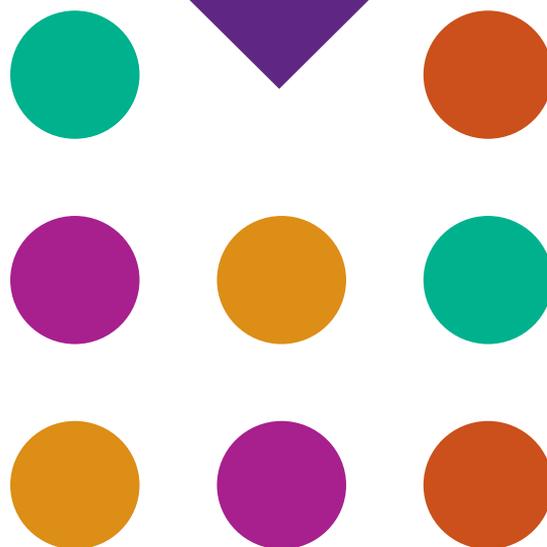
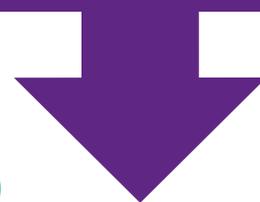


# West Midlands RNIB Social Inclusion Project Report

April 02 - March 03

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and Veronica Myko



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# ● Acknowledgments

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The RNIB Social Inclusion Project was enthusiastically and warmly supported by many schools, agencies and specialist support services across the West Midlands. The commitment to the project confirmed our view that addressing social inclusion issues was both a challenge and a priority for practitioners working within the field of visual impairment.

Particular thanks go both to those who gave of their time so generously to actively support the steering group, and to those who directly participated in the range of projects:

Visiting Teacher Service, Birmingham; Educational Psychology Department, Birmingham; Bournville Secondary Resource Base, Birmingham; Broad Heath School, Coventry; Christ the King Primary Resource Base, Birmingham; Coventry Sensory Support Service; Physical and Sensory Services, Dudley; Physical and Sensory Support Services, Hereford; Plantsbrook Secondary Resource Base, Birmingham; Priestley Smith School, Birmingham; SEN Regional Partnership; Sandwell Visual Impairment Team; RNIB New College, Worcester; Staffordshire Visual Impairment Team; Sense West; Solihull Visual Impairment Team & Educational Psychology Department; Service for VI Children, Telford, Wrekin & Shropshire; Stoney Delph School, Staffordshire; Service for VI, Staffordshire; Walsall Vision Impaired Service; VI Team, Warwickshire DISCS; County Specialist Support Service, Worcester; Wolverhampton Visual Impairment Team; Wyken Croft School, Coventry.

We are indebted to the many children, young people and parents who were so willing to share their personal experiences with us and to participate with such grace and good humour in a range of projects.

Finally our thanks go to the Department for Education and Skills for making the project possible through their generous funding.

**Annie Bearfield, Senior Education Officer, RNIB**

**Graeme Douglas, Research Fellow, VICTAR, The University of Birmingham**

**Veronica Myko, Children's Counsellor**

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# ● Recommendations

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## **Schools and services:**

- Schools and services to develop "proactive policies" to both account for, and to further develop, the support of the social and emotional needs of children and young people with visual impairment
- Policies need to focus on social competencies, self-esteem and adjustment to disability issues, with particular reference to the needs of children and young people with adventitious and/or degenerative conditions
- To work in partnership with health, social care and the voluntary sector (Children's Trusts, where they exist) to facilitate access and inclusion into both mainstream and Visual Impairment specific groups, for play and leisure activities
- Consideration to be given to extending the role of adults with a visual impairment in the education of children and young people.

## **View/RNIB:**

- Establishing a community of professionals to share, coordinate and disseminate good practice in relation to the emotional and social support of children and young people with a visual impairment. It is anticipated that this will be facilitated through the setting up of a national Social Inclusion Curriculum Group
- Dissemination and development of visual awareness programmes for sighted peers and professionals.

## **Children's Trusts/Multi-Agency partnerships:**

- Training in visual impairment issues for mental health practitioners
- Training in mental health issues for practitioners supporting children and young people with a visual impairment
- Development of "specialist" mentoring and counselling services for children and families (ie staffed by practitioners with an understanding of visual impairment issues).

# ● Introduction

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## Rationale

The RNIB West Midlands Social Inclusion Project bid to the Department for Education and Skills was founded on the premise that:

- Children with a visual impairment need ongoing social and emotional support in order to maximise their life chances and to facilitate their emotional well-being and adjustment to life with a disability
- Professionals working within the field of visual impairment need to both develop and disseminate good practice in relation to the support of children and young people's social and emotional needs
- The families of the children and young people may have significant emotional and social needs in relation to issues around the child's visual impairment.

