

# InSight

Summer 2014

Association for Vision Rehabilitation and Employment, Inc.

# ACCESSIBLE TECHNOLOGY FOR KIDS!

AVRE recently presented a three-day Accessible Technology Workshop for visually impaired school-age children. Attended by seven of AVRE's young consumers and their parents, the workshop was held in our on-site ACCESS-Tech Center and was taught by our own Assistive Technology Instructor, John Ellzey.

John began with some general instruction for the children and their parents in assistive computer technology. He presented information on the ZoomText screen magnification software program and touched on the JAWS screen-reading program. He also instructed them on the iPod Touch operating system (iOS), Zoom (iPod's screen magnification program), VoiceOver (iPod's screen reading program), as well as Windows keyboarding shortcuts.

Then everyone went to the tech center for some hands-on learning. There, John gave a brief demonstration of each product and then allowed the children and parents to rotate from station to station. He made certain to represent all of the areas and devices that children with low vision and blindness may find helpful in their current school situations. These stations included devices such as several styles of Closed Circuit Televisions (CCTV), scan and read devices, hand-held spot magnifiers, and computer screen magnification and readers. The kids loved being able to try out each station and experience new devices!





Above: mom and daughter trying out ZoomText together. Left: testing two different hand-held magnifiers.

Through a grant from the Lavelle Fund, we were able to purchase and provide an iPod Touch 5th generation to each child free of charge. On the final day, John taught the kids how to use the iPod's general features and functions and then really dove into the accessibility features of the device, including Voiceover, a preinstalled screen reader that appears on all iOS devices. Soon, everyone was tapping and swiping their fingers across their iPod screens like old pros!

Visually impaired students can benefit immensely from technological advances. Everyone agreed the workshop was a great experience, a lot of fun, and they all learned a lot!

AVRE also held a one-day "Train the Trainer" workshop for Teachers of the Visually Impaired (TVI). John updated the TVIs on many of the changes that have happened recently with regard to mergers and software updates. The TVIs were shown how to use the latest in technology, just like their students. During a round table discussion, they shared their experiences and individualized techniques they each use in their different school districts, and John (who is also visually impaired) shared his own experiences with some of the popular magnification devices.

Continued on next page.

### **Our Mission:**

"To create opportunities for success and independence with people who have sustained vision loss."

John's main focus with this workshop was to convey to the TVIs that AVRE is a valuable resource, and we are here now and in the future for any needs they and the children they teach may have.

Both seminars were made possible by a multi-year grant from the Lavelle Fund for the Blind, Inc., for the purpose of educating blind and visually impaired students and their instructors on cutting edge technology. Formerly the Lavelle School for the Blind in New York City, the Lavelle Fund supports programs that help people who are blind and visually impaired lead independent, productive lives, together with eye care programs working to prevent and treat vision loss.



Our kids and their parents proudly show off their Certificates of Completion of the Accessible Technology Workshop.

# CONTINUING HIS OWN EDUCATION

We're excited to announce that our Assistive Technology Instructor, John Ellzey, has been chosen to participate in National Industries for the Blind's (NIB) next round of Business Management Training (BMT)! BMT targets qualified, high-potential employees of NIB associated agencies who are blind, motivated to succeed, and have demonstrated leadership ability.

In partnership with George Mason University's (GMU) School of Management, BMT offers a challenging, participant-based program that provides a strong business curriculum. The curriculum consists of five intensive, 3-1/2 day educational sessions, spread across 15 months, taught by GMU School of Management and Executive Education faculty. The program will cover a number of business topics: business framework, finance, business development and growth opportunities, marketing, and organizational performance. Upon completion of the BMT program, participants receive a certificate of completion in Business Management from GMU and continuing education credits.

John's first session begins September 22nd. We will keep track of his progress and keep you posted!

