Information about visual impairment

Part 1 – General information
About this resource

This is part of a series of information resources on visual impairment for parents and carers of children and young people with a vision impairment.

The resources are designed to help you find out more about your child’s situation and to help you help them.

You will find information on:

- What vision impairment is;
- How this will affect you and your child;
- Where to go for further support and information.

This fourth edition was developed by the Early Support Consortium in partnership with RNIB because families, professional agencies and voluntary organisations asked for better information.

Families were consulted about the content and this publication reflects what parents carers who have ‘been there before’ say they would have liked to have known when they were finding out about their child’s situation.

RNIB revised this current edition using feedback from families and in response to changes in policy and practice that have taken place since the first edition in 2004. It also now includes information for parents of older children and young people and we have consulted young people about the information that they want to be available.

This information can be used on its own. However, some people supporting young children may use it alongside another Early Support publication, the Developmental journal for babies and children with visual impairment. The journal helps parents and carers to track and understand a child's development, celebrate achievement and find out what they can do to encourage their child to learn.

Early Support

Early Support is a way of working, underpinned by 10 principles that aim to improve the delivery of services for disabled children, young people and their families. It enables services to coordinate their activity better and provide families with a single point of contact and continuity through key working.
Early Support is a core partner supporting the implementation of the strategy detailed in Support and aspiration: A new approach to special educational needs and disability, the Government’s 2011 Green Paper. This identified Early Support as a key approach to meeting the needs of disabled children, young people and their families.

Early Support helps local areas implement the Government’s strategy to bring together the services families need into a single assessment and planning process covering education, health and care. Early Support provides a wide range of resources and training to support children, young people, families and service deliverers.

To find out more about Early Support, please visit: 
www.ncb.org.uk/earlysupport

Where a word or phrase appears in colour, like this, it means that:

- You can look it up in the Glossary at the back of the resource;
- The contact details for the organisation or agency identified are listed in the Useful contacts and organisations section; or
- You can find out more in the Who can help section.

There are three more resources in the visual impairment series:

- Visual impairment: Part 2 – Early Years
- Visual impairment :Part 3 – School Years
- Visual impairment: Part 4 – Into Adulthood

Please go to www.ncb.org.uk/early-support/resources to view.

Explanation of the term parent carer
Throughout this resource the term ‘parent carer’ is used. This means any person with parental responsibility for a child or young person with special educational needs or disability. It is intended as an inclusive term that can cover foster carers, adoptive parents and other family members.
Vision impairment

Understanding your child’s vision impairment

Finding out that your child has a vision impairment can be a difficult and emotional experience. Other parents carers say good information and practical advice from families who have lived through some of the things that you are experiencing make a real difference and can really help.

This resource answers some of the first questions you may want to ask. It starts by presenting basic information about eyes and eye conditions. Then it moves on to explain what you can do to help your child.

Understanding a little about how the eye works is the first step towards understanding your child’s condition better.

Parts of the eye

In order to be able to see, three things need to work properly – the eye, the optic nerve and the brain. Although a child’s eyes may appear to be fine, damage to the brain or optic nerve may cause sight loss.
You can find a description of parts of the eye in the Glossary at the back of this resource.

**The development of vision in infants and young children**

Vision is a major source of information that helps us to learn – most estimates suggest that vision provides about 80% of the information we need. The eye is the most developed organ of the body at birth and it develops more quickly than any other immediately after birth. At three weeks old, the eyes are one of the most active parts of a baby’s body.

Vision is still poor at this stage, so a baby needs objects that are of high contrast and that move. The human face is ideally suited to attract and hold a baby’s attention and, even from birth, sighted babies are able to imitate facial expressions and actions.

Much of our vision typically develops in the first year, particularly in the first four to six months, with a major growth spurt at two to four months. Vision is a learned process and by the time a baby is one year old they have typically acquired a wide range of visual skills. Children’s vision continues developing through the first years of life and becomes fully mature around the age of seven.

Vision develops when it is used. If your child has some usable vision, it’s important they are encouraged to use it.

The brain combines information received through vision with information coming through the other senses (touch, hearing, taste and smell) and awareness of our position in space. The fact that 40% of the brain is devoted to processing visual information shows how complex vision is. Children use their eyes to make sense of what they are experiencing. Along the way they are noticing and beginning to understand all sorts of things – we call this incidental learning.

Vision organises the information we receive from each of our senses about the world and makes connections. Vision is an important way that the world attracts and engages a child’s mind. It also enables children to anticipate what is going to happen next.

The development of visual skills, and learning in general, passes through a number of characteristic stages, which have been summarised in the
following way:

- **Awareness** – we become aware of movement, sound, or touch that happens near to us.

- **Attention** – we pay attention to the sights and sounds and other sensory experiences going on around us that we have become aware of. We then begin to learn more about them, including how to find out where they are.

- **Localisation** – once we have found out where a particular sound, smell or sight is, we learn to separate it from what is happening around it.

- **Recognition** – we remember that we have seen or heard or touched that particular object before. We also begin to form a view about whether we like or dislike it.

- **Understanding** – to develop understanding, we have to put together all the information we have gathered. This means we have to use our memory and problem-solving skills in order to work out what to do with the object that we can see, hear, touch, smell or taste.