RNIB's Senior Education Officer's view, shared by others in the field (Sachs & Sachs, 1992, Marianna Buultjens, 2003) was that although significant strides had been made in terms of accessing the curriculum during the last twenty years, issues around emotional support and social inclusion had not received the same level of commitment or development. The Social Inclusion Project provided an opportunity to explore those issues and to implement and evaluate a range of intervention strategies to support social and emotional development.

The project focused on children and young people with a visual impairment, some of whom have an additional disability. It did not include those children who have complex needs or multiple disabilities. Within any group of children with a visual impairment there will be a significant variation in both degree and type of vision loss and, although the impairment generally has a significant impact on social and emotional development, there is a need for caution in citing disability as the determining factor in a child's life. The project acknowledged that individual differences, such as ability, personality, family background and age of onset all contribute to a child's emotional well-being, degree of social competency and life chances.

The project adopted a broad view of social inclusion, acknowledging the general thrust in policy and practice towards mainstream education, but wanting to embrace the needs of all children and young people with a visual impairment regardless of school placement.

The UK Government is committed to building inclusive schools. This is demonstrated by recent legislation, policy initiatives and guidelines, and by its endorsement and distribution of the Index for Inclusion (Booth and Ainscow, 2002). The Government has adopted an inclusive agenda but stops short of arguing that every child has the right to attend a local mainstream school. Organisations such as the Centre for Studies in Inclusive Education (CSIE) and Parents for Inclusion continue to challenge the Government and lobby for the right of all children to learn together, in the belief that there are no legitimate reasons to

segregate children educationally. Conversely, the Government believes that there is a continuing role for special schools, in becoming centres of excellence and offering outreach support to children placed in mainstream schools. The project adopted a broadly inclusive approach to visual impairment and education, inviting all relevant schools (mainstream and special) and services in the West Midlands to participate.

The concept of inclusion implies a degree of involvement and participation, a sense of belonging and a feeling of being wanted and needed. These were issues that the project could explore in relation to school, the wider community, and in particular, the community of people who have impaired vision.

## Structure of the project

A steering group was set up to oversee and manage the project. It met on a half-termly basis comprising representatives from parents, schools, services and voluntary and government agencies from across the West Midlands. (See Acknowledgments for the make up of the steering group). The steering group was well attended throughout the life of the project with an average of 17 members at each of the meetings.

An outline of the project was drafted by a researcher from VICTAR (Visual Impairment Centre for Teaching and Research) at Birmingham University, the RNIB Senior Education Officer and a counsellor appointed to assist in part of the research element of the project. This was discussed and agreed at the first steering group.

There were three broad strands to the project:

### Strand 1 - Aims

- to identify the critical stages and key issues in the social and emotional development of children and young people with visual impairment, with particular reference to self-esteem
- to identify ways in which visual impairment can impact on the well-being of children, young people and their families
- to identify groups of children who may be particularly vulnerable in terms of their social/emotional development.

### Strand 2 - Aims

- to identify the current range of strategies used in the support of the children and young people's social and emotional development
- to identify the range of referrals and access to child and adolescent mental health services
- to identify specific counselling and mentoring resources/services available to the children and young people

- to identify the level of emotional support offered to parents including access to counselling services
- to identify the training needs of educational practitioners in relation to social and emotional development and support
- to identify the training needs of mental health practitioners in relation to visual impairment issues.

## **Strand 3 - Aims**

- to initiate, deliver and evaluate a range of school and community based projects which seek to support the social and emotional development and inclusion of children, young people and their families.

The project was ambitious in its aims, and, although its achievements were significant, it has inevitably highlighted the need for further research and development in the field. Our experiences and findings are presented here as a contribution to the continuing development of inclusive practice in the education of children and young people with a visual impairment.

# ● Strand One - Views from children and young people

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## Overview

This section describes data gathered from interviews with children and young people with a visual impairment. The purpose of the interviews was to gather information to address two of the project's aims:

- to identify the critical stages and key issues in the social and emotional development of children and young people with a visual impairment
- to identify ways in which a visual impairment can impact on the well-being of children, young people and their families.