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# CONTINUING OUR EDUCATION

In the previous issue of InSight, we told you about our newly created Professional Development Fund. This fund was created for the purpose of providing the means for our professional vision rehabilitation staff to attend educational seminars and conferences, so that they may stay abreast of the newest techniques and methods for assisting people with vision loss.

We are so pleased that some of our consumers, readers, and friends have answered our appeal!

Each year, the Association for Education and Rehabilitation of the Blind and Visually Impaired (AER) holds an international conference that is attended by hundreds of vision rehabilitation professionals from all over the U.S., Canada, and other countries. The 2014 AER International Conference was held in San Antonio, Texas, July 30th through August 3rd. Because of the generous response to the announcement of the Fund, we were able to send Teri Chamberlin, our new Director of Health and Rehabilitation Services, for three of those days. Here is Teri's report:

"The conference was a wonderful opportunity for me to learn about the blind community. I was immersed in a plethora of opportunities to obtain information, ranging from technical information regarding blindness, to the newest research available!

"This extraordinary learning opportunity focused on how to best assist our consumers. Some topics included: a lifetime of physical activity from childhood through adulthood; how to work with seniors who experience vision loss; how and where to purchase low cost items to replace higher-end adaptive tools; the importance of motivating children and teens to become involved in their community, which increases their sense of worth and assists in obtaining a job later in life; and a new medication that may help with Non-24-Hour Sleep-Wake Disorder. I also obtained some business-related ideas on how others grow their low vision clinics, trending careers in our field, incorporating the multi-disciplinary model into everyday practice, and information about pending legislature.

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"In addition to the formal educational opportunities the workshops presented, I also obtained priceless information from other professional staff members and directors. These included trends in the field, issues that they face (transportation cost and access is a nationwide problem!), and some ways they have attempted to resolve these issues that are prevalent throughout the industry. I look forward to maintaining these relationships throughout the years!"

Because Teri is new to AVRE and to the blindness field, it was wonderful that we were able to provide this opportunity for her. It is our hope that the Professional Development Fund will continue to grow so that we may send more of our staff to next year's conference.

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### **WELCOME ABOARD!**

We are happy to welcome Amanda Elam to our team as our new Manager of Business Development. Amanda has a wealth of knowledge for finding and bringing new possibilities for product manufacturing and contract services to the business division of AVRE.



Originally from Clifton Park, New York, Amanda now lives in Schenectady. She's well-traveled, having moved around the country with her parents while growing up. She has lived and worked in Phoenix, Arizona, and for the past 13 years, she has worked in Albany for the New York State Preferred Source program (formerly NYS Industries for the Blind). Because of her most recent position, she is no stranger to assisting agencies for the blind grow their manufacturing divisions through finding new business opportunities. And because she has worked hand-in-hand with AVRE in the past, she is no stranger to us!

Amanda obtained her Bachelor of Arts degree from SUNY Albany. She is married and has a 15-year-old daughter. Because she lives in Schenectady, she works primarily from her home office, but we get to see her in her office at AVRE once per week.

Amanda says, "I hope that bringing my knowledge of the New York State Preferred Source program, as well as the National Industries for the Blind's Ability-One program (formerly JWOD), will really pay off for AVRE." We know it will, Amanda! Welcome aboard!

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# VISION ASSESSMENT UPDATES

For several years, AVRE has been offering a new service in our on-site Norman Richterman Low Vision Clinic to people who are experiencing a loss of vision but are not yet legally blind. We want to remind you of its availability and let you know about some changes to this service.

Anyone who has a visual acuity of 20/50 (previously 20/70) or worse in the best corrected eye, or is having difficulty reading regular-sized (newspaper) print, and who has had an eye exam by their regular eye care provider within the past two years (previously one year) may come to AVRE for a Functional Vision Assessment.

