother Jamie, sister Beth, cats, and goldfish in a small town in Vermont. For most of Heidi’s life she had been a student in a regional, self-contained, special education class of six students, most of whom were labeled “severely and/or multiply disabled.” This regional classroom was located over 20 miles from her home. Her mother (co-author) tells us more about Heidi:

When asked to describe Heidi, I thought it would be easy, but there is no one word that does that... Professionals say she is mentally retarded, deaf, visually impaired, and non-verbal due to TORCH Syndrome. Her brother and sister lovingly call her ‘high tech Heidi,’ once she has on her cataract glasses, both hearing aids in and is hitched up to her FM unit. To her Dad and I she is a curly-haired teenager, persistent, happy, challenging, frustrating, difficult (at times), puzzling, and wonderful; full of surprises! All in all, we feel very lucky to have her as she has taught us all that nothing is impossible and to never take the little things in everyday life for granted.

Heidi’s Individual Student Planning Team consisted of a core of people who interacted with her on a regular basis. These included her parents, special education teacher, inclusion facilitator, speech language pathologist, consultant for the deaf and hard of hearing, paraprofessional, and general education teachers (e.g., eighth grade science and art teachers). As Heidi’s program developed, a group of her peers participated in team activities. Extended team members, who interacted with Heidi less frequently included an itinerant teacher of the blind and visually impaired, an occupational therapist, a physical therapist, and later, an employment specialist. Heidi’s team received intermittent technical assistance from members of the Vermont State I-Team (Rainforth, Giangreco, York & Smith, in press).

Transition Preparation

Heidi’s team began the transition process well before the move to her local junior high school. During the winter prior to the move, several meetings were held between the sending team, Heidi’s family, and the receiving team at the junior high school. During these meetings information about Heidi’s strengths and needs was shared and kept in the forefront of discussions as staff began to develop ideas for her program and schedule for the fall. These meetings gave the junior high personnel a chance to learn about Heidi and gave her parents a chance to get to know people who would serve as Heidi’s team in the junior high school. Members of the junior high team also made several visits to observe Heidi in her special education class. At the same time Heidi’s mother observed classes at the junior high school. Recognizing the importance of preparation not only for Heidi and her team, but also for the teachers and students in the junior high school, the special educator on the junior high team described these activities:

In order to create a truly welcoming environment for Heidi, we knew we also needed to involve the eighth grade teachers and the students who would be her classmates the next year. In May, a home economics teacher, special education teacher, and the inclusion facilitator held an informal after-school meeting with the eighth grade teachers. During this meeting, we provided the teachers with information about Heidi and asked for their input into the steps that needed to be taken before September. The teachers indicated that the information needed to be shared with the current seventh grade, that Heidi should have opportunities to visit the school, and that a core group of peer buddies or tutors should be identified. In order to reach the entire seventh grade class, the teachers decided that the information should be presented in English classes. These presentations were to include information about inclusion, about severe disabilities, as well as information about who Heidi was. During the presentations, which took place in May, opportunities were provided for students to volunteer to greet and meet Heidi when she visited, and to serve as buddies or tutors the next year.

Follow-up was provided during the first week of school in the fall with students and teachers with whom Heidi would spend her school day. Information shared at this time was more detailed and specific so that Heidi’s classmates could learn about her strengths and needs, her unique sensory characteristics, and her expected learning outcomes. They also learned strategies for communicating with Heidi and discussed ways in which they might help to make Heidi feel welcome as a part of the class. This type of orientation to classmates was to be presented to each new class in which Heidi participated.
Educational Program Planning
Pre-COACH Experiences

Though IEP planning was not new for Heidi’s team, planning an IEP for an inclusive education program in a junior high was new. When asked about IEP planning before using COACH, Heidi’s mother described attending meetings where she would be presented with a list of things that the special education teacher thought should be worked on. She would be asked if there was anything that should be added. As the mother said, “They would make up the IEP where I could add to or take from . . . they always welcomed what I had to say or what I really wanted for Heidi.” As many parents do, Heidi’s parents found themselves deferring to the professionals’ selection of goals and went along with the plan presented to them. The resulting IEPs typically contained long lists of annual goals and short-term objectives, including several submitted independently by related service providers for motor and communication skills. This scenario, while typical and well-intentioned, did not provide the family with adequate input into the educational planning process and left the team with a large number of fragmented goals that had an unknown relationship to changes in valued life outcomes for Heidi.