**What does vision impairment mean for my child?**

There are many terms to describe a vision impairment, some of which are used in this resource. You may hear it described as ‘partial sight’, ‘low vision’ or ‘sight loss’. You may also hear the terms ‘special educational needs’ ‘impairments’ or ‘disability’ being used. These are words that appear in laws and official documents so they may be used by some of the professionals you meet. If you don’t understand the descriptions that people use, ask for them to be explained. If any words in this resource are unfamiliar, check the [Glossary](#) at the back of this resource, which explains some common eye conditions and some of the specialist language which is commonly used.

Seeing is a complex activity and children with a vision impairment often surprise us by what they can see and do.

Eye examinations can tell us a lot about what a baby or child can see. However, language is needed to describe exactly what we see and perceive and it may be several years before a child is able to communicate to us exactly what they can and can’t see. But observing how your child functions in everyday settings provides a lot of useful information about how much they
are seeing.

If your child takes longer to acquire language in addition to a vision impairment, it may take longer for them to understand and communicate just how their eye condition affects their vision.

No one will understand your child’s needs as well as you do. It’s important to share the observations you have made about your child’s sight with any professionals you meet.

**What can my child see?**

Although doctors might be able to give some answers to this question, it often takes time to establish the exact nature of your child’s condition.

Sight continues to develop after birth and research suggests that vision must be stimulated to reach its full, useful potential. Seeing also requires perceptual skills to make sense of the images sent from the eye to the brain.

For this reason, it’s often many months, sometimes years, before parents carers find out the full extent of what their child can and cannot see.

Total blindness is very rare. Most children can see something, though it may not be very much, and it’s important to remember that whatever sight a child has is likely to be useful. For example, children who can only see light and dark may be able to tell where a window is and use this information to find their way round a room.

Various aspects of vision can be measured:

- How clearly your child can see fine detail close up and at a distance, this is called **visual acuity**.
- How well your child can see particular colours and contrast.
- What we can see above and below and to the left and right when looking straight ahead (**field of vision**).
- The effect of lighting on what your child can see.
- How quickly your child’s eyes can adapt when moving from a bright environment to a darker space.
- How well your child can detect and follow something that is moving.
Refraction is the measurement of the correct lenses needed to bring the images seen by the eyes into best focus. Children with reduced vision should have an eye test to check whether they would benefit from wearing glasses. Not all children will need glasses but early diagnosis and correction of refractive errors is very important in young children because a blurred image on the developing retina can cause amblyopia (lazy eye). Left untreated this can stop a child's vision from developing properly.

Children do not need to be able to read letters to have their eyes examined. There are charts for young children where the child is asked to identify and match pictures, not letters. There are other ways to test children and babies' vision that don't require the same level of co-operation, such as electrical measurement, which uses electrodes to measure the signals being sent along the visual pathways. These tests can be done at the hospital.

It is important to remember that visual acuity recorded in a clinic may not be the same as your child's day to day ability to see fine detail at home or in an early years setting where objects are in colour; close, as well as at a distance; and moving.

You might want to ask an orthoptist or optometrist:

- Will glasses help and if so, when must they be worn?
- What can I do if my child doesn’t want to wear glasses?
- Are there any low vision aids which could help my child see better?
- Where should I go for a low vision assessment?
- How well can my child see at a distance, to the side, in colour, in the dark, in bright light, movement and depth?
- Is there any special lighting that will help my child?
- Can you supply a straightforward explanation of what my child can do for the people working in my child’s play group or early years setting?

**Certificates of vision impairment**

The information gathered about your child's vision may be used to issue a Certificate of Vision Impairment (CVI). This is signed by a consultant ophthalmologist to certify your child as sight impaired/partially sighted or as severely sight impaired/blind. Very young children may not be given a
certificate until they are older, particularly if their vision is still developing. Some parents carers worry that having a certificate may ‘label’ their child, although families with older children report that this doesn’t seem to be a problem. You can register this certificate with your local authority visual impairment team.

Whether or not your child is registered has no affect on how your child's needs will be assessed or on planning for the support that they may need. However, it does allow information to be collected about the number and causes of severe sight problems in children, which helps with the planning of services for children with vision impairments. You may want to talk this through with your ophthalmologist when you are ready.

If you or your consultant is unsure about whether your child should have a certificate, another form called a Referral of Vision Impairment (RVI) can be filled in at the clinic. This can help put you in touch with local social care and other services – as well as collecting information about children who need help because of their eyesight, even if their vision doesn't meet the criteria for registration.
In the beginning

Finding out that your child has a vision impairment can be an emotional roller coaster.

At different times you may feel disbelief, anger, fear, sadness, worry and frustration in addition to all the joys and pleasures that your child brings. Different feelings come and go and sometimes they catch up with you when you least expect it. All the while your baby needs food, love, warmth and security, which demands your energy, care and attention. This resource is about helping you to create a loving and stimulating environment within which you can introduce your child to new experiences and awaken their interest in the people, things and places around them.

All children develop in their own way, at their own rate. Some are early talkers, others early walkers, some cry a lot while others smile a lot. Children progress at different rates whether they have a vision impairment or not.