The interviews generated a lot of different perspectives about issues related to social and emotional development. Some of the key issues are:

- many of the topics and/or concerns raised (eg interests and hobbies) were not visual impairment-specific, and might have been generated by any group of children and young people
- common problems that the interviewees reported related to bullying and teasing, awareness of others, and practical/mobility issues
- difficult ages reported related to Year 7 (starting secondary school), times of worsening vision, and later teenage years when the visual impairment might limit some of the activities they were able to do with friends (eg driving a car)
- in terms of relationships, a common anxiety reported was meeting new people and being judged, and some raised concerns about overprotective parents
- some students felt a tension between the additional classroom support they received and feeling different and restricted, as well as teasing and judgement from peers
- there was a generally positive view about the perceived usefulness of some interventions on their behalf such as awareness training
- many interviewees talked about the frustration, fear, and even anger they felt in relationship to their visual impairment and people's reactions to it
- many saw the value of talking about these social and emotional issues, and the potential of a specialist counselling service. Some felt they had access to people they could talk to and some did not.

# Method

## Interviews

The project researcher carried out a series of semi-structured interviews with children and young people and a few adults with a visual impairment, as well as some parents.

Interviews took place with 49 young people 9-18 years of age, with a broad range in type and severity of visual impairment (including some who were totally blind). The young people were educated in a range of settings (rural and urban, mainstream, special school for visual impairment, and resources bases.) Approximately the same numbers of girls and boys were interviewed.

The broad structure of the interviews with children and young people followed a series of questions (square brackets refer to prompts):

- What is the most difficult thing for you in relation to your visual impairment?
- What was the most difficult age for you?
- What help do you get? [Do you feel included in the school?]
- How do you think you are perceived [by peers, family, teachers]? [Do people understand about you and your visual impairment?]
- What's it like doing something new [new experience, meeting someone new]? [Do people expect you to fail?]
- Who do you talk to if you've got a worry? [What sort of things do you worry about?]  
[If counselling is/was available would it be useful to you?]
- Tell me about a good [bad] day at school. [used with younger children]
- What do you do in your leisure time?
- How do you see your future?

Modified questions (though following a similar structure) were used with adults with a visual impairment and parents.

The interviews took the form of five group interviews and 14 individual interviews. The interviewer made extensive notes at the time of the interviews and soon after their completion. The analysis presented draws upon those notes.

## Analysis and reporting

The authors recognise the nature of the interviews invited descriptions of problems faced by children with a visual impairment. Also the selection process of those interviewed presented a bias. However, the aim of the interviews was to identify issues of concern to children and young people with impaired vision rather than to quantify the relative importance of these or to generalise to the whole population. To this extent, the project provides a useful starting point for those involved in these children's education, which is grounded in the thoughts and perceptions given by the children themselves.

# Children's views

## Context

It was important that the children's thoughts and experiences were not viewed solely in terms of their disability.

The children and young people, for example, discussed some of their leisure activities at various points in the interviews, describing a large number of activities that young people generally engage in - rugby, football, swimming, walking or running, music, films, reading, and computer games. Several talked about going out with or sleepovers with friends. This is reminiscent of some conclusions drawn by Tobin and Hill (1988) when commenting upon the reported leisure activities of 99 visually impaired teenagers:

**Without prior knowledge of the respondents disability, would it be possible to infer from what they said that they were different from teenagers generally? The writers would suggest that the answer would have to be, "No".**

**Tobin and Hill (1988), p416**

While there are many challenges faced by children and young people with impaired vision, which are related to their disability, it is also important to conclude that in many respects the interviewees are like any other group of children and young people - in all its diversity.

## "The most difficult things"

Children were asked a fairly broad question early in the interviews ("What is the most difficult thing for you in relation to your visual impairment?"). The question invites a whole range of answers, not necessarily related to social and emotional aspects of life. Nevertheless most of the answers did in fact relate to social and emotional issues. Even when practical/mobility issues were raised, they seemed to be described in a social context. The responses to this question broadly fit into three categories which are described in turn:

- practical/mobility issues
- awareness of others
- conflict ie bullying/teasing.

Many of the young people spoke about the difficulty of either moving around the school or going to new or strange places eg:

**When I am in a crowd because I get pushed around.**

**Having tunnel vision which means I either trip over or bump into people, who react angrily if they don't know.**

Several young people spoke about practical lessons, especially where they reported getting less support (eg PE or drama). They mostly felt either left out because it was too difficult to join in, or felt that too much attention was given to them because they had to use different equipment:

**[It can be difficult to join in - ] especially a fast game of football.**

**I felt out of place in sport because I was the only one using a big ball.**

Several spoke about the difficulties of bright lights or colour, especially the colour of markers on the white board. Two younger children described difficulty in the playground when it is too sunny.

All of the young men interviewed said their biggest difficulty was not being able to drive, although many made light of it with comments, eg having a sighted girlfriend to do the driving, or talking about how much money they would save by not driving.