Educational Program Planning Using COACH

Prior to using COACH, each of the core team members familiarized themselves with the COACH manual. They made sure that all team members were in agreement with COACH’s basic assumptions and agreed to use it to plan Heidi’s IEP with technical assistance and guidance provided by a member of the Vermont I-Team. The team’s first use of the COACH was in September of her first year at the junior high school (eighth grade). During the Family Prioritization Interview (Part 1), valued life outcomes and family-selected priority learning outcomes were identified and subsequently restated as IEP goals and objectives. The team used Part 2 of COACH to identify additional learning outcomes and general supports to fill out Heidi’s educational program. With Heidi’s new IEP in hand, the team turned to the task of implementing the IEP in the context of a regular eighth grade day, including the development of instructional strategies and adaptations.

As the year progressed, the team reached consensus on roles and responsibilities of related service providers and used the scheduling matrix in Part 3 of COACH to identify places and times in the eighth grade schedule where Heidi had opportunities to address her goals. The team used variations on the Osborn-Parnes Creative Problem-Solving process as a strategy for generating ideas for successful inclusion in regular class activities (Giangreco, Cloninger, Dennis & Edelman, 1994). These strategies culminated in a program that capitalized on opportunities in the eighth grade Life Science class and 3D Art class. The rest of Heidi’s schedule included physical education, a school job with classmates, community-based instruction with classmates, individual instruction in food preparation, lunch, and a time in which to engage in recreation and leisure activities with classmates.

Heidi’s special educator reflected on her progress that first year at the junior high school:

While the team focused on IEP development and implementation, they also continued to address day-to-day issues related to personal care, behavior management, materials and equipment, staff training, schedule changes, following special education regulations, etc. Although the team had decided to begin each team meeting with a 2-minute success statement, it wasn’t until a Transition Planning Meeting in May that we took time to really recognize all the progress that Heidi had made. In the area of communication, Heidi was improving on her ability to focus on people when they communicated with her. She was using more picture symbols and making more requests. She had also greatly improved her ability to maintain appropriate behavior. Through her art class, phys. ed. class, and the time she spent with classmates, she had developed new leisure activities. In the area of vocational skills, Heidi had two school jobs. She had shown dramatic increases in independence on both jobs, and was beginning to self-correct errors. In the area of personal management, Heidi had begun to make her own lunch and was getting around the school with increasing independence.

Heidi’s IEP for her freshman year was also generated using COACH. During that Family Prioritization Interview, three of the five valued life outcomes from COACH were identified by her mother as important for Heidi for the coming year. They were (a) having a social network of personally meaningful relationships; (b) having a level of choice and control that matches one’s age; and (c) accessing a variety of places and engaging in meaningful activities. As a result of the Family Prioritization Interview, Heidi’s mother selected the following overall priority learning outcomes to be addressed for the coming school year:

1. Follows instructions
2. Works independently at a task
3. Shares leisure activities with others
4. Summons others
5. Follows school routine
6. Maintains appropriate behavior
7. Makes requests
8. Participates in individual leisure activities

How is Heidi’s Life Better?

Heidi’s educational records document the progress and attainment of goals and objectives related to the eight priorities on her IEP. But the real question we want to ask is whether her life has been made any better. Is there an impact on the valued life outcomes selected at the outset of the COACH process? Has she grown in her personal relationships with peers? Does she have any greater independence that would match that of a 15-year-old? Is she able to go places and do meaningful things in her community? Interviews with Heidi’s mother and special educator provide some of the answers:

- Previously a paraeducator or other adult went with Heidi into the community (e.g., grocery store, horseback riding); now she goes with friends her own age and the paraeducator is in the background.
- Other kids used to say “Oh, what’s wrong with her?” Now kids know her and treat her as they do their other classmates.
- Ownership about finding ways to include Heidi shifted from professionals exclusively, to her classmates and peers who used creative problem-solving to help plan for her ongoing inclusion.
- “She interacts more with her brother and sister at home. She’s interested in what’s going on!” (mother)
- “In her own way I think she knows she’s included and that she’s with normal kids. She’s doing things they’re doing and they’re including her.” (mother)
- “Other students are real interested in how they can communicate with her better. They genuinely care about what they’re doing and want to do what’s best. It’s not like they’re getting extra credit for it. It’s just voluntary.” (mother)
- In art class, “They put her right in the middle. If she needs something, if she needs help opening paint, for example, she’ll tap one of the other kids and hand them the jar. And they’ve been as excited as I have. ‘Hey Heidi wants me to open it. She asked me to do it!’” (mother)
- “You know she’s not considered the different one in art class. They just greet her like ‘Hello there Heidi. How ya doing?’” (mother)
- Heidi had her first job at MacDonald’s and was very proud to bring home a paycheck.
- She dresses herself every morning to get ready for her job independently. She participates in making her own breakfast, clearing the breakfast table, making her own lunch. Her mother remembers, “If she just let me dress her and not throw a fit, I was happy!”
- Bowling used to involve hand-over-hand help. Now she bowls with friends who came up with the idea of using “lane bumpers” so physical assistance isn’t needed. She has learned to take turns and knows that you don’t just get up and bowl at any time. “It’s just like any four kids who are out bowling!” (mother)
- People in the community know her more. Checkers at the grocery store, people at church, kids at school that aren’t friends of Beth or Jamie (Heidi’s sister and brother) come up and greet her.
- She’s learned from imitating her classmates to be quiet when others are quiet. This has enabled her to worship with her family.