However, fully sighted babies soon see things that they want to touch and begin to reach out for them. Their sight gives them motivation to explore, move and learn. Children with vision impairment may need help to make sense of the sounds they hear and to find out more about the toys, clothes and objects they touch. This resource can help you to stimulate your child’s curiosity and encourage them to discover things in the world around them.

Other families have suggested what information to include, but you should use it only in the way that suits you and your family best. You may want to read all the sections straight away, or to take your time. Different sections are likely to be useful at different stages in your child’s life. Some of the information may feel too painful to read now. If so, put it to one side until you are ready.

Handling news or no news

There are many reasons why children have vision impairments. Sometimes it’s genetic, or the result of an infection or injury. In many cases no specific cause can be identified. While a simple explanation may be given, diagnosis is often difficult, especially if the condition is rare and little understood. It’s not unusual for the diagnosis of a child’s medical condition to take months or even years. Sometimes families never get the explanation they would like as
to why their child has a vision impairment.

You may want to ask:

- What’s the cause of my child’s vision impairment?
- What’s my child’s condition called and how do you spell the name?
- Can anything be done to cure or help the condition? Is any special treatment necessary? What might help? What can I do to help?
- Is this a family or inherited condition? If so, will we be referred to a genetic counsellor and have genetic tests?
- Is there anything my child must not do (for example, rub their eyes or shake their head)?
- Is the condition likely to get worse, better or stay the same?
- What risks are there? What should I look out for?
- When should my child be examined again?
- Where should we go for further advice and help?
- Have you any information on the eye condition that I could take home and read? Is there a website?

If you have been given a diagnosis of a particular condition affecting your child’s vision, you can find out more about it in a number of different ways. You’ll find a list of some of the more common eye conditions in the Glossary at the back of the resource.

There’s a lot of information available on the internet. For example, [www.viscotland.org.uk](http://www.viscotland.org.uk) is a website with medical information about vision impairments written specifically for parents. If you are not an internet user, ring the Royal National Institute of Blind People Helpline.

Sometimes your child’s diagnosis may have implications for you and other members of your family. If so, you can ask to be referred to a genetic specialist to find out what the chances are of any known condition being passed on.

Some families receive information that their child has a vision impairment as part of a rare syndrome or particular condition. Contact a Family is a national organisation offering support and advice to families of children with a range of
disabilities. The organisation maintains a database of specific conditions and rare disorders in addition to those listed in the Contact a Family Directory, this can be purchased or accessed online at: www.cafamily.org.uk

Looking after yourself

It can be exhausting looking after a young child, particularly when that child has a vision impairment and needs you to help them develop and make sense of the world. Other families say it’s important to know your limits and to avoid becoming overwhelmed and exhausted.

They offer the following advice:

- Meet other families who have children with vision impairments; they’re a unique and invaluable source of information and experience.
- Approach big tasks one step at a time.
- Be realistic when estimating time and try to build in a big enough margin for your child to do things at their pace. This isn’t always possible, but when you can, build in the extra time likely to be needed – everyone arrives happier. Often parents carers feel most stressed when they have to be at a certain place at a certain time, for example on time for school or work.
- Find some help – and when you have found it, use it.
- Take a break. Plan small breaks for yourself during the day. When your baby is having a daytime nap, 10 minutes with your feet up reading a magazine will do you more good than 10 minutes doing housework.
- Get out on your own from time to time. However hard it is to make the necessary arrangements for your child to be looked after, it’s worth it. It will do you good to go out without a bag crammed with nappies and spare clothes and to be able to have some uninterrupted, adult conversation.
- Recognise that it’s difficult to cope with the unknown. Acknowledging this may help you deal with uncertainty better. Being positive and taking action to help your baby can help you feel more in control.
• Spread the load. Involve grandparents, aunts, uncles and friends. Invite other parents carers in for a coffee and a chat – in the early years, this will also encourage your children to play together in a natural way.

• Laugh if you can – it can help in difficult situations.

Effects of a vision impairment on development

Children with a vision impairment develop in much the same way as other children, although the rate and order in which skills develop may differ. The difficulties experienced by children with a vision impairment are not always obvious.

Different eye conditions create different ways of seeing: some make it more difficult to see things at a distance, others to see things that are near; some affect what your child can see clearly, others what they can see in their wider field of vision; some mean that children don’t see in colour.

Different visual conditions result in a range of effects, with different implications for each child. It’s important to remember that each child is an individual and that even children with the same eye condition may appear to see very differently.

There are many ways that your child’s vision may be affected:

• Your child’s level of vision may not be constant from day to day, or even from moment to moment. It may depend on the lighting and whether it is a familiar environment. Even mood can affect a child’s ability to see and make sense of the indistinct picture their brain is receiving. If your child is tired, unwell or under pressure, they may not use their vision as well as usual.

• Children vary in the way they adapt and compensate for their vision impairment and how they find ways to learn by using and interpreting information from other senses. In general, they have fewer opportunities to learn incidentally in the way that their sighted friends do. Many skills which other children simply pick up, may need to be deliberately introduced to children who have a vision impairment.

• A child with any degree of vision impairment may not have the same variety of experiences as other children. For example, they may not participate as actively in the daily routines of eating, bathing and
dressing which lead to independence. They may also be less sure of their ability to get about, which affects how they interact with their physical environment.