The Functional Vision Assessment is provided at no cost to the patient and is performed by AVRE's Certified Low Vision Therapist, Diane McMillan. During the exam, Diane will check: near vision, contrast sensitivity, glare control, visual perceptual, and visual motor functioning to determine the appropriate level of magnification needed for reading. She will demonstrate and provide instruction for the use of a range of low vision aids that may enhance the patient's visual function and compensate for some of the vision loss. Devices that might be demonstrated and recommended include: large print items, reading stands, special lamps, writing implements, hand-held or stand magnifiers, electronic devices, and software. Upon completion of the evaluation, Diane will recommend appropriate strategies and/or devices. The patient's only financial responsibility is for the cost of the devices they choose. If issues or problems are identified during the assessment, the patient will be advised to contact their eye care provider.

If you, or someone you know, are not legally blind but are experiencing some vision loss and difficulty seeing regular print, you may call us at 607-724-2428 to see if you are eligible for a Functional Vision Assessment.

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## FORE!

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For the past 13 years, we have hosted the Bicycle Race For Sight, our only fundraising event. The race has been a lot of fun and has helped us to raise thousands of dollars to help support our vision rehabilitation and employment programs. However, we decided it was time to try something different this year.

Announcing... AVRE's 1st Annual Nine at Night Golf Tournament! The tournament will be played on a 9-hole course, with up to 18 Captain and Crew teams. But this one is a little bit out of the ordinary, as golfers will be playing by the light of the moon! They'll use golf balls that glow in the dark on an unlighted course. Sounds exciting, doesn't it?

The tournament will take place on Saturday, September 13, at the Chenango Commons Golf Course in Chenango Bridge, New York. We'll let you know how it goes!

OS

# A CELL PHONE FOR ALL!

Cell phones that are accessible to people who are blind or visually impaired have come a long way! Just within the past decade, they have gone from being a totally useless object for someone who can't see, to being a totally accessible one. However, as the technology grows and the phones get "smarter," they become more complicated to use and can be very expensive to purchase. Sometimes, all we want is something that is basic, easy to use, and inexpensive. The ODIN VI Accessible Cell Phone just might be the one for you.

The ODIN VI is a talking cell phone that is 100 percent accessible and easy to use, also making it a great option for seniors. Besides making and receiving calls, it can be used to send and receive text messages; however, it does not have internet capabilities. It speaks everything that is on the screen, speaks the keys that are pressed, and it prompts the user to perform certain functions. It speaks the caller ID for incoming calls, the amount of battery charge, the signal strength, and the time and date. Once contacts are programmed in, you can move through the contact list and hear the names read out loud. You can access your call log to hear which calls you have missed.

The phone is a sliderstyle and contains only a standard numeric dial pad; there is no QWERTY keypad. Short text messages are typed by pressing the corresponding number key repeatedly until the desired letter is reached. For example, to type the letter "c," press the number two key three times, or to type the letter "n," press the number six key two times. The phone will speak each letter as the key is pressed. When typing is completed, the message can be checked before sending by having the phone speak it to you.



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Here are some other features of this phone:

- The ability to set daily and weekly alarms and reminders
- Adjustable speech speed
- Choice of 3 voices 1 male and 2 female
- Adjustable screen brightness
- Display choices of black on white or white on black
- Typed numbers displayed in 24 point font, as well as spoken
- Text messages displayed in 12 point font, as well as spoken
- "Call" and "End" buttons labeled in braille
- Raised dots on the "5," "star," and "pound" keys
- Hearing aid compatible
- Stores up to 200 contacts and 100 text messages
- Hands-free speaker phone option

- Choice of three ringtones
- Option to vibrate with incoming calls
- Program up to three emergency numbers press and hold any button for approximately five seconds and the phone will dial each number in turn until the call is answered.
- Battery standby time of up to ten days and talk time of up to five hours.

The phone comes with service from Odin Mobile, a cell phone provider that operates on the T-Mobile network. There is no contract for service, and there are five prepaid plans to choose from, ranging from just \$10 for 30 days of service, 150 minutes of talk time, and unlimited texts, up to \$45 for 30 days of service, 4000 minutes, and unlimited texts. Odin Mobile is the world's first wireless carrier to focus exclusively on people who are blind or visually impaired.