In terms of awareness of others, all of the young people gave examples of difficulties:

**I have to keep explaining because I look normal.**

**People keep asking me, "Are you sure you can cope?"**

**I once bumped into a teacher who told me off for not looking where I was going.**

Many interviewees spoke about the need for more awareness training for staff and pupils:

**My school put on training but some teachers did not bother to turn up.**

**Schools should do training with [simulation] specs for pupils and teachers so that they know how we feel.**

This echoes a finding of the Scottish Sensory Centre report "Promoting Social Inclusion of Pupils with a Visual Impairment in Mainstream Schools in Scotland", (2002). One of the report's recommendations, based on comments from children and parents was to develop ongoing awareness-raising strategies for promoting social inclusion with both peers and staff.

The majority of young people spoke about teasing and bullying at some point in the interviews. Several gave examples of being bullied - and implicit in the examples are reasons for the bullying. This includes how others perceive the support they receive:

**One boy in my class calls me "Miss Hogger" because he thinks the supporter should be for everyone.**

**I was bullied because the others in my class thought I had too much attention.**

**People think I'm attention seeking.**

**Others are jealous of the help I get.**

## Difficult ages

Many of those interviewed described Year 7 (transition between primary and secondary school) as a difficult time for them - sometimes because of feelings of isolation and feelings of difference:

**The school did not understand my difficulties.**

**I had to keep explaining about my visual impairment.**

**I became aware that I was different.**

There was also a useful insight from an adult with impaired vision:

**Sighted friends go [to school] as a group - mobility problems made me different and isolated.**

A few spoke about difficulties at mainstream primary school generally in relation to being the only one with a visual impairment, knowing that they were different, and feeling left out. Others spoke of particular ages because of changes in their vision (or their understanding of it):

**Year 10 when my eyesight got worse.**

**Year 2 because I did not understand my visual impairment.**

Again, some identified awareness training as offering a potential solution - for example, an interviewee reported awareness training to all Year 7 pupils which he felt

**...made them (mainstream peers) more aware and less narrow-minded.**

There was also an example of frustration and confusion before the visual impairment was diagnosed. A 13 year old gave an example of a Year 2 teacher telling her she was stupid when she copied wrongly from the board. She was not diagnosed until Year 6, and even now still feels stupid when she makes a mistake. She said she would like to be able to talk to someone about her visual impairment.

**I would like reassurance that I am not stupid.**

Some of the older interviewees also described aspects of their life which tend to be associated with older age groups, such as the frustration of not being able to drive or go out to clubs which were too dark.

Clearly, there is no general rule for all children and young people with visual impairment. However, it appears that particularly vulnerable times in terms of their social and emotional well-being are around times of worsening vision, transition between schools, and in later teenage years when the visual impairment might limit some activities they are able to do with their friends. Interestingly, few (if any) talked about times of school examinations (GCSEs and SATs) - perhaps the pressures associated with these times are seen as no different for them as for any other person of their age.

## Relationships

The young people were next asked to say how they felt they were perceived by their families, peers and school staff. Only a few talked about family - positive comments included:

**My mum thinks I am a hard worker who does not give up.**

Others talked about feeling parents were overprotective, and in contrast sometimes feeling they needed to protect their parents from worrying:

**My parents see me as a baby and won't let me do things.**

**[I couldn't talk about my worries at home], my mum would be upset.**

Many of the young people talk about friends' perceptions, feeling they were accepted as part of their group with friends seeing them as nice, happy and normal. There was a tendency to add qualifying comments, for example:

**They always help me.**

**My friends forget I cannot see and treat me the same as the others.**

These statements make reference to disability when talking about friendship. The statements might be a product of the nature of the interviewing technique and subject matter (ie the interviewees may well have felt prompted to talk about their disability). Nevertheless, the general question of how young people with disabilities see themselves is worthy of further investigation.

Potentially linked to this general point, a few talked about unwelcome pity. Other examples included people thinking they were attention seekers, thinking they were stupid, and as already described, people being unkind.

There were a number of broad discussions about how the young people felt staff perceived them, and this linked with how they felt about the support they received. Perhaps not surprisingly, some pupils felt positive and other negative:

**My teacher says I work hard, never complain and try to do my best.**

**Some teachers underestimate my abilities, "She can't do that because she is blind".**

Some interviewees were frustrated (and perhaps confused) by the balance between the support they received from staff (in positions of authority) and being a pupil like any other. For example, one young person described the teaching assistant as,

**Someone else to tell you off.**

Others talked about being told off for talking, not doing homework, or support assistants not letting pupils do things. Another example was given by a sixteen year old who described getting angry when he felt his support assistant had made a mistake in his

woodwork. He described his teacher saying:

**We should spend the money on someone more deserving.**

Several young people talked about the potential benefits of having staff with a visual impairment who might have useful experience and empathy.