The combination of aforementioned events led to Heidi exhibiting a more positive affect and greater self-esteem. “I think she’s happier” her mother, Jean, comments, then offers what she supposes might be running through Heidi’s mind: “There’s a lot of things I can do after all and I’m having a good time doing them!” While an intangible such as happiness is probably impossible to measure, it is not so difficult to recognize, especially by a parent. Jean recalled a day when Heidi brought home her paycheck. When Jean opened her backpack and asked “What’s this?” Heidi signed, “want” and took it and put it in her room. In talking with visiting relatives who didn’t know about Heidi’s job, she suggested to Heidi that she show them her uniform and brought it out. “I got that out, I mean she was all smiles like, ‘yeah, this is mine and I wear this when I go to work.’ She was really tickled.”

Future-Mindedness, Risk-Taking and Expectations

For Heidi’s parents, using COACH and having their daughter involved in the local junior high school resulted in changing perspectives. Looking farther into Heidi’s future than ever before meant challenging their own current expectations of Heidi’s progress and growth and taking risks.
When asked about expectations for Heidi after graduation, Jean reflected on her past and current points of view.

Jean: I wasn’t even thinking about a job. What could Heidi do? I felt bad thinking the worst, but I thought if she’d only learn that when she takes her coat off she should hang it up or to act appropriately depending on where she is.

Interviewer: Did you see her in some kind of special ed. day program?

Jean: Yeah. Maybe some peers would come into the classroom but not with her being in the minority like she is here.

Interviewer: How have your expectations changed? What direction are you headed now?

Jean: You know, working, supported work. I can see that.

When asked if she felt there was a relationship between Heidi’s gains and successes to the team’s use of COACH she replied: “Yeah, I think so because when we made that out it was considering a big part of her life. I mean the future. Not just what do you want her to accomplish by the time eighth grade is over.” Confidence in going after what she really wants to see for Heidi meant taking risks. She began saying, “Yeah, I would like her to have a job and live on her own with a support person. I just learned to say those things and I know that will probably not happen until the day before she graduates and say now I want her to go work somewhere. With Heidi we don’t know. I learned it’s better to plan big. You don’t know until we try things.”

“Trying things” paid off for Heidi. For example, pulling back on the paraeducator’s one-on-one assistance when Heidi was with peers and letting natural supports take their course paid off for her.

No one could have predicted that Heidi would follow the models of her peers for such things as turn-taking in bowling or quieting when her classmates are taking a test or when her family is in worship, but she did! Expectations were raised regarding what Heidi might be capable of attaining because of a willingness to take some well-planned and monitored risks to try new approaches and new activities.

Heidi’s story is worth telling. Good things happened for her over these three years, some carefully planned, some unexpected. Her recent experience has improved the quality of her life as judged by her family, and other team members agree. The positive outcomes for Heidi can be attributed to many exemplary practices including a strong home-school partnership with parents as team members, finely tuned collaborative team-work practices, effective communication strategies among team members, and regular planning and revision of schedules, activities, or instructional approaches based on ongoing assessment.

COACH was a tool used to initiate the development of an IEP that had valued life outcomes as the foundation. COACH was a major factor in changing perspective of parents and other team members about Heidi’s abilities and about where she would or could go in the future and allowing the parents to consider the “big picture.”

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Children Who Are Deaf-Blind: A “National Interest Requiring National Action”

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President Clinton, in his recent State of the Union reference to the role of the federal government in domestic policy, cited “national action in the national interest” as one way of defining federal responsibility. With full awareness of the impending extinction of OSEP’s heretofore concerted effort to serve children who are deaf-blind, I realized upon hearing this that we in the deaf-blind community (people who are deaf-blind, their families, and the professionals who serve them) are faced with a herculean task. We must define and defend for the nation’s leaders—and in short order—how the currently mandated (IDEA - Section 622) and structured (Services for Children with Deaf-Blindness Program) federal program to children who are deaf-blind serves national interests. We must vigilantly await the soon-to-be-disclosed details of how proposed executive and legislative changes will affect the federal deaf-blind services program. Then, equipped with what we know and feel, we must write and speak out to ensure the program’s integrity and vitality.

