Caring for Children with special needs

VISUAL IMPAIRMENTS

Visual impairment is the acceptable generic term that refers to all levels of vision loss. Visual impairment does not equal blindness, but vision loss can make it difficult or impossible for a person to do some things. Most children considered visually impaired have some usable vision. Even those considered blind often can tell the difference between light and dark. You cannot make assumptions about children by their diagnostic label. Abilities and individual needs may vary widely.

Here is a list of various terms used to describe visual impairments. Ask parents what term they prefer to refer to their child’s diagnosis or disability.

- **A loss in visual acuity** means a person can’t see things clearly, or can’t see details.

- **Visual field** refers to the area that a person can see without moving the head.

- **Partially sighted/low vision** means that a person has enough vision to read regular print or large print.

- A person is **legally blind** (sometimes called 20/200) when, with the best correction of vision, can see at 20 feet what a normally-sighted person can see at 200 feet.

- **Amblyopia**, often called lazy eye, occurs when the image from one eye is suppressed as it travels to the brain. Sometimes this condition is treated by putting a patch on the stronger eye so the “lazy” eye is forced to work harder. This patch may need to be worn for a few months or even a year, and sometimes glasses also are needed. Early treatment is essential; the younger a child is, the more quickly his eye will respond to treatment.

  Wearing an eye patch can be uncomfortable. A child unaccustomed to using her “lazy” eye can feel different and may protest or complain. Remember, the most important factor is keeping the patch on her eye. Avoid the practice of letting her take off the patch as a reward for wearing it for a period of time.

- Sometimes a child has a visual impairment in addition to another disability. It is unfair to make generalizations about children with multiple disabilities because each child is unique. The best guides for children with multiple disabilities are their parents and therapists.

- Children who are legally blind receive **orientation and mobility (O&M) training** at a young age from professionals who help the child learn to get around. As a preschooler, O&M instructors probably work on **sighted guide**
skills so that blind children can hold onto a person’s wrist or arm and travel comfortably in unfamiliar or outdoor settings. If you are working with a blind child, ask the O&M instructor to work with the child in your care setting.

- Fatigue, time of day, and medications can cause fluctuating vision. A child may be able to do a task at one time of day, but not at another. If a child complains or gets frustrated, take the time of day into consideration and encourage him to rest his eyes. It also may help for the child to wait a few minutes when he comes into a darker room from the outside.

- Refusing to touch things is called tactile defensiveness. If it’s a big problem, an occupational therapist can help. It’s okay for a child to be tentative about touching something for the first time, or to refuse to touch particular textures. Do not force a child to play with finger paints, play dough, or glue. She needs to have control over the amount of sensory input she gets.

- A visual impairment doesn’t affect what a child is able to learn, but it can affect how a child learns. Everyday communication can become a real challenge. Without eye contact, it’s hard to tell if a child is paying attention (or if someone is paying attention). Children with visual impairments may also miss visual cues, such as a frown, raised eyebrows, or smiles to communicate with others. Waving, pointing, and nodding can also create confusion because they are visual cues.

**Strategies for inclusion**

Remember that each child is unique. To help you know what to do with a child who has a visual impairment, ask the child’s parents, therapists, or an adult with a similar disability. Ask the child for suggestions, too.

Here’s a list of questions you might want to ask the parent of a visually impaired child at your first meeting. This example uses Sally, a four-year-old with some vision (you don’t know how much), who has only limited experience in settings outside her home. Knowing the answers to these questions can help you create a safe environment for Sally.

- What lighting is best for Sally?
- Does she move easily from a light room into a dark room (or from a dark room into a light room)?
- What positions are best for her? Does she do better when she has toys, food, or other things presented to her on her right side, or her left?

- What does Sally enjoy looking at? Bright lights? Colorful toys? Things with black and white patterns?
- Does she use vision to get around or avoid large objects? Does she need to touch things to avoid them?
- Does Sally like people to say something to her when they enter the room so she knows they are there?
- Does Sally enjoy looking at books with bright pictures? Does she enjoy coloring if the outlines are heavy? (You can make lines darker with a marker.)

During dressing, eating, or any other daily activity, use lots of communication so the child knows what will be happening. This is called “providing cues.” It’s also helpful to be consistent. For example, if you’re putting on a young child’s shoes, always put the right one on first to make things easier for her. You can say, “Let’s put your sneakers on now. First the right one. You help me by holding up your right foot.”

Using an adult-sized toilet may make a young child with a visual impairment feel insecure. A small potty chair might be more comfortable because he can feel the floor underfoot and get on and off the potty chair without help.