## Different settings

The discussion also led to points being raised about the merits of different educational settings (sometimes comparisons were made):

**Educationally I cope. If I had gone to special school I would not be as confident, as I would not have been in the "real world".**

**Support in mainstream means getting bullied.**

Young people in mainstream with a resource base often described the staff as supportive and helpful. The base was seen as a place to go if you were sad or lonely but a couple of pupils again talked about feeling that peers (and sometimes teachers) thought that their work was being done for them.

One boy, currently a pupil at residential school, felt that he was limited in his friends at home, which was a big problem for him.

## New experiences and being judged

We were interested to know how young people with impaired vision felt about new experiences, and to some extent their reaction to new experiences - eg fear of failure, an opportunity to learn.

The majority talked about doing their best and having a go, as long as they had been shown or someone had explained things to them. Only a few felt that they would fail because things would be too hard preventing them from doing it. Others worried about how other people would react if they failed.

There seemed to be a contrasting reaction when considering meeting new people. The majority worried about how they would be treated by new people, using vocabulary such as scary, nervous or cautious. Others feared being patronised and that new people would talk about them, not to them. One Year 6 pupil, about to move school, felt that she would be bullied. One 15 year old was the only one to think that people would be more concerned about meeting her.

This apparent anxiety amongst many of the interviewees may be related to how people understand their visual impairment. There were a lot of negative feelings in this regard:

**Even if everyone was blindfolded for two days it would not help because they can take off the blindfold and see.**

Many young people felt that others not only did not understand, but also did not take

them seriously, saw them as different and were embarrassed to be with them. Several gave examples of incidents outside of school and home, such as people being abusive.

**If you tell people you have a visual impairment you will not be accepted for who you really are.**

**You are who you are and you can't change that. It is sad when people refuse to learn about disability.**

**People don't accept disability. Getting people to understand you would mean that you had a happier life because you would not feel so inferior.**

However several of the young people talked about friends or teachers understanding them:

**My friends help me to feel included and ask questions to understand how I feel.**

**Everyone at school understands and knows what I can and can't do.**

## **Talking about worries and concerns**

The children and young people gave an array of examples of their worries, including: health, family, school, bullying, friendships, and the future. Some shared very personal information.

Bullying came out as a big worry for several of the young people as described elsewhere. Examples included name-calling, and being picked on when they were called out of class. Concerns about the future included worrying about passing on the condition to their children, the condition getting worse, and the impact the visual impairment will have upon things they can do.

Many talked about how their worries and concerns manifest themselves (sometimes in the form of anger or fear):

**I take my anger out on others.**

**I was so angry and depressed that I felt suicide was the only answer.**

**Sometimes I feel so angry I could cry and scream.**

**I feel vulnerable at school.**

**I feel different and isolated.**

**I fear [not] being accepted.**

**I get paranoid if someone does or says something - I assume it's my fault.**

The majority said that they would talk to their mum or dad about their worries, and to some extent their teachers or friends. A few individuals said they would talk to support staff, resource base staff or the SENCO. As already reported several young people said that they could not talk about worries at home because they would upset or worry their parents.

Most of the young people responded positively to the suggestion of talking to someone who was not involved with their family or school. Indeed a number elaborated on the importance of talking about worries and concerns:

**I used to drink to calm me down [...] I realise now it is best to talk.**

**[I would definitely talk to someone because] sometimes people say really nasty things and I feel as if my heart is crumbling.**

**I would talk to a counsellor about how I feel about my problems - some people treat me as a blind person - I sometimes feel trapped in a cage - people over protect me.**

**I would like to talk about how I feel. It is too difficult to talk at home.**

**I would like to talk about feelings that are too difficult to talk about at home.**

## **Concluding thoughts**

The children and young people's comments speak for themselves. Their thoughts and views are not presented here as representative, but invite the reader to reflect on the experiences of children that they know. As was suggested earlier, the process of bringing children together into visual impairment groups, and the nature of the questions, may lend itself to a disproportionate focus on disability specific issues. Nevertheless, children's participation in the interviews was voluntary and many of the children seemed to value the opportunity to reflect on their lives. The counsellor was struck by the number of participants who expressed a desire to meet up and talk with her again!

## **Reference**

Tobin, MJ and Hill, E (1988). Visually Impaired Teenagers: Ambitions, Attitudes, and Interests, *Journal of Visual Impairment and Blindness*, 82, 12, 414-416.

