
What is Early Intervention?

Early Intervention is a program sponsored by the Massachusetts Department of Public Health (MDPH) which helps parents of children birth to three to recognize and understand their child's particular developmental needs, and teaches them ways to help their child grow.

The Early Intervention team works with the family. Together they determine what type of help would be most beneficial, and put together an **Individualized Family Service Plan (IFSP)**. The IFSP specifies all the education, training and support services a family will receive to best help their child.

Specialized services for a child who is deafblind or has a combination of vision and hearing loss can be part of your IFSP.

Who are Specialty Providers?

Specialty providers are people with training in deafblindness, vision loss, hearing loss, and infant/toddler development who will work with your family and early intervention program. They can provide:

- Information about deafblindness, communication development, and various educational approaches
- Activities for language and communication development
- Support from other families with children who have a vision and hearing loss
- Help in planning for the transition to preschool

Otolaryngologists (ORL) are physicians who specialize in ear, nose and throat (ENT) conditions, provide clearance for hearing aid fittings, treat children with persistent middle ear problems, and provide medical or surgical interventions.

Audiologists are trained to diagnose hearing loss, evaluate hearing levels and abilities and recommend hearing aids and listening devices.

Teachers of the Deaf are trained to teach children who are deaf or hard of hearing using one or more specialized educational approaches.

Deafblind Specialists are trained in the field of deafblindness and multiple disabilities with emphasis on communication development and the impact of vision and hearing loss on learning and program development.

Speech/Language Pathologists are trained to evaluate and promote speech and language development. Some have specialized training and experience in working with children who are deaf, hard of hearing, and deafblind.

Auditory Verbal Therapists are trained to develop spoken language primarily through the use of amplified residual hearing or cochlear implants.

Ophthalmologists provide medical assessment, monitor eye health, measure visual acuity and prescribe corrective lenses as appropriate. They are medical doctors who can prescribe medication and perform surgical procedures.

Teachers of the Visually Impaired provide instruction in the use of vision within such daily routines as play, feeding, communication, motor and learning tasks. They develop activities and adaptations to help your child use his/her vision as efficiently as possible. They can teach compensatory skills (like the use of touch) and can help you understand how the vision loss may affect your child's development. They may consult with other service providers such as doctors or therapists.

Optometrists measure visual acuity and provide general eye exams for vision skills, low vision assessments and prescriptions for low vision aids.

Orientation and Mobility Specialists assess the effects of visual impairments on a child's motor and movement skills. They help children develop the skills they need to move independently and safely within their daily environment.

What are the costs?

There is an Annual Cost Participation Fee for Early Intervention that is based on family size and income. It ranges from \$0 to \$1000 per year. Early Intervention is supported by the Department of Public Health and health insurance companies.

Case management services through the Massachusetts Commission for the Blind and Massachusetts Commission for the Deaf and Hard of Hearing are provided at no cost to families, as are technical assistance and consultation from the New England Center Deafblind Project.

December 2009
Massachusetts Department of Public Health
Low Incidence Committee

If you think your child has both a vision and hearing loss



**Remember!
Much of a child's
most important learning
takes place in the first
three years. If you have
questions about your
child's vision and hearing,
get help now!**

How is Your Child Doing?

At these ages, he/she should:

0-6 months:

- show interest in or stare at a light source
- fixate (focus on) a brightly colored object held 3 feet from face
- track (follow) a slowly moving, brightly colored object left to right
- startle to loud or sudden sounds
- coo and gurgle
- seem to recognize familiar voices

6-12 months:

- look at his/her hands or toys
- follow the movement of an adult across the room
- reach for toys or objects out of reach
- recognize and respond to familiar adults
- turn his/her head toward a sound
- babble
- respond to your voice by making sounds
- understand common words such as “no” and “bye-bye”

12-18 months:

- show interest in tiny objects
- locate objects across the room and move to obtain them
- show interest in picture books
- look at scribbles made with a crayon
- respond to requests such as “come here” or “do you want more?”
- use consonant sounds in babbling
- use some words
- follow simple directions

18-36 months:

- begin to complete simple shape form boards and puzzles
- recognize and label familiar pictures
- point to smaller features on pictures
- have smoother eye-hand coordination (e.g., place objects in containers)
- use approximately 150-200 words
- combine 2 words into simple phrases
- point to body parts, common objects or people when they are named

What Are Signs of Vision and Hearing Problems?

Behaviors which may be signs of vision loss:

- Child presses his/her eyes with hands or toys
- Child frequently rubs eyes
- Child tilts head in an unusual position when looking at objects
- Child’s eyes move in an unusual way

High-risk conditions associated with deafblindness:

- A suspected or diagnosed hearing and/or vision loss
- A risk of vision and hearing impairment due to a diagnosis of:
 - Trisomy 13 or Trisomy 18
 - Congenital Rubella (German Measles)
 - Meningitis
 - CHARGE syndrome
 - Complications of prematurity

- A risk of combined vision and hearing loss due to:

Conditions of the ears, nose and throat such as:

Cleft lip and/or palate
Malformation of the ears

- Chronic ear infections combined with eye conditions such as:
 - Retinopathy of prematurity (ROP)
 - Glaucoma
 - Cataracts
 - Nystagmus
 - Visual field loss
 - Cortical visual impairment
 - Eyes turning inward or outward

- A risk of deafblindness due to family history of genetically linked vision and hearing impairments (e.g., Usher Syndrome)

If a specialist or physician has spoken with you about any of these conditions, or if you are concerned about how your child sees or hears, have your child’s vision and hearing checked.

Who can help and how?

The Massachusetts Commission for the Blind (MCB) provides information about specialized programs and services, advocacy and case management for children with vision loss and their families. Call the Children’s Services Division at 1-800-848-8867 (voice) or 1-800-392-6556 (TTY).

Website: www.state.ma.us/mcb

The Massachusetts Commission for the Deaf and Hard of Hearing (MCDHH) provides information about specialized services, language learning approaches, advocacy, and case management for deaf and hard of hearing children and their families. Call them at 1-800-882-1155 (voice) or 1-800-530-7570 (TTY).

Website: www.state.ma.us/mcdhh

The Massachusetts Department of Public Health (MDPH) can help you find the Early Intervention Program in your community. Call 1-800-905-8437 or 1-617-624-6060 or 1-617-624-5992 (TTY).
Website: www.state.ma.us/dph/earlyintervention

The New England Center Deafblind Project (NEC) is a federally funded program offering training and consultations to families of children who are deafblind and to professionals. Call 1-800-972-7515 (voice) and 1-617-924-5525 (TTY).

Website: www.necdbp.org