A raging bipartisan executive and legislative “reduce government” juggernaut threatens to erase 30 years of progress in the evolution of services to children who are deaf-blind and return us to the dark ages of state and local choice. As the plan appears to be unfolding, the choice as to whether and how to serve these children will basically fall to the states; this choice, if the past can instruct us, does no more than to marginalize hope for a bright future. We are assured by Department of Education (DOE) leaders that their basic commitment to children who are deaf-blind is intact and that a “base funding floor” exists in the foundation of the future to make good on this commitment. Assurances lead us to believe that DOE is devoted to these children’s (and their families’) learning and service needs. Recent rumblings from Washington, however, raise serious questions as to the substance and integrity of such assurances. Will the plank consist of more than “lip-service,” simply suggesting to newly homogenized technical assistance centers and broad-scope researchers that they not forget these children? Will the $12.8 million currently dedicated to children and youth (birth–21) who are deaf-blind, fall prey to the de-categorization frenzy that homogenizes cross-disability distinctions and service programming? Will the identity and unique needs of children who are deaf-blind be downplayed or lost? In fact, to be sure that the “base floor” has substance and winds-up as more than window dressing, we—the deaf-blind community—need to be heard. And, to repeat, what we need to articulate is how and why continuation of the Department’s dedicated program for our country’s 10,000 children who are deaf-blind is in the national interest.

First, although it may not play well in today’s political arena (where too many see disadvantage as self-inflicted), it is in our national interest to protect and enhance the lives of young citizens, who by virtue of not being able to see and hear, frequently experience isolation and require extraordinary support. It is in our national interest, as humans and as a people, to recognize and respond to one another’s human needs, not as a reflection of some noble altruism or paternalistic patronage, but simply because we care. Yet somehow, this caring threatens to become lost in our zeal to re-invent government. When we hear House Speaker Gingrich speak out against the recent excesses of federally funded “economic and social nannyism,” many of us reflexively resolve to rid our lives of government. But for many children who are deaf-blind, to rid their lives of the federal government would be to rid their lives of the only identifiable and accountable resource with adequate means to make a real difference.

Specifically, the federal government, through the U.S. Department of Education’s Services for Children with Deaf-Blindness Program, cares to the tune of $12.8 million. Remove these dollars or float them into overall programming for children with disabilities, and active caring that is capable of making a difference in the life of a child who is deaf-blind will be replaced by the benign neglect characteristic of approaches of the early 1900s.

“...it is in our national interest to protect and enhance the lives of young citizens, who by virtue of not being able to see and hear, frequently experience isolation and require extraordinary support”
Cost-beneficial fiscal allocation constitutes a second national interest. Dollars appropriated by the Department of Education’s presently concerted effort serves that interest very well. Deaf-blind-specific research and demonstration projects, technical assistance, teacher training, and information and referral projects, all help advance the quality of services by increasing the knowledge base. To the extent the knowledge base expands, more and better programs can be developed. In turn, better programs mean that more people who are deaf-blind, as they become adults, will be better equipped and require less costly services and interventions to cope both with crises and daily life. These adults, provided with sufficient opportunity to transcend disability by maximizing their abilities, have a greater likelihood of becoming contributing citizens. If the present federal focus on deaf-blindness is eliminated or diluted, any monies saved will likely be paid out many times over to fund costly service and intervention requirements of the future. Deaf-blindness is simply too significant a disability for many who have it to function without assistance. We can smartly choose to empower now, through sound educational programming, young people who are deaf-blind to prepare them for adult life, or, ignorantly, we can believe that an ostrich-approach is viable. Our national interest, and indeed our national coffers, are best served by proactive rather than reactive national action. To dilute, violate the integrity of the Services for Children With Deaf-Blindness Program, would, in addition to boding poorly for the future, severely compromise and undermine expensive gains of the past.

An additional factor related to cost effectiveness is the near certainty that if states assume responsibility for serving children who are deaf-blind, and if they do it well, the overall cost to American taxpayers may well increase. Services duplicated in every state will cost a great deal more than does the current delivery structure in which expert assistance crosses state lines and information is nationally collected, organized, and disseminated. Because of each state’s low incidence of children who are deaf-blind, there will be a duplication of services, a duplication that would require the individual taxpayer in each state to pay a larger share of the costs.

Third, amid a national clamor to strengthen the focus on our families and their values, it is clearly in our national interest to address the multitudinous needs of families with children who are deaf-blind. To this end, a significant portion of the Department’s deaf-blindness program monies have been targeted toward decreasing the isolation of families by increasing their relationships with each other and with the professional community. Success in this vein inevitably means that children will be more likely to remain with their families instead of becoming institutionalized. And, as if this in itself were not sufficient reason for DOE to continue its focus on the family, imagine the immense cost effectiveness of cultivating committed and ready-to-work parents as knowledgeable advocates, skilled service providers, and resources for professionals! Should DOE trim or abandon its budding partnership with parents of children who are deaf-blind, hope would be lost for the eventual blossoming of this long-nurtured resource. If we define “in as our national interest” increased family cohesion and viability as the primary unit for support, we are compelled to back up this interest with national action.