# ● Strand Two - Views from the field - survey of schools and services

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## Method

In Spring 2003, a questionnaire was sent out to 22 organisations comprising services, special schools, resource bases for children with visual impairment and Sense. (See Appendix 1 for details.) Seventeen responses were received, indicating a 77 per cent response rate). The questionnaire explored issues related to support for visually impaired children's social and emotional development, and specifically covered the following areas of support:

- **Curriculum and school level support:**

Explored areas of the curriculum potentially relevant to social and emotional development - particularly Personal, Social and Health Education; Citizenship and pastoral care, generally delivered by mainstream teachers in schools.

- **Visual impairment specialist level support:**

Explored the types of monitoring and intervention provided by professionals with a specialism in visual impairment, eg Qualified Teachers of children with Visual Impairment (QTVI) and teaching assistants.

- **Mental health specialist level support:**

Explored referral routes and services from child psychologists or the child and adolescent mental health services (CAMHS).

The six-page questionnaire consisted of sixteen questions (Appendix 1).

## Curriculum and school level support

### Citizenship and PSHE

The Citizenship and PSHE Curriculums offer opportunities for the support of all children's social and emotional development. Less than half of the respondents however, were familiar with the breadth and depth of either curriculum. The three visual impairment special schools, having a responsibility to deliver both curriculums, were more knowledgeable about them. In relation to whether either can be used as effective tools to support the process of adjustment to living with a visual impairment, responses were mixed. One of the special schools, for example, felt that they did not offer the depth required by their pupils and this was backed up by one of the heads of service, who argued that,

**Children with a visual impairment need longer to develop their understanding of their own emotional development and their impact on others.**

Nevertheless, several respondents felt that both curriculums did present some possibilities, for example:

**Equal opportunities, rights, legislation, representation, communication skills, etc.**

**Potentially yes - through looking at rights and responsibility, through encouraging pupils to be able to express their views, and in promoting respect and understanding of difference.**

**Communication skills, health and sex education, many opportunities for discussion, etc.**

The issue here is perhaps also one of missed opportunities due to the many pressures that support teachers are working under, illustrated by the response from another head of service:

**Support staff liaise with class teachers to plan modifications of materials etc but have little time left in a half hour planning session to plan for PSHE and Citizenship. Often it is a lesson where the child can manage unsupported! Maybe we should change our emphasis.**

## **Pupils with access to school based mentors**

Ten out of seventeen (59%) of the respondents reported having pupils with access to school based mentors. Of those who gave additional details, the majority were in secondary and high schools, and the mentor generally had no experience of visual impairment specific issues (though some gained advice from QTVIs).

One of the secondary resourced schools had a learning mentor appointed specifically to support the pupils with a visual impairment. This support is outlined in detail on pages 59-61 of this report.

## **Pupil access to lunch time and after school clubs**

Most services had pupils who participated in lunchtime and after school clubs - 15/17 (88%) and 16/17 (94%) respectively. However, the response data from this particular question, "Do any of your pupils participate in lunchtime/after school clubs?" is of limited value in that the question, unfortunately, did not elicit numerical data. We were left not knowing the percentage of actual pupils involved in clubs. The RNIB "Shaping the Future" survey in 2000 found that access to clubs and leisure activities was an issue for young people with a visual impairment and anecdotal evidence from the field indicates that this is an area that would benefit from more detailed research.

Significantly, however, 10/17 (59%) of the respondents felt that improved access to transport would raise participation, commenting, for example:

Transport and tiredness of pupils is the main problem after school.

Transport is always an issue in a large county like ours, not only for school based activities but also for "specialist" activities.

Some transport is already provided, but it is in very short supply and will cease when funds do; therefore the club ends.

After school clubs are limited by transport home. If parents cannot fetch them, they cannot participate in activities.

## Visual impairment specialist level of support

Eleven out of seventeen (65%) of the schools and services that responded have some staff with varying degrees of training in counselling. Descriptions of this training varied in detail:

**Tutor from Post 16 service is training as counsellor and will qualify in June. She will work with school age pupils as well as Post 16.**

**Three members of staff have had training but outside their normal job roles. Two (of those) members of staff have had extensive training.**

**Two members of staff have undergone specialist training.**

**I am a qualified child bereavement counsellor and have general counselling training qualifications/experience.**

**We have secured the equivalent of a fulltime counsellor.**

Fifteen out of seventeen (88%) of services felt that the staff without training in counselling nevertheless had some skills to partly support the emotional needs of pupils:

**Some staff are very experienced with working with pupils' families, discussing issues etc. Some do not and some have wrong approach at times.**

**Depending on member of staff - some members of staff are naturally good at counselling.**

**Some staff have natural empathy with children and feel they are able to offer some support. Some members of staff feel the need for training.**

**All the learning support assistants are mature adults with families of their own, and well equipped in my opinion, to help children in this way.**

However, two respondents expressed caution about the level of understanding practitioners have in relation to mentoring/counselling, noting the following concerns:

**I am concerned with the term "counselling" and feel that it is used by people with little training. It can be possibly misused and in the long run be more harmful.**

**The idea of counselling needs to be clarified for everyone - it's not about giving advice or home spun philosophy!**

A number of comments referred to the importance of training. All respondents felt that there were training needs, across the continuum of emotional support, amongst their staff - from awareness raising of the issues to more intensive specialist training.