- Both the **quality and the quantity of information** available are usually reduced. They have fewer clues to help them understand the meaning of sounds or the function of objects. Your child may perceive only part of an object or activity at a time. The result is that their development may take place more slowly and unevenly, with unexpected gaps in understanding.

- It may take your child longer to complete activities that involve vision. This can be frustrating for you and for them. The **extra time and effort** it takes to do everyday things can also make children with a vision impairment more tired than other children of the same age.

Understanding the impact of vision impairment on communication, self-esteem and attitudes to learning is equally important for your child’s development. Vision impairment can mean that eye contact, facial expressions, body language and gestures may simply go unnoticed or be misinterpreted. They will need help to learn different ways of understanding social situations so that they can build positive relationships with others.

Children develop gradually, and in the beginning nobody can know where the strengths of a child with a vision impairment lie, or what aspects of life they might find particularly challenging. For children with complex needs, it can be doubly hard to know what they might achieve, particularly if they find it hard to show you when they have understood. Children with multiple impairments often stay at an early stage of development for a long time before first words and controlled body movement develop.

The following may help:

- Assume your child can understand – talk to them, not about or over them, and encourage others to do the same.

- Let them hear you talking about what they can do, not what they can’t do.

- Assume that in time they will learn to do some things for themselves. For each new skill, show them how to do one part of the process that you feel they could achieve on their own.
• Set them up for success and build on it.
• Discover their likes and dislikes and try to respect them.
• Use the things they like as rewards to encourage the repetition of positive behaviour.
• Find ways of showing them your interest in their smallest achievement.

Having read this, you may wonder how your child will cope. But with support – active involvement, guided exploration of real objects and experiences, and lots of verbal explanation – your child will learn and achieve a lot. The important thing to remember is that your child is a child first. Understanding vision impairment and the effect it may have is just a starting point. It leads to being able to help your child play, learn and enjoy life.
Who can help

Voluntary organisations

Voluntary organisations provide information and services linked to particular needs. The voluntary organisations are usually charities and operate at national and/or local level. Many families find that they provide valuable information and support. For details of voluntary organisations offering support to children and young people with a vision impairment see the Useful Organisations and websites section of this resource.

Make sure you are in contact with your local authority Visual Impairment Teaching Service (sometimes called Sensory Support Service). They will allocate a qualified teacher of visually impaired children to advise you as your child develops. This support is available from birth.

The eye department at the hospital should put you in touch, but if you have not been referred find your local service in the Sightline directory at www.sightlinedirectory.org.uk or ring the Royal National Institute of Blind People Helpline on: 0303 123 9999.

Professional support

This section introduces professionals that you might meet. Sometimes it can feel like armies of experts are advising you about your child. At other times you may wonder, ‘Who really knows my child and can help them?’ Your child is unique and it’s important to understand that some of the professionals you meet may have less experience than you of children with their particular combination of impairments or needs. Your observations are crucial to ensure the success of any professional support.

Family doctor

Your family doctor (or GP) is a doctor who works in the community. They are the first point of contact for many families. They are concerned with the general health of your child and can advise and arrange further examinations and refer you on to clinics, hospitals and specialists when needed. They may also support welfare benefit applications and/or other types of help. Your GP may refer you to a child health or child development clinic where you may meet doctors who are specially trained in the development of very young children and in identifying treatment or support needs.
Paediatrician – A doctor who specialises in working with babies and children. They check the overall health of newborn babies, usually at the hospital or child development centre. It’s usually a paediatrician who refers your child on to other specialists that they need to see. You may also meet a paediatric neurologist who has particular expertise in how the brain works in very young children. A paediatrician can offer advice, information and support about any medical condition(s) your child has.

Ophthalmologist – A doctor based in a hospital who specialises in the diagnosis and treatment of eye conditions. They have extra qualifications and experience in eye disorders and, where possible, in treating them with medicine and surgery. You may be referred to an ophthalmologist to check the health of your child’s eyes.

Orthoptist – A health professional who specialises in correcting vision without surgery (especially by exercises to strengthen the eye muscles). They often work with ophthalmologists in hospitals, but you might meet one in a health clinic or visiting a school. They test children’s sight, look at eye movements, assess how well both eyes work together and check for squints.

Optometrist – An optometrist or ophthalmic optician is a health professional who specialises in measuring children’s sight and prescribing glasses. They can identify eye diseases and are usually based at a hospital or an opticians. A dispensing optician helps you choose frames and make sure they fit properly but cannot test your child’s sight or prescribe glasses. It’s important that if your child needs glasses they are encouraged to wear them.

Health visitor – A health visitor is a qualified nurse or midwife with additional training and experience in child health. They visit family homes in the early years to check on children’s health and development and also offer advice at baby or child health clinics in GP practices. They advise families about the care of very young children, normal child development, sleep patterns, feeding, behaviour and safety. You should receive at least one visit from a health visitor shortly after your baby is born. Contact them through your GP. Health visitors can also help you contact doctors, hospitals and other services in your area.