Avoid sudden changes of lighting. For example, as a child moves from a darker hallway to a bright play room, blinds can be partially closed before she enters the play room. After a few minutes, the blinds can be opened again.

Keep closet and cabinet doors fully open or fully closed. Pad table corners. Make sure there are no curled up edges on rugs.

Moving across a large open space may be frightening for a child with a visual impairment. If she needs to, can she travel along the side of the room and use furniture to guide her? If she does this, keep furniture in the same place. Toys, personal items, and the potty chair also should be within easy reach.

Allow a child with a visual impairment to visit before she starts coming to you for child care. Let the child explore the environment when there aren’t other children around, when things are quiet and the child can “check out” the environment.
Other helpful hints

■ Don’t be too quick to “rescue” a child. Try to give a child the least amount of assistance possible. Ask the child if he needs help instead of rushing to his aid.
■ Ask parents if their child likes to be touched. Some children with visual impairments don’t, but most do. A simple touch on the shoulder can be very reassuring.
■ Some children with visual impairments may have the best vision in their peripheral (outside) vision. When that child is paying attention to you, her head may be turned away from you.
■ Use language full of descriptions. Tell him about colors, the weather, and things that are happening around her. This may seem awkward at first, but you will get used to it.
■ Use names. A child with a visual impairment may not be able to see facial expressions or body language that shows who’s being spoken to (such as who you’ve turned your head toward). Speak to everybody by name, especially if there are other people in the room. You also may want to wear a bell or noisemaker to help children with visual impairments know when you’re near.
■ Use your voice to communicate feelings and meaning. Tone and volume can communicate sadness, happiness, anger, or other emotions.
■ Relate directions to body parts. Don’t say, “You dropped your mitten on the floor.” Say instead, “You dropped your mitten on the floor in front of your right foot.”
■ If you use stickers as rewards, remember that regular stickers may not be interesting for a child with a visual impairment. Try scratch ‘n sniff stickers, or stickers with different textures. Stars and smiley faces on a chart also won’t motivate many children with visual impairments. Think of other ways to mark a child’s performance, possibly using things that can be felt.
■ It also is important for a child with visual impairment to find play materials where she expects them. However, she may feel bad if other children are told not to touch her materials. Help other children in your program learn the social skill of saying what they are doing whenever they change another person’s materials. For example, “Alenda, I need some of your paste. I’m going to move it over here (guiding Alenda’s hand) so we can share, okay?”

Resources for caregivers

You might want to invite a visually impaired adult to come to your center. Children love gadgets and will enjoy seeing some of the fascinating adaptive equipment that has been developed for use by people with visual impairments. There are wrist-watches and wallets that talk, balls that beep, and electronic devices that expand mobility. Contact your local independent living center or association for the blind. It also may be possible to invite someone to visit with their guide dog to talk about how these dogs are trained, and how they do their work.

A parent reports, “We were very lucky to meet a blind woman right after Molly’s birth. This has been a blessing because we have a positive role model for Molly.”

For more information, contact these organizations that serve people with visual impairments:
■ American Foundation for the Blind, 11 Penn Plaza, Suite 300, New York, N.Y. 10001; (800) AFB-LINE.
■ National Association for Parents of the Visually Impaired, P. O. Box 317, Watertown, MA 02272; (800) 562-6265 or (617) 972-7441.
■ National Organization of Parents of Blind Children, 1800 Johnson Street, Baltimore, MD 21230; (410) 659-9314.

For information on how to contact the Library for the Blind in your state, call your public library. The Library for the Blind has books that have been recorded on tape and may be borrowed without cost by people with visual impairments. Many children’s books have been recorded.

Technical references


More information

This publication is part of a series, Caring for Children with Special Needs. You may find other fact sheets in this series with helpful information. For the most current update of these fact sheets, check the National Network for Child Care website at: http://www.nncc.org
- Caring for Children with Special Needs: Feeling Comfortable (overview)-NNCC-98-06
- Caring for Children with Special Needs: Allergies and Asthma-NNCC-98-08
- Caring for Children with Special Needs: Attention Deficit Disorder-NNCC-98-09
- Caring for Children with Special Needs: Challenging Behaviors-NNCC-98-10
- Caring for Children with Special Needs: Chronic Illnesses-NNCC-98-11
- Caring for Children with Special Needs: Developmental Delays-NNCC-98-12
- Caring for Children with Special Needs: HIV or AIDS-NNCC-98-14
- Caring for Children with Special Needs: Physical Differences and Impairments-NNCC-98-15
- Caring for Children with Special Needs: Seizure Disorders-NNCC-98-16
- Caring for Children with Special Needs: Speech and Language Problems-NNCC-98-17

Also see the National Network for Child Care web site: http://www.nncc.org

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