**Majority [of staff] have received some training but do not regard it as sufficient. (I see a training opportunity here.)**

**(Training in) understanding the emotional and social impact of "being different". We need to learn how to enable pupils to work with their difference - issue of accepting/using support.**

**I feel a brief counselling skills training would help all teaching staff.**

**People need to understand term "counselling" and understand that it is a means to support people in helping themselves in a non-advisory way.**

**A more in-depth course would be useful.**

It is evident from the data that there is a wide range of specialist emotional support for children and young people with visual impairments. Although just over half of the respondents had at least one member of staff with some specialist training, 100 per cent stated that further training at some level was needed for visual impairment staff. Furthermore, the more specialist expertise is not evenly spread across the services and schools. For example, only one of the visual impairment special schools and two of the services employed specialist staff to specifically counsel children.

Overall, this particular section of the research illustrates the importance that QTVIs attach to the provision of emotional support for the children in their care and their commitment to developing their own skills in relation to the children's emotional needs.

## Activities undertaken by services

Respondents were asked about approaches their service/school had adopted in meeting the social and emotional needs of visually impaired pupils. The following table summarises the responses.

**Table 1. Intervention strategies adopted by schools and services**

Activity	% used (N=17)	Level of success*
Improving social interaction skills	100%	Partly (88%)
Supporting parents one-to-one	100%	Yes (71%)
Developing friendships	94%	Partly (59%)
Helping with transition	94%	Yes (59%)
Awareness raising amongst peers/staff	94%	Yes (59%)
Facilitating support between particular parents	94%	Yes (53%)
Setting up parents groups/meetings	77%	Yes (47%)
Participation in buddy schemes	71%	Partly (41%)
Assertiveness/confidence training	71%	Partly (41%)
Circle time	65%	Yes (35%)
Anti-bullying strategies	59%	Partly (41%)
Sibling involvement in activities	47%	Yes (41%)
Participation in peer support schemes	41%	Partly (29%)
Circle of friends	35%	Partly (35%)

\*Level of success - based upon the most common response to the question.

In this context, 16 out of 17 respondents (94%) reported that they had provided awareness training to sighted peers more than once, and 100% reported they had provided awareness training to mainstream staff more than once. Similarly, many services (14/17, 82%) described giving 1:1 or small group sessions specifically to address social and emotional issues. For example:

**This is given when intervention is seen to be necessary rather than as a preventative procedure.**

**When the need arises, ie cultural issues for children with albinism from Asian backgrounds. Support to youngsters with onset of retinitis pigmentosa during adolescence.**

**Tutorial sessions - particularly with high school pupils.**

**Educational Psychologist has talked to [individuals] and small groups, [once] in a counselling capacity over a period of time, re: friendships, confidence building.**

**Social use of language group. Anger management.**

The picture was more mixed for structured social skills training for visually impaired pupils - 8/17 (41%) had used this approach more than once, and the same number had never used it:

**Routine for those with significant impairment in secondary phase.**

**Not really. It is mentioned at certain points and we are looking to provide it for one nursery age child at present.**

**Usually if there is a problem.**

Other activities mentioned by respondents were:

**Making the child aware of the nature of their visual impairment and supporting them in their taking responsibility for it and coming to terms with it - forming a positive self-image for them.**

**We use the eye conditions pro-forma [...] as a way of enabling children to express their own needs and identify useful strategies for themselves and others.**

**We have created opportunities for mainstream based visually impaired pupils to meet to lessen feelings of isolation.**

**Celebrating success. Genetic counselling. Health and beauty sessions.**

**Setting up siblings groups, peer mentoring scheme for children/adults with Usher syndrome. Role models - use of young adults with Usher syndrome as positive role model.**

**Talking to adults - role models.**

It is apparent from the data that the schools and services at an operational level are very committed to supporting the social and emotional development of the pupils. All of them are offering a range of approaches and strategies and clearly place value on this aspect of the children's education. However, only the three special schools have policy statements/documents in the area of social and emotional development (which were in fact embedded in a range of school policies). It seems that the services, whilst recognising at a personal and professional level, the importance of social and emotional support have not generally acknowledged this practice at a policy/strategic level. Discussions at the steering group meetings echoed this point, which is an important one given the range and level of social and emotional support offered to both children and families

Qualified teachers of the visually impaired (QTVIs) generally work under pressure, juggling heavy caseloads, struggling to raise levels of achievement, to access the curriculum, and to deliver the discrete curriculum. Social and emotional support is given to children and families but is not necessarily accounted for in the provision equation. Levels of support

to children and families are increasingly vulnerable, particularly in relation to the delegation of SEN budgets, and it is critical, therefore, that services begin to acknowledge and account for social and emotional support at a policy level.