A fourth national interest is served by honoring, through action the American values of opportunity and quality of life to which every citizen who is deaf-blind has an equal birthright. Action, in this case, means elevating these values beyond empty rhetoric to the level of real programs of assistance—like those programs historically supported by the Services to Children with Deaf-Blindness Program. A global market economy and a world-class educational system will be hollow victories if some Americans become casualties of their lost vision and hearing.

In short, we must make the case that the Services to Children with Deaf-Blindness Program is vital to our national interests. Monies historically designated for this program should be deemed sacrosanct. They should be subject neither to the momentary frenzy toward disability homogenization, nor to illusory thinking about cost ineffectiveness. Planners of the new millennium’s promise of a “healthier and more just America” must quickly be brought to the realization that children who are deaf-blind, their families, and the professionals who serve them warrant national action commensurate with their presence as a national interest.

“...if states assume responsibility for serving children who are deaf-blind, and if they do it well, the overall cost to American taxpayers may well increase.”
One of the greatest challenges facing those who provide state and multistate services for children who are deaf-blind (34 CFR 307.11 grantees) is providing information and training to families and service providers about effective education practices. With increasing inclusion of children who are deaf-blind into community schools and other community-based activities, a growing number of individuals need information about the unique educational needs of these children and instructional technology to meet these needs.

With technical assistance to public and private agencies and organizations who serve children who are deaf-blind and their families as a primary mission, 307.11 Project personnel use a variety of methods to provide information to these groups. Since preservice (i.e., college/university course work) touches only a small percentage of the individuals in the service provider workforce, inservice training approaches are prevalent. Among these approaches, inservice training activities, usually identified as “institutes,” are a popular choice.

The planning and conducting of an institute can sometimes be a frustrating experience. Substantial amounts of time, effort, and funds are often committed, only to find later that impact has been limited. The purpose of this article is to share various strategies and insights identified by TRACES and 307.11 Project personnel on how they currently plan and conduct institutes. The information included is not intended to be an exhaustive presentation of strategies; rather, it highlights strategies shared by the 307.11 Project personnel.

Identification of Needs

When institutes are viewed simply as isolated activities, when not enough attention is given to how or where the training fits within the overall plan of service, results are limited. Such frustration may be avoided in the planning phase when attention is given to intended outcomes of the training institute as they relate to the vision/mission of the project. Successful institutes result when planners systematically begin their planning by identifying statewide needs, potential participants, and stated outcomes. This task should occur prior to identification of consultants, agenda items, or the selection of format.

Planning Committee

Another successful strategy is to involve appropriate stakeholders in the planning process. This may be accomplished through the formation of an institute committee composed of those who are likely to benefit from an effective institute. Members of the committee are requested to make a year-long commitment for consistent involvement from planning stages to the completion of the institute. Committee members may include members of the advisory committee of the 307.11 Project; representatives from institutions of higher education, who may assist in acquiring graduate level credit for participation; representatives of state departments of education, who may secure continuing education units for participants; parents, who may assist in validation of service needs; and representatives from the state-level CSPD committee for coordination of inservice and preservice training institutes.

Logistics

Attracting participants to a summer institute can be difficult due to summer vacation plans, commitments to work extended school year programs; and the needs of families and service providers to relax and re-energize for the upcoming school year. Reasons such as these have led some project personnel to schedule an institute in fall, winter, or spring. For other projects, an alternative has been to offer a series of shorter (e.g., three-day vs. a week-long) institutes throughout the school year. For example, the following series of institutes titled, “Staff Development Opportunities for Individuals Working with Students with Deaf-Blindness,” was offered.
Institute #1 - Summer Institute

Content: Overview of basic anatomy of the auditory and visual system, etiologies of hearing and vision loss, functional hearing and vision evaluations and implications for instruction.

Institute #2 - Winter Institute

Content: Overview of orientation and mobility strategies for individuals with deaf-blindness and implications for instruction.

Institute #3 - Spring Institute

Content: Overview of communication intervention for individuals with deaf-blindness and implications for instruction.

These institutes were offered in three different locations across the state to ensure statewide availability for participants. Several project personnel addressed this same issue of statewide availability through replication of the institute in various locations across a state.

Team Attendance

Some projects have found great success in promoting team attendance (e.g., two or more staff members from the same school building or district). Attendance at an institute typically involves only one person who then returns to attempt to incorporate new knowledge or implement new skills. Working merely from notes and materials, the individual, essentially, is working in isolation. It is no wonder limited implementation results. The teams, on the other hand, appear to have a much greater potential for implementing content information along with process strategies and, therefore, creating positive impact.