Qualified teacher of visually impaired children (QTVI) – Your local authority (LA) should have at least one qualified teacher of visually impaired children (QTVI). These specialists are teachers who have additional qualifications and
experience working with children with vision impairments. They support children, their family and other teachers. They are sometimes called advisory, specialist, visiting or peripatetic teachers of children with vision impairments. In the early years they visit and support families and children in their homes. Ask your LA to put you in contact with a QTVI as soon as possible. If you have difficulty getting help, or need the contact details for a QTVI in your area, ring the RNIB Helpline.

Mobility officer or habilitation worker – Some services for children with vision impairment can put you in touch with a mobility officer or habilitation worker. This is a specialist who is trained to teach your child how to move around more independently and how to do practical everyday tasks for themselves. They can support you to encourage your child’s independence.

Special educational needs co-ordinator (SENCO) – The key task of the SENCO is to ensure that Special Educational Needs (SEN) provision in schools and early years settings is both efficiently and effectively managed.

Equality Named Coordinator (ENCO) - An ENCO is a staff member working in an early years setting, playcare provision or school who supports the setting to give due regard to the equalities needs of children, young people and families. They also assist the setting to comply with equalities legislation and best practice. In regard to disability equality they work with their setting SENCO and are often supported by Early Years Equality.

Early Years Professional (EYPS) – This is a lead practitioner in early years settings who promotes quality delivery and supports staff to plan for, meet, assess and review each child’s playful learning, care and development needs and progress.

Specialist social worker or rehabilitation worker – Social services often have a specialist social worker or rehabilitation worker for people with vision impairment who works with children and their families. Social workers provide practical help and advice about counselling, transport, home helps, and other services. They may be able to help you get equipment at home and suggest lighting or decor to help your child to locate door frames, walls and furniture more easily and to move about at home with more confidence. Rehabilitation workers teach mobility and daily living skills and will be able to answer some of your questions about sight loss. The law requires social services to offer practical help to disabled children and their families. If you experience any
difficulty making contact or getting help, ask to speak to the person in social services with responsibility for disabled children.

**Physiotherapist** – A health professional specialising in physical and motor development. They can assess your child's movement and develop an individual plan that might include helping your child to control their head movement, sit, roll over, crawl or walk. Physiotherapists can also teach you how to handle your child at home for feeding, bathing, dressing and advise on equipment which might help your child’s mobility.

**Speech and language therapist** – A health professional specialising in communication and any associated difficulties with eating and swallowing. They offer support and advice to parents of children with any type of communication problem. They assess, diagnose and help children develop their communication, language and speech, including sign language.

**Occupational therapist** – An occupational therapist helps children improve to develop their practical skills by suggesting helpful activities, adaptations at home or elsewhere and the use of specialist equipment. OTs are concerned with difficulties that children have in carrying out the activities of everyday life. This could include sitting in a chair, holding a spoon and fork or drinking from a cup.

**Educational psychologist** – Educational psychologists help children who find it difficult to learn or to understand or communicate with others. They can assess your child’s development and provide support and advice.
Top tips

• Focus on all of the things your child can do and encourage your child's enthusiasm for learning new skills. Children are often better than adults at believing in their own abilities so let them have a go. Encourage every attempt at independence as children learn by doing and making mistakes.

• It is not true that children with sight problems automatically develop extraordinary skills in the other senses, such as hearing, to compensate for not being able to see. Your child will develop the use of all their available senses through experience, practice and supported learning.

• Always use your child's name first to gain their attention so that they know you are talking directly to them. This way your child won't miss an instruction or description or act on a comment meant for someone else.

• Describe objects, events and people clearly and simply, so that children can understand what is going on around them and anticipate what is happening next. Provide enough description to help your child but also allow quiet spaces so that they can think, ask questions, become aware of other sounds or just rest their ears. Most children don't want their parents or carers to talk all the time.

• Don't be afraid to use words about sight, e.g. ‘Shall we see if there are any bigger bricks?’ Use words like 'look', 'see' and ‘watch' naturally.

• Take your time. Daily routines, play activities and learning experiences are likely to take more time with a child with vision impairment. Vision is an ‘integrating sense’ – it often helps us to make sense of other sensory input, such as the cause of a loud noise. It can take longer for your child to make sense of what is going on, or what something is for, if they mainly use sound or touch to explore new things.

• Lighting and sound levels can make a huge difference to what many children can see or hear. Ask your child's qualified teacher of visually impaired children (QTVI) what suits your child best.

• Your child is a child first and foremost, and their development will be individual whatever their level of vision impairment. As a parent carer, you are the expert in them as a unique person, even if a lot of professionals become involved.
Resources

Bag Books
Sells multi-sensory story packs
www.bagbooks.org
Tel: 020 7627 0444

Booktouch
Introduces babies and toddlers who are blind or partially sighted to books. A Booktouch pack is available free to parents or carers of children who are blind or partially sighted up to (and including) the age of four.
www.bookstart.co.uk

Braille resources
RNIB offers lots of resources to support children learning braille.
Find out more at: www.rnib.org.uk/braille

Here are a few examples:

- **Hands On** – Fun reading scheme to teach the basics of contracted (grade 2) Braille to children aged four to six www.rnib.org.uk/shop
- **Feeling ready to read** – A pack to teach pre-reading and tactual skills to children who will learn to read using braille www.rnib.org.uk/shop
- **Finger fun books** – Books to help children develop tactile skills. Simple, entertaining stories in large print with bold black illustrations and robust, brightly coloured thermoforms of everyday objects. Age 3+. www.rnib.org.uk/shop