The ODIN VI weighs 3.5 ounces and is 4 inches high by 2 inches wide. The keypad has nicely spaced, large buttons that are easy to locate and use, and the menus are simple and easy to navigate. The control buttons are different colors and shapes to make identification easy. The phone comes with a weighted desk stand, power adaptor, USB cable, earpiece, an Odin Mobile SIM card, and a Quick Start Guide. The ODIN VI sells for \$150 and is available from Perkins Products. We currently do not carry it in our store. To order, you may contact Perkins at 617-972-7308 or online at www.perkinsproducts.org.

OB

# 3RD ANNUAL LOW VISION EXPO

AVRE's 3rd Annual Low Vision Expo will be held on Friday, October 31, 2014, from 10:00 AM until 3:00 PM. It will be held at the AVRE facility at 174 Court Street, Binghamton, New York. The free event is open to anyone who is interested in learning more about low vision resources.

We will again feature displays and demonstrations of the latest in adaptive/accessible technologies for reading, computer use, magnification, and other low vision aids and devices. AVRE's professional vision rehabilitation staff will be on hand to discuss services and solutions that are available to support independence, good life quality, and employment options. There will also be two educational presentations by AVRE staff.

Light refreshments will be available. Parking is available in our lot, located behind our building. You may access the lot from either Jay Street or Carroll Street. Please enter the building through the glass door located in the parking lot. Registration in advance is requested.

For more information about the Expo and to register to attend, please call Kim at AVRE, at 607-724-2428.

# **DEPRESSION AND VISION LOSS**

Taken from an article at www.nih.gov.

Depression is a common risk for people who've lost vision from age-related macular degeneration (AMD). A type of therapy called "behavior activation" can cut this depression risk in half.

About 2 million Americans age 50 and older have low vision due to AMD, a leading cause of vision loss. Millions more have early-stage AMD. The condition damages the macula, a spot near the center of the retina. As the disease progresses, it can cause a growing blurred area near the center of vision.

AMD makes everyday activities—like driving, reading, watching television, and housework—more difficult. It interferes with activities that were once fun and fulfilling, and makes it hard to get out and see friends or meet new people. As a result, up to 25% of people with bilateral AMD (in both eyes) develop clinical depression.

To address this problem, Dr. Barry Rovner at Thomas Jefferson University in Philadelphia led a team testing an approach called behavior activation. The treatment helps people maximize their functional vision and engage in activities they enjoy, recognizing that loss of those activities can lead to depression. Maintaining an active social life is an important component of the approach.

The researchers recruited 188 participants with bilateral AMD. Participants were 84 years of age on average, and 70% were women. Half of the participants lived alone. All had a best-corrected vision of less than 20/70 (able to clearly see an object from 20 feet away that a person with normal vision sees at 70 feet away). Each had mild depressive symptoms and was considered at risk for developing clinical depression.

Optometrists first evaluated the participants and prescribed low-vision devices such as handheld magnifiers. Participants were then randomly split into two groups. One group received behavior activation. Occupational therapists helped them use the low-vision devices, make changes around the home (such as using brighter lights and highlighting objects with high-contrast tape), increase social activities, and set and achieve personal goals by breaking them down into manageable steps. People in the second group met with a support therapist to talk about their vision loss and disability. Both groups had six hour-long therapy sessions in their homes over a two-month period. They were allowed to take antidepressants, but less than 10% did so.

By four months, 18 in the control group (23.4%) and 11 in the behavior activation group (12.6%) developed clinical depression. Behavior activation had the most benefit for participants with the worst vision (less than 20/100), reducing the risk of depression by about 60% compared to controls. Overall, the researchers estimate that behavior activation reduced the risk of clinical depression by 50% compared to control treatment.