Follow-up Activities

Limited implementation of strategies and information by participants following their attendance at an institute may be due in part to “hit and run” style institutes. An example of a hit and run institute is (a) a presentation of strategies related to content without information on how to incorporate those strategies into existing instructional programs and school site structures, and (b) follow-up is not conducted to assist in the implementation of strategies presented during the institute. The expectation that participants can implement strategies upon return to their schools, agencies, or communities without additional support is faulty. Without follow-up results vary from partial implementation to time-limited implementation of strategies to no implementation at all.

Since including follow-up technical assistance activities into the action plan can lead to increased impact and achievement of meaningful outcomes, providing follow-up strategies becomes an essential part of the planning process. Past institute participants found the following follow-up activities beneficial.

- On-site consultation with a mini-inservice training session (i.e., a follow-up site visit by a consultant with feedback on the implementation of the action plan goals combined with a presentation to supplement content information presented during the institute)
- On-site consultation (i.e., a follow-up site visit by a consultant with feedback on the implementation of action plan goals)
- Videotape review consultation (i.e., follow-up technical assistance conducted through consultant review of a videotape provided by the participant. The consultant provides the participant with written feedback on the implementation of the action plan goals)

Application and Practice

The opportunity to learn through application, practice, and immediate feedback is another approach that produces implementation and impact. Conducting an institute that incorporates practice requires careful planning. The institute will need to coincide with the school year so an appropriate practice site will be available. Practice-based institutes often produce an unexpected benefit for the training site in the form of accommodating the needs of additional children and service providers due to the instruction available.

Action Plans

Finally, 307.11 project personnel agreed that the creation of a clearly contracted action plan by participants was an effective approach to ensuring post-institute implementation. An action plan provides information on (a) what knowledge and skills presented at the institute are planned for implementation, (b) the anticipated outcomes, (c) how the implementation is progressing, (d) who is involved in the implementation, and (e) how long it takes to be implemented. It was noted that action plans should be developed as an ongoing process during an institute. Action plans often require refinement and it is better to have this occur during the institute than as the concluding activity of the institute. This ongoing process provides participants the opportunity to plan with
other team members, to network with other participants attending the institute, to receive feedback from the presenter and other participants, to embed optimal types and times for follow-up technical assistance, and to plan a process for evaluation of progress. A clearly developed action plan will support the implementation of information presented during the institute.

Summary

In summary, we suggest that effective strategies include early articulation of goals, careful selection of planning committee members, attention to logistics, encouragement of team attendance, inclusion of follow-up activities, inclusion of opportunities for practice, and the formation of action plans. The foregoing is not an exhaustive list, nor have these strategies all been used at the same time. However, we submit that attention to them can result in an institute that is more likely to be successful.

TRACES (Teaching Research Assistance to Children Experiencing Sensory Impairments) is funded through Cooperative Agreement No. H025C30001 by the U.S. Department of Special Education, OSERS, Special Education Programs. The opinions and policies expressed by TRACES do not necessarily reflect those of the U.S. Department of Education.

TRACES Regional Reports

NORTHEAST AND NORTH CENTRAL REGIONS

States in the North Central and Northeast TRACES regions are participating in a planning process to address issues related to Usher Syndrome. A meeting scheduled for September, 1995, will address the development of effective screening practices within states. Dr. Sandra Davenport, personnel from deaf-blind projects, and families, and adults with Usher Syndrome will present at the September meeting. TRACES regional coordinators will work with states to develop action plans to strengthen screening processes. Long-term outcomes related to educational planning for students with Usher Syndrome will also be included in the planning process.

Preliminary survey results of 12 state and multistate projects indicate that students with Usher Syndrome are educated in a variety of settings, including regular classrooms, resource rooms, separate classrooms, separate schools, private schools, and public residential schools. Nine of the twelve state and multistate projects reported that there currently is no formal statewide process for identification of Usher Syndrome. However, many states are in the early stages of developing a screening process and have goals related to Usher Syndrome embedded within their grant activities. At least one of the states that responded to the survey has a statewide and systematic screening process.

Additional issues are being identified, including the awareness that many students with Usher Syndrome are often not included in a state’s annual deaf-blind census. The group will explore this issue and others to identify strategies which will help ensure that needed services are in place for students with Usher Syndrome.