Calibre
Audio library of story books for children available as MP3 files, on CD or USB memory stick.
www.youngcalibre.org.uk
Tel: 01296 432 339
ClearVision Library
A UK postal lending library of mainstream children’s books with added braille. The books have braille (or Moon), print and pictures, so that visually impaired and sighted children and adults can share them.
www.clearvisionproject.org

Children's books mentioning vision impairment
The books listed on this website feature children with additional needs. Browse the Sight section for books featuring characters who have a vision impairment.
www.healthybooks.org.uk

Hungry Fingers
Educational tools designed to give visually impaired children the confidence to be in command of the space around them.
www.hungryfingers.com

Inclusive Technology Ltd
Supplies equipment and software that help those with special educational needs to use a computer, communicate and learn. Leaps and Bounds introduces young children to mouse skills, decision making, visual and auditory stimulation, left/right orientation and tracking.
www.inclusive.co.uk

Kneebouncers
Online games for babies and infants.
www.kneebouncers.com

Lea Hyvarinen
Teaching materials developed by Lea Hyvarinen, an ophthalmologist who is a senior lecturer at the University of Helsinki.
www.lea-test.fi/leaweb/index.html

Lilli Nielsen
Find out about an 'active learning' approach developed by Lilli Nielsen, a Danish teacher and psychologist.
www.lilliworks.com
Living Paintings
A free library of living picture books and packs for children, and introductory packs of touch and sound books.
www.livingpaintings.org

Moon Literacy
Teaching literacy and maths using Moon.
www.moonliteracy.org.uk

Parents’ Place
A safe place to meet other parents carers, pick up tips and advice, and get information about health, rights and services.
www.rnib.org.uk/parentsplace

Richard Hirstwood and Flo Longhorn
Information about multi-sensory approaches to learning, training for schools and things to buy.
www.multi-sensory-room.co.uk

Tactile books
Advice and information about designing, producing, using, buying and borrowing tactile books.
www.tactilebooks.org

Wonderbaby
Information on toys and equipment, including sensory rooms and ideas for supporting blind babies and infants.
www.wonderbaby.org
Further reading

Insight
Stay in touch with the latest developments by reading this magazine for parents, carers and professionals working with children and young people. Published every two months, it focuses on the education, health and wellbeing of children with sight problems, including those with complex needs. Regular features include eye health, family life, early years, the curriculum and access to learning. Free to RNIB members.
For subscription details visit: www.rnib.org.uk/insightmagazine

Disorders of vision in children
This book explains how disorders of visual function can impair visual performance under different circumstances, and looks at educational implications. It covers how eyes and the visual system work, assessing functional vision and eye conditions and diseases.
2001, ED235 (disk)
www.rnib.org.uk/shop

Early focus (Second edition) by Pogrund RL & Fazzi, DL
A publication about working with young children with sight loss and their families. Provides a comprehensive overview of all the developmental areas that may be affected by vision loss. Four new chapters cover the delivery of early intervention services, developing skills in young children in areas of literacy, daily living, independence and motor behaviour.
Published by American Foundation for the Blind www.afb.org 2002
ISBN 0891288562
Available from www.amazon.co.uk

Play it my way
A resource book for parents carers providing a wealth of tried and tested play ideas, toys and materials which can be used to enliven everyday routines and help children with sight problems find out about the world.
2001, ED130 (print) www.rnib.org.uk/shop

Count me in DVD and Hear me out CD
Count me in is a challenging and thought-provoking training DVD Video produced by RNIB to promote good practice in the inclusion of blind and partially sighted children and young people. This resource is intended for
anyone working with blind and partially sighted learners, including class teachers, teaching assistants, special educational needs professionals and senior managers.
Price: £29.95 (ED499)

**Hear me out** is an audio CD-ROM which complements ‘Count me in’.
Understanding children's views and experiences is central to meeting their needs. **Hear me out** gives blind and partially sighted children the opportunity to speak for themselves about their lives at school and at home. The CD-ROM also includes a DAISY version of the audio files.
Price: £15.00 (ED500)
You can buy both for a special price of £40.00 (ED501).

**Well Prepared!**
RNIB's definitive guide to modifying examination and assessment materials for blind and partially sighted learners has been fully revised and updated. **Well prepared!** is a vital tool for teachers and support staff involved in producing curriculum and assessment materials for blind and partially sighted learners. The modifications illustrated can be used in any context and country.
RNIB, 2010
Price £15.00 (ED516)

**What can you see?**
Gail Bailey explains why some children who are blind or partially sighted need additional support to make and maintain friendships. To encourage the development of social skills, empathy and emotional literacy, this book sets out practical approaches including individual support for young people with sight loss, activities with peers and working with parents. These activities are suitable for primary school children, secondary school learners and the adults who work with them, both in and after school.
RNIB, 2009
Price £7.50 (ED508P)

Place an order via the RNIB Online Shop -
Useful organisations

Action for Blind People
Practical support and advice.
Freephone helpline: 0800 915 4666.
www.actionforblindpeople.org.uk

