

## **Screening and Assessments**

### **1 What is deafblindness?**

Deafblindness is a condition in which your child has difficulty in seeing and hearing. Your child usually has problem in communicating with you and taking care of his day to day needs. He also needs help in moving from place to place. Your child will learn things much slower than other children around him

### **2 Where are deafblind people found?**

People with deafblindness are in all sections of society. As majority of the Indian population-approximately 80% of lives in villages, it is estimated that majority of deafblind population also would be in rural areas.

### **3 How do we identify people with deafblindness?**

People with deafblindness can be identified by many ways:

- Contacting village "sarpanch" and going through the village population data at panchayat office
- Conducting a door to door survey
- Conducting screening camps in the villages
- Contacting Primary Health Care (PHC) Center doctors
- Contacting Pediatric Clinics
- Getting Information from Government hospitals
- Information from child guidance centers
- Survey data from other special schools/other organisations

### **4. Who may be roped in to identify people with deafblindness?**

- Multipurpose health workers who are part of government health system machinery can be imparted short training to understand deafblindness and then can be used for identification of children with deafblindness
- Anganwadi workers/local school teachers: Each village has an anaganwadi (Nursery) for young children. If a short training is provided to anaganwadi teachers they can help in identifying deafblind children at early stage.
- PHC doctors: The Rehabilitation Council of India with the help of Ministry of Health has successfully implemented a training program on disability management for PHC doctors thus now they are acquainted with the term deafblindness and can be used for identification and screening purposes.
- Trained field workers: The workers from the local areas with adequate training in deafblindness can conduct door to door survey in the village. This can provide an authentic data.

### **5. What are the needs of persons with deafblindness?**

The needs of the persons with deafblindness vary from person to person. Some of these could be:

- Communication
- Orientation and mobility
- Acceptance of person as part of family
- Environment to learn basic skills
- Medical support
- Assistive devices
- Formal/Non formal Education

### **6. What different tools would be required to identify and prioritise their needs?**

The following tools would be helpful in identification and prioritising the needs of deafblind people

- Survey format
- Screening schedule
- Medical certificates
- Functional assessment format

### **7 Which approach works in rural setting?**

A service at the door steps is normally the approach that has been successful. Non-availability of special centers, limited transport facilities, poverty and no trained man power available in area contribute to the success. Looking to these conditions the best option is to work with the child at home and empower the family and the community to deal with the challenges of deafblindness. This approach is also known as Community based Rehabilitation/Home Based Programme.

### **8 What type of training should be given to these children?**

- Training in Communication skills will be a major area.
- Teaching self care skills in person's own environment and with available low cost material
- Training in age appropriate functional activities with involvement of the primary caregiver e.g. training for a 22 yrs. young adult with deafblindness in family occupation like farming, cattle rearing or working in the small shop would be an ideal one.

### **9 How can you assess Vision & Hearing of the child in rural setting?**

To assess the vision of a child, the following things have to be observed in the child:

- Turns head towards light
- Finds difficult to find his toy on the mud floor
- Brings the toy very close to his eye
- Often bumps into things that are close by inside the house
- Often bumps with things like big stones, tree or other things out side the house late in the evening or at night
- Does not identify mother's smile/does not responds to greetings
- Cries when going out into bright light
- Turns head towards the objects
- Misses objects placed in certain areas and direction
- Doesn't look directly at objects or persons
- Unusual viewing and/or staring at objects/persons
- Continues watering of eye
- Recurrent Eye infections
- Redness of eye

To assess the hearing of a child, the following things have to be observed if the child does not:

- Wake up at a loud noise
- Babble/speech remains monotonous
- Respond to his name sound
- Respond to sounds like Bell
- Respond to the sound of crumpling chocolate paper/ rustling of plastic bag, anklet, radio, TV sound; fire works and water falling into a bucket.
- Respond to animal sounds like barking of dog
- Have a Presence of a common ear infection

### **10 Who will be involved in the assessment?**

The following people/sources of information will contribute in the assessment of the child:

- Parents
- Siblings
- Extended family members
- Neighbours
- Field worker
- Trained rehabilitation worker
- If possible medical reports

### **11 What material should be used for assessment?**

The following materials have proved to be useful in the process of assessments:

- Locally available material like various rattles made from mud, toys made from wood/ mud or leaves
- Bunch of metal bangles
- Clay
- Steel Vessels like spoons, bowls and glasses
- Variety of grains available in that particular area like wheat , rice , bajra, jowar, rajma and other pulses
- Swing on a branch of tree
- Cow Bell
- Various sounds of birds and animals
- Different colored cloths or mirror embroidered clothes
- Colorful toys available in a village market

### **12 How to develop appropriate programme for children in rural settings?**

The following steps could be used in developing programmes for these children:

- List out child's strengths
- List out interest and his likes and dislikes
- Identify present mode of communication
- Identify parents priorities
- List out resources available at home (material )
- List out resources available in immediate community like balwadi/ primary school near house, Panchayat office and local Public Health Care center.
- Identify primary care giver
- Involve parents in assessment and training
- Demonstrate skill training to family members
- Help parents to notice small achievements of child
- Encourage and involve family members to follow the training program

### **13 How to create awareness among the community about deafblindness?**

The following means could be adopted to create awareness:

- Meeting with head of the village (Village sarpanch) Organising Medical camps
- Meetings with village youth groups
- Meetings with other women's groups
- Orientation of village school teachers
- Organising Village awareness camps
- Demonstration of successful disabled people in the village or nearby village
- Counseling parents of other disabled children

### **14 What age the intervention can start?**

Ideally, Intervention should be as early as possible. If disability is of congenital nature, then we can start intervention from the day child has been identified and assessed.

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