If you would like more information, please call
Julie Baumgarner
(412) 648-1424 or
Cheryl Kennedy
(412) 648-7176

GREAT PLAINS REGIONAL ALLIANCE

The states of Minnesota, North Dakota, South Dakota, Wyoming, and Montana have formed the Great Plains Regional Alliance in a collaborative effort to address the needs of Native American children who are deaf-blind and their families. These states include reservation land of the Lakota/Dakota Indian Nation. Meetings and conference calls of the member states have resulted in a four-year plan that is incorporated within each of the states’ grant activities. Immediate goals include establishing linkages with the Native American communities and others who serve the communities. Members are sharing successful strategies that may be adopted across states and will develop public awareness materials to provide information to more rural areas.

If you have suggestions or would like more information, please call
Julie Baumgarner
(412) 648-1424 or
Phyllis Graney
(605) 224-9554

WESTERN REGION

States in the Western Region are collaborating to address transdisciplinary assessment resources. Work initiated through participation in California Deaf-Blind Project’s Pilot Project (TEAM) has continued at the individual state level.

In California, materials have been developed and teams have been trained from districts in the Northern, Central, and Southern Regions which have collectively assessed over 50 children who are deaf-blind.

In Arizona, the transdisciplinary team has developed replication materials for districts, assessed two children
in their home school, trained one district team, and has four districts waiting for the training.

In Nevada, one school-age team was trained, 14 children received functional vision and hearing screening, 2 children received transdisciplinary assessments, and training has begun with a team specializing in infants.

In Idaho, one team was trained, 19 children received functional vision and hearing assessments, and 4 children received transdisciplinary assessments.

In Montana, eight children received functional vision and hearing screening.

Through this collaborative process, a consistent knowledge base was developed across the many individuals representing the states. Individualized models were then developed, based on the states’ needs and resources. Inherent to this process has been the ongoing collaborative attitude of all the participating states as they have molded their own transdisciplinary assessment resources.

If you would like more information, please call Paddi Henderson
(503) 838-8775

PUERTO RICO

Providing consultation and resources to teachers of students who are deaf-blind and who live in remote areas is often difficult. The Puerto Rico Deaf-Blind Project and TRACES have begun a video exchange program to provide teachers on the island with consultation. Video tapes of the teachers and students are taken, with teachers adding information or questions as needed. These tapes are then sent to consultants who view the tapes, make recommendations and comments, and then send the tapes back to the teachers. As teachers review the tapes and implement any recommendations, the tapes are revised with new footage of the class and teacher comments. Through this video exchange, a library of best practices can be developed which can be accessed at any time.

If you would like more information, please call
Toni Waylor Bowen
(404) 651-4089

NORTHEAST REGION

The strategic planning meetings that occurred in the Northeast Region of TRACES identified a need to examine training models. Participants from the New England Center, Rhode Island, and Vermont discussed the use of the INSITE inservice training model for early intervention service providers. The appeal of the INSITE training model is in its focus on family-centered delivery of services.

Recently, personnel from TRACES and these 307.11 projects collaborated in planning a regional training workshop using the INSITE training model. This workshop titled, “A Model of Home Intervention for Infant, Toddler, and Preschool Aged Children with Multiple Disabilities and Sensory Impairment,” is scheduled to occur July 10-14, 1995. Tracy Evans-Luiselli, 307.14 Pilot Project Coordinator for the New England Center and one of the certified national trainers of the INSITE model, will provide some of the training. The remainder of the training will be provided by staff from Ski-Hi Institute, Utah State University, Logan, Utah.

Participants who attend the INSITE training workshop will learn about the delivery of effective home programs for children who have dual sensory impairments.

INSITE training objectives for participants include becoming familiar with and gaining basic knowledge about the following:

- The rationale for early home intervention
- The characteristics and needs of children and families
- The role and characteristics of the parent advisor
- How to work with families in the home environment, convey information and teach skills via modeling
- Multiple Insite curricular areas
- An overview of the variety of support services
- An overview of the variety of resource materials

The time commitment for participants will be substantial, but the opportunity to network with colleagues both within and across states, while gaining knowledge and skills related to service delivery, will be significant.

For further information regarding the Northeast regional INSITE activity please contact
Lisa Jacobs
(617) 972-7517

OKLAHOMA

In October, 1993 there were three needs identified by the Oklahoma Deaf-Blind Project Coordinators: (a) to develop model sites demonstrating responsible inclusion of students with deaf-blindness that could be replicated throughout the state, (b) to increase parents’ knowledge of effective practices, and (c) to provide service providers and families of children with deaf-blindness with training in personal futures planning (PFP). To meet these needs the Oklahoma Deaf-Blind Project, TRACES, and HKNC-TAC collaborated in providing technical assistance.

Two elementary schools in Oklahoma were selected as implementation sites to receive consultation for a
student transitioning from one school to another. In the new school the student would be in a program that required changing classes several times a day. The Oklahoma Deaf-Blind Project assisted with disability awareness training and facilitated problem-solving by classmates. Project staff followed-up with phone calls and visits. In addition, HKNC-TAC conducted training for staff on the philosophy and process of PFP and will facilitate a PFP meeting for the child at an appropriate future date. This collaborative effort has provided awareness and skill development training to a number of service providers while meeting a specific child’s unique educational needs.