Blind in Business
Supporting blind and partially sighted young people into employment.
Tel: 020 7588 1885.
www.blindinbusiness.co.uk

Contact a Family
Advice, information and support to parents of disabled children, including an
A-Z list of eye conditions
Freephone helpline: 0808 808 3555.
Textphone helpline: 0808 808 3556.
www.cafamily.org.uk

Cry-sis
Support for parents whose children have sleeping problems.
Helpline: 08451 228669 (to find someone in your area).
www.cry-sis.org.uk

Early Years Equality
Provides disability equality and other protected characteristic equality
support, guidance, advice, discrimination casework and training to children,
families, organisations, providers and policy makers across the UK.
Tel: 0114 2700214
Email: enquiries@earlyyearsequality.org.uk
www.earlyyearsequality.org.uk
Equality and Human Rights Commission
The Equality and Human Rights Commission has a statutory remit to promote and monitor human rights; and to protect, enforce and promote equality across the nine ‘protected’ grounds – age, disability, gender, race, religion and belief, pregnancy and maternity, marriage and civil partnership, sexual orientation and gender reassignment.
Phone: 0800 444 205.
Textphone: 0800 444 206.
www.equalityhumanrights.com

Gov.uk
Support for parents and young people on a range of subjects, including transition into further education and training, employment and benefits.
Tel: 0808 808 3555.
www.gov.uk

Guide dogs
Guide dogs offer a Mobility and Independence Education Preparation and Support service for young people through critical transition stages such as school to further education and/or employment.
Tel: 0118 983 5555.
www.guidedogs.org.uk

Henshaws Society for Blind People
Care, advice and training, including support for visually impaired parents, in the north of England.
Tel: 0161 872 1234.
www.hsbp.co.uk

LOOK
Supporting parents and carers of children with vision impairment
Tel: 0121 428 5038.
www.look-uk.org

National Blind Children’s Society (NBCS)
Supports children and young people with visual difficulties. Hosts 'Starting Point: a guide for parents whose child has a visual impairment' a website put together by five expert organisations to answer parents' questions.
Tel: 0800 781 1444.
www.nbcs.org.uk/startingpoint
NATSPEC: The Association of National Specialist Colleges
NATSPEC is a membership association for independent specialist colleges and offers information about specialist colleges and how to apply to them.
www.natspec.org.uk

Playmatters
Creating and supporting high quality play opportunities.
Tel: 020 7428 2280.
www.playmatters.org.uk

Royal London Society of the Blind
Services for children and young people with vision impairment.
Tel: 01732 592500 (Seal office) or 020 7808 6170 (London office).
Email: enquiries@rlsb.org.uk
www.rlsb.org.uk

Royal National Institute of Blind People (RNIB)
Information, support and advice to people with sight loss
Helpline: 0303 123 9999
RNIB National Library Service, Tel: 01733 375351
www.rnib.org.uk
Parents' Place: www.rnib.org.uk/parents
Young People: www.rnib.org.uk/youngpeople
Products and Publications: www.rnib.org.uk/shop

Sense
For people with deafblindness and associated disabilities.
Tel: 0845 127 0060
Text: 0845 127 0062
www.sense.org.uk

VICTA
Support and information to parents, carers, young people with a vision impairment and organisations. VICTA also offers grants to individuals, groups and research projects.
www.victa.org.uk
Local groups
There are many local societies for people who have a vision impairment. Some offer activities for children and families. Contact Visionary on: 0208 417 0942 or: www.visionary.org.uk to find your local organisation, or search: www.sightlinedirectory.org.uk

Local Authority Visual Impairment Services
Your local authority should have at least one qualified teacher of visually impaired children (QTVI) to work with you and your child. These specialists are qualified teachers who have additional qualifications and experience in working with children with a visual impairment. If you have difficulty getting help, or need the details of the specialist teacher in your area, contact RNIB Helpline on: 0303 123 9999 or search the Sightline Directory at: www.sightlinedirectory.org.uk

If your home language is not English, ask your local authority to provide an interpreter for you. The interpreter can work with you when you are meeting with professionals to make sure that you are able to participate fully in any decisions being taken. It is important to inform professionals about your language requirements.

If you have a hearing impairment you can ask for a signing interpreter. It is also important to inform professionals about any cultural or religious requirements your family has, so they can engage with you in culturally sensitive and appropriate ways, and understand your wishes, in order to support you and your child effectively.
Glossary

Common eye conditions

**Albinism** – associated with a lack of pigment (colour) in skin, hair and eyes. Tinted spectacles may be needed to maintain best comfortable vision in bright light where glare is a problem. Albinism is commonly associated with nystagmus and problems with binocular vision. Children with albinism have very short sight that cannot be fully corrected by wearing spectacles. Find out more at: www.albinism.org.uk

**Amblyopia** – sometimes called a ‘lazy’ eye. It means that an eye has a decrease in vision which cannot be corrected with spectacles. Usually caused as a result of an eye turn (strabismus/squint) so it’s more likely that one eye is affected. It is very important that it a young child’s squint is treated as quickly as possible while there is still time to improve the development of vision.