## **Specialist support from Mental Health practitioners**

Fifteen out of seventeen (88%) of respondents reported one or more pupils being referred to mental health specialists over the preceding 12 months (and in most of these cases the number was greater than one pupil). A variety of different people were involved in this referral process. In six of these cases a QTVI was involved, but also mentioned were parents, social workers, educational psychologists and school managers. About half the respondents (9/17, 53%) felt that all or most staff generally knew when to refer on to specialist mental health teams, though the remaining respondents felt only some staff knew and that others were unsure. Indeed, only one respondent reported having explicit criteria for referral to a mental health team, and similarly only three respondents had policy documents in the area of social and emotional support (either a specific document or embedded in other documents).

In terms of referral to mental health specialists, 12/17 (71%) of services felt there were training needs amongst visual impairment staff in relation to referral:

**Never thought of it as a need until doing this questionnaire.**

**Training to understand (a) what we can do/strategies and range of approaches, (b) when we need to pass it on - and then how to support the arrangements.**

**Referral routes eg GP versus CAMHS? Pattern of symptoms etc.**

**Would benefit from National Guidelines on this.**

**Some staff may take on work which should be referred on to a specialist.**

Compare this with two respondents who did not feel such a formal procedure was necessary:

**You know when to refer on after departmental/colleagues discussion - it is common sense.**

**Instinctive concern that pupil has needs we cannot meet.**

Similarly, 11/17 (65%) of services felt there were training needs amongst specialist mental health staff about visual impairment issues:

**This would make a big difference to how they would be equipped to deal with the visually impaired child. If not a visual impairment specialist in place, at least somebody with disability awareness and input from visual impairment services on referral.**

Awareness raising is important but cannot be trained in all specialisms.  
Important to liaise with visual impairment specialists where confidentiality allows.  
Definitely and we would be keen to offer it. (Service with a QTVI who is a counsellor).

## Future development

All respondents felt there was a need for a counsellor with specialist visual impairment knowledge, with the following comments:

A person with training in visual impairment (not necessarily a teacher) would have more knowledge of the issues raised due to impairment.

Somebody impartial with a knowledge of visual impairment issues, with counselling skills who we can refer on to when we feel that we can no longer deal with issues arising.

Yes, it would be greatly appreciated by children - to have an "outsider" to provide this.

A regional counsellor would be helpful.

Not all families or pupils would need this, but when needed would be invaluable.

Would need to be able to work with pupils and teachers to explore issues in a long-term way.

Birmingham now has a funded post for a counsellor for children with visual impairment up to 14 years.

Our only counsellor deals with under 13's - we have mostly older students who have additional problems of adolescence.

Regional/area specialist desirable.

We have [this,] but this only covers age 5-13. We desperately need someone for 13+ ages.

Many of the issues our students deal with are common to young people (with/without visual impairment) but some have a specific visual impairment element and access to someone who has understanding of this is important.

As indicated in the comments, many saw potential opportunities to collaborate across region (15/17, 88%), with the following comments:

RNIB Social Inclusion group has opened up these opportunities.

Employing somebody on a regional basis who could take on a caseload of referrals.

[...] Looking at the wider perspective, I think this may be the only practical way forward. The numbers are not great but that does not reflect the need. The need definitely exists and provision regionally is probably the only way forward.

Regional training, WM Counsellors, regional group of visual impairment teachers to meet about social & emotional issues.

Continuation of Social Inclusion Group when funding ceases; visual impairment Forum; Midland Peris; Head of VI Support Services Group.

Time and resources allowing joint/cross LEA working would be invaluable.

Low incidence - so share any previous examples of good practice.

With UVIS in Birmingham - teachers of VI meet regularly.

More advice should be available to schools at Ed Psych level about what services can be offered to families and children.

Only if there existed a group of therapists. All schools and services should have an on-site counsellor.

The RNIB Social Inclusion Project has provided a good start to collaboration and I hope this continues after the project finishes.

Sports - chatting on phone - comparing notes on sighted world - amusing incidents - sharing experiences.

Forum for discussion/sharing of experience, designated counselling support, training for staff.

# ● Strand Three - School and community based projects

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## Video project

### Outline of project

Discussions with the children and young people in the focus groups underlined the need for