If you would like more information, please call
Jan Watts
(405) 325-0441.

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For Your Library


By K. McNulty, L. Mascia, L. Rocchio, & R. Rothstein

This chapter provides a comprehensive view of recreation and leisure activities. Beginning with a theoretical overview of the value of recreation, the piece then moves to the specifics of guidelines for programming, instructional strategies, profiles and case studies.


This handbook shares with parents and other professionals, the lessons learned in 14 years of horticultural therapy that has been part of the curriculum at Perkins. Includes descriptions and drawings of adaptations that aid physically disabled people to enjoy gardening.


By T. Gavin

Offers suggestions to service providers on how to ascertain the deaf-blind person’s interests, likes/dislikes, fears, etc., so that appropriate leisure activities can be developed. Gavin encourages providers to offer integrated leisure activities that expand upon the deaf-blind person’s skills and interests.


By L. Lieberman

This article presents games and activities developed for students who are deaf, blind, deaf/blind, deaf/multihandicapped and blind/multihandicapped. Games and activities are arranged in a developmental sequence, beginning with locomotor skills and ending with fitness and recreation.
Available in late May 1995, the DB-LINK Family Resource Directory lists the services of eleven national organizations that serve as a resource for families of children who are deaf-blind. This directory was produced in cooperation with the National Family Association for Deaf-Blind. Included in the directory are agency summaries, rolodex cards, and postcards to send for additional information.

To request your free directory:

**Families, please contact**
National Family Association for Deaf-Blind
111 Middle Neck Road
Sands Point, NY 11050-1299
(800) 255-0411
(516) 944-8637 TTY

**All others, please contact**
DB-LINK
345 N Monmouth Ave

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**Conferences**

2nd International CHARGE Syndrome Conference
Portland, Oregon
July 21–23, 1995

Members of the CHARGE Medical Advisory Board and other specialists will be available for consultation during the conference. Concurrent with the clinic will be an informal welcome session. There will be presentations about the CHARGE Syndrome Foundation. Registration is $75.00 for adults and $30.00 for children (ages 3–18 yrs.).

For more information contact

Marion Norbury
CHARGE Syndrome Foundation
2004 Parkade Blvd.
Columbia, MO 65202
(800) 442-7604
Helen Keller National Center Announces
Deaf-Blind Awareness Week, June 24–July 1

When Heather Whitestone was crowned Miss America in 1995, she reminded us that nothing can prevent the realization of a dream. Inspired by Helen Keller, Miss America’s message of “Face your obstacles, work hard, and build a support team” inspires all people, but is especially relevant for people who are deaf-blind...one of the most severe disabilities.

Please join the Helen Keller National Center along with other agencies and organizations worldwide, in celebrating the 1995 Helen Keller Deaf-Blind Awareness Campaign.

Conferences

Symposium on Deaf-Blindness: 1995
Austin, Texas
June 23–24, 1995

Open to parents, professionals, and anyone interested in deaf-blindness. Topics include; unique educational and social needs, case study information, using the tactile sense, using low vision, using the auditory system, and deaf-blind services in the 1990’s. Together, families and professionals will discuss and show videotaped examples of problems and solutions. Registration is $10.00. The number of participants is limited to 225 with limited out of state availability.

For more information contact
Beth Sanchez
TSBVI Deaf-Blind Outreach
1100 West 45th Street
Austin, TX 78756
(512) 454-8631

Lilli Nielsen National Conference
Novi, Michigan
June 19–23, 1995

The Blind Children’s Fund will host a National Conference For Active Learning; Turning Latent Potential into Dynamic Ability for Infant, Preschool and Multi-Impaired Blind and Visually Impaired Children with noted Danish educator Dr. Lilli Nielsen. This one week course will present Dr. Nielsen’s Active Learning Approach. Original and creative new techniques and materials will be introduced for effectively providing learning environments for blind, visually impaired, and multi-impaired children.

For more information contact
Blind Children’s Fund
2875 Northwind Drive Ste 211
East Lansing, MI 48826-5040
(517) 333-1725
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- Service provider (e.g., social worker, group home)
- Technical assistance provider
- Higher education teacher/researcher
- Regular education (non Spec.-Ed.)
- Therapist (e.g., OT/PT/speech)
- Teacher trainer
- Government personnel
- Medical professional
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or call Randy Klumph (503) 838-8885, TTY (503) 838-8821, fax: (503) 838-8150, E-mail: klumphr@fstr.wosc.osshe.edu

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