

# VISION IMPAIRMENT



## FACT SHEET

Vision Impairment in a child presents particular challenges to both the child and the family. If the impairment goes undetected a child may be regarded as slow, lazy or inattentive. If a problem is diagnosed but the child's particular needs are not met, delays in all areas of development may be expected.

The degree of vision impairment can range from mild to total blindness. Although children will have different needs, there are some basic principles applicable to all children with a vision impairment.

### EARLY DETECTION

The sooner a vision impairment is detected, the sooner its effects can be alleviated or modified. Parents are the best observers of their child but may be dissuaded from seeking advice by family or friends saying, 'she'll grow out of it'. Referral to an Ophthalmologist (eye specialist) should be sought for any of the following:

- ⦿ Not watching mother's face when feeding by 6 weeks.
- ⦿ Inability to follow slowly moving objects by age of 6 weeks.
- ⦿ Distorted, grey or white pupils.
- ⦿ Different size or colour eyes.
- ⦿ A consistent turn (squint) after 3 months of age.

### HOW VISION IMPAIRMENT AFFECTS DEVELOPMENT & BEHAVIOUR

Children with milder forms of vision impairment may not have developmental delays, however they may show problems in other areas. For example, if a child needs to get very close to his/her work, hand skills may be poor because

he/she cannot sit comfortably. The child may have difficulty with fine motor tasks, such as threading and pasting.

Some children may not see well at a distance and they may not know that there are other activities with which to play. Consequently, a child may only choose one or two activities. The child may also be unable to see other children at a distance and therefore will be unable to imitate their play, or be tempted to join in.

Children who see poorly in bright light may avoid outdoor play and so lack experience and children with the more significant vision impairments will often have delays in their development. Gross motor (large motor skills such as walking, crawling, etc) delays are usually the most obvious, with walking independently not being achieved until the age of two or three. This delay in mobility has consequences for learning in other areas. As the child with a vision impairment is slower to move, he/she learns less through experience. Some children with vision impairments develop self-stimulatory behaviours to compensate for the sensory deprivation of not being able to see. These can include rocking, light gazing and eye pressing.

Lack of vision from birth can also act to distort social relationships. As we are heavily reliant on eye contact and non-verbal communication to help form social bonds, there is a risk that communication between the child and others will be extremely difficult for both parties. Children with a range of vision impairments from total blindness to a mild impairment may have difficulty in initiating, joining in and maintaining social contacts with other children.

### WHAT YOU NEED TO KNOW

Ophthalmologists and others may use terms which, whilst being correct, add little to your knowledge of a child's vision problem. For example, knowing that a child has had cataracts removed tells

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nothing about what the child can see, and under what conditions the child will see best. To obtain the information required you will need to:

- ⦿ Ask the child's parents and other people who know the child well about what he/she can see.
- ⦿ Observe the child carefully and trust your observations.

If you have contact with therapists or teachers, ask them to explain the problems and how you can help the child get the most out of the vision he/she has. The type of information which will be most helpful includes:

- ⦿ Does the child see best in bright lighting conditions or when curtains are drawn?
- ⦿ Is the child's near vision better than distance vision?
- ⦿ Does the child have colour vision problems? (not common)
- ⦿ Does he/she need to touch objects and people to gain information?
- ⦿ Does the child usually tilt his/her head to see?
- ⦿ Has the child had glasses prescribed?

Caregivers will also need to know the following day-to-day information which can be gained from the parents:

- ⦿ How does the vision impairment affect independence in the child's eating, toileting and dressing?
- ⦿ Can the child walk without being aided?
- ⦿ Does he/she have any other impairments?

It is also important to know the normal appearance of the child's eyes. For example, most children with visual impairments have nystagmus (a flicking movement of the eyes). Sometimes both eyes are smaller than would be expected; in some children the eyes are of different sizes or the pupils are of a different shape.

## PRACTICAL IDEAS

In general, children with vision impairments need information and some assistance, with the aim being to encourage independence. Children with vision impairments need to be helped to learn to do things for themselves.

## Safety

Safety requirements are the same as for all children at the corresponding age. However, extra care should be taken with sharp, eye-level corners, stairs and narrow poles.

Children should be warned calmly: 'Slow down, you are coming to the stairs', rather than a frantic 'Stop!'

When a child is to spend time in a new place, a guided tour can help. Keep the language simple and allow the child to feel the objects you are talking about. If furniture needs to be re-arranged, tell the child about it. If the child appears unsure about where he/she is, remind him/her.

## Give Warnings

This not only applies to safety aspects but it also gives the child predictability, e.g.

'John, I'm going to pick you up'.

'Let me wipe your nose'.

'John, I'm putting your cup on the table'.

This will allow him to prepare himself for what is to follow and will give him a sense of security. A touch cue could be added, especially for younger children. For example, touching his hands when saying you are going to pick him up.

For older children, let them know what is going to happen next, e.g.

'When we've finished lunch, we will get into the car and go to pre-school'.

Children with vision impairments often cannot see the preparations for the next event and so miss out on the anticipation and continuity of experiences.

## Social Interactions

Children with vision impairments need to know who is present. Introduce yourself and always tell the child when you are leaving. Get into the habit of using the child's name before you speak to him/her. When several children are present, you need to interpret what is going on. A young sighted child may offer a toy to the child with a vision impairment and smile, but say nothing. The caregiver may need to say the following:

'Tim is showing you his new toy'.

Encourage Tim to touch the other child and to tell him what he is doing.

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## Mobility

Young children with severe vision impairments or blindness may be capable of walking across an open space, but there may be times when they need to hold your hand. If a child resists this, it is best to allow him/her to be independent unless safety is a crucial factor. You could offer sound cues, such as clapping your hands or speaking loudly, to encourage him/her to move towards you.

## What's Happening?

Children with vision impairments need to know what is going on around them in order to learn and make sense of the world. The most effective way to assist in this is to tell them and allow them to experience what is happening, e.g.

- 'That was the door slamming'. Walk close to the door and open and close it.
- 'That's the baby crying'. Allow the child with a vision impairment to touch the baby.
- 'Can you smell the flowers?' Pick some and put them in a vase.
- 'That noise is David and Tim playing with the blocks'. Encourage the children to all play together.

## Encouraging the Use of Vision

Many children labelled as 'blind' have some vision. It may be minimal, but is enough to be useful for helping in mobility. For example, if a child can distinguish bright light only, this could be used for orientation around a room. (If a child can locate a window, then you may place the child's mattress under it so that he/she will know where to find it). If you know that a child can see this much, pointing out light sources, such as an open door, will aid the child's independent mobility.

## SOME HELPFUL SUGGESTIONS TO ASSIST THE CHILD WITH A VISION IMPAIRMENT

### Colour Contrast

- Blue blocks on a yellow mat
- Sultanas in a white dish
- Milk in a red cup
- White edging on concrete steps

### Lighting

- Is it sufficient or too much?
- Is it in the right place? (falling onto the child's work and not on his/her face)

### Glare

- Water play in the shade
- Sun-glasses and a hat worn outside
- Cover shiny laminex tables with paper

### Glasses

- If glasses are prescribed, are they being worn?
- If worn, are they scratched or dirty?

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