**Anophthalmia** – when a baby is born without one or both eyes. Find out more at: www.macs.org.uk

**Astigmatism** – an irregular shaped cornea. Vision is distorted because the light rays do not meet at a single focal point. Very few eyes are perfect spheres so astigmatism is quite common. Depending on the severity of the astigmatism, the focus of vision can be corrected with spectacles.

**Cataract** – a clouding of the lens resulting in images becoming unclear. Cataracts can be present at birth or develop after birth. Most cataracts are surgically removed as soon as they are detected to avoid delaying or preventing the development of vision in a baby.

**Cerebral vision impairment** – usually results from damage to parts of the area of the brain that processes vision, called the visual cortex. Some children have specific processing and perception problems. It is very common in children with complex additional needs.

**Colour confusion** – not being able to distinguish certain colours from each other, sometimes called ‘colour blindness’. Around 8% of boys have colour confusion, typically with red and green.

**Conjunctivitis** – inflammation of the conjunctiva.
Glaucoma – damage to the optic nerve generally associated with a build-up of pressure inside the eye.

Hypermetropia (long-sightedness) – things are seen more clearly in the distance than near to. Typically corrected by spectacles or contact lenses.

Keratitis – an infection or inflammation of the cornea.

Keratoconus – thinning of the cornea causing it to become cone shaped, and resulting in distorted vision; more common in older children and young adults.

Microphthalmia – when a baby is born with one or both eyes that are unusually small. Find out more at: www.macs.org.uk

Myopia (short-sightedness) – things are seen more clearly near to than in the distance. It is typically corrected by spectacles or contact lenses.

Nystagmus – an involuntary ‘wobble’ movement of the eyes from side to side or up and down, resulting in an unclear image. Find out more at: www.nystagmusnet.org.uk

Optic atrophy – the deterioration of the optic nerve.

Retinitis pigmentosa – a group of hereditary diseases of the retina that sometimes result in ‘tunnel vision’, when there is a gradual loss of peripheral vision. Find out more at: www.rpfightingblindness.org.uk

Retinoblastoma – a very rare cancerous tumour of the retina which mainly affects children under the age of five. Over 95% of children survive after treatment at a specialist centre. Find out more at: www.chect.org.uk

Retinopathy of prematurity – damage to the retina in a premature baby’s eye.

Strabismus (squint) – sometimes called an eye ‘turn’, where both eyes point in different directions due to a muscle imbalance or long sight. A very common condition – it is estimated that around 5% of children will have some kind of strabismus. Treatment may include prescribing glasses or wearing an eye patch (on the good eye). Find out more at: www.strabismus.org
Specialist language

**Accommodation** – the ability of the lens to change shape to focus on objects at different distances.

**Acuity** – ability to see fine detail measured from a variety of distances.

**Binocular vision** – when both eyes work together at the same time; it enables depth perception.

**Braille** – a tactile form of reading made up of raised dots on a page.

**Congenital** – a word describing any condition present at birth.

**Contrast sensitivity** – the ability to distinguish different shades of grey from each other.

**Field of vision** – the total area that can be seen around you without shifting your gaze; detailed central vision as well as peripheral vision.

**Focal point** – the point of the retina where light rays meet and gives our most detailed vision; an object is in focus when it is being seen most clearly.

**Functional vision** – the ability to use eyesight in everyday conditions.

**Light adaptation** – the ability of the eye to allow in more or less light and process changes of light and dark.

**Low vision aids (LVAs)** – aids that improve a person’s functional vision such as magnifiers; often training is needed for such aids to be used efficiently.

**Mobility** – training to develop orientation skills and independent movement, including use of a cane.

**Monocular vision** – sight through one eye only.

**Moon** – a form of reading by touch, which looks more like print letters than braille. It uses curves and straight lines.

**Occlusion (patching)** – covering one eye to develop the sight in the other (lazy) eye.
**Parts of the eye and their function**

**Aqueous** – a clear, watery like substance between the cornea and lens.

**Choroid** – the middle layer of the eye, composed of blood vessels supplying nutrition to innermost layers.

**Ciliary muscles** – attached by ligaments to the lens to adjust the focus.

**Conjunctiva** – the protective membrane covering the eye cornea; the transparent ‘window’ at the front of the eye.

**Iris** – the coloured part of the eye, in front of the lens and behind the cornea, which expands and contracts to control the pupil.

**Lens** – a transparent structure situated behind the pupil which focuses images upon the retina.

**Macula** – the central area of the retina which is used for central detailed vision and for seeing colour.

**Optic nerve** – a collection of around a million nerve fibres which send messages from the retina to the brain.

**Pupil** – the circular hole (which appears black) at the centre of the iris through which light passes; the size alters to regulate how much light enters the eye.

**Retina** – the inner lining of the eye which receives the images and transmits them to the brain via the optic nerve.

**Sclera** – the white of the eye; a strong coat to protect the eye.

**Vitreous** – a clear, watery like substance between the lens and retina.

**Visual cortex** – the area of the brain responsible for processing visual images.
For more information about visual impairment there are three more resources in this series:

- Visual impairment: Part 2 – Early Years
- Visual impairment: Part 3 – School Years
- Visual impairment: Part 4 – Into Adulthood

All resources are available to download at: [www.ncb.org.uk/early-support/resources](http://www.ncb.org.uk/early-support/resources).