"Our results emphasize the high risk of depression from AMD, and the benefits of multi-disciplinary treatment that bridges primary eye care, psychiatry, psychology, and rehabilitation," Rovner says. The study will continue to follow participants to assess the benefits of treatment out to one year.

If you, or someone you know, is experiencing vision loss and would like to learn more about low vision and depression, contact AVRE at 607-724-2428 for more information and referral.

CB

# OPTIC NERVE HYPOPLASIA

Optic Nerve Hypoplasia (ONH) is the single leading ocular cause of blindness and visual impairment in young children. The condition occurs during pregnancy when the child is developing in utero. ONH is not inherited, it is not progressive, and it cannot be cured.

ONH refers to the underdevelopment or absence of the optic nerve, combined with possible brain and endocrine abnormalities. The optic nerve is a collection of thousands of nerve fibers that transmit visual signals from the eye to the brain. Normally, the optic nerve develops and grows during intrauterine life. But with ONH, something happens that prevents normal optic nerve growth.

In most cases, there is no known cause of ONH. Although the condition has been associated with maternal diabetes, maternal alcohol abuse, maternal use of anti-epileptic drugs, and young maternal age (20 years of age or less), most cases of ONH have no clearly identifiable cause. There are no known racial or socioeconomic factors, nor is there a known association with exposure to pesticides.

Vision impairment in children with ONH ranges from good (but not perfect) vision to completely blind with no light perception, and it may occur in one or both eyes. Many children with ONH have associated abnormalities, such as problems with their pituitary gland, growth hormones, thyroid gland, sex hormones, adrenal glands, and low blood sugar.

ONH is diagnosed during an eye exam, with the eye doctor looking into the eye to look at the optic nerve. Associated midline brain anomalies can be identified by either an MRI or CT scan. Hormonal insufficiencies require an examination by a specialist in hormonal disorders. Performing an eye exam on a very young child can be difficult because it depends upon the child's ability to cooperate with the examining doctor. Because an early diagnosis is so crucial, it is important to notice any visual and behavioral characteristics, such as squinting in bright light, inability to notice things in the peripheral vision area, inability to locate objects within a space due to a lack of depth perception, lack of interest in eating, excessive lip smacking while eating, inattentiveness and irritability due to low blood sugar.

Once diagnosed, a child should receive medical monitoring and ongoing functional and educational assessment. For the vision loss, rehabilitation therapy is extremely important from the youngest age possible. Through an Early Intervention Program, a professional vision rehabilitation therapist can work with the child to encourage her to use any vision present to become more aware of her surroundings and improve fine and gross motor skills.

### **OUR 2014 ANNUAL APPEAL**

It has been an eventful year for AVRE, full of changes and loaded with excitement about new possibilities! And the coming year promises just as much, if not more.

Our new Adaptive Living Center is nearly finished, and we will be featuring it in a coming issue of InSight. The on-site apartment setting will be a place where consumers can come to learn and practice independent living skills in a home-like environment.

We've had a change in leadership and have added some new faces to our team. We're preparing to acquire a much-needed new machine for our paper production department that will be accessible for a blind operator to run.

Yes... lots of new possibilities for providing more vision rehabiliation services and good jobs for people who are blind or visually impaired. But we still need your help. We will soon be launching our 2014 Annual Appeal, and we ask that you would please consider giving as generously as you can.

If you are not on our mailing list, you can still donate. Just drop your check into the mail to us, or go online to www.avreus.org and click on "Donate."

# Thank you!

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 Word document on disk or cd,
 and regular audio cassette.

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format, please call Joyce Bucci.

A.V.R.E. serves visually impaired individuals of all ages who live in the New York counties of Broome, Chemung, Chenango, Cortland, Delaware, Otsego, Tioga, Tompkins and Schuyler, as well as the Pennsylvania counties of Bradford, Susquehanna and Tioga.

A.V.R.E. is an Affirmative Action and Equal Opportunity Employer. If you would like more information about A.V.R.E. and its services, please feel free to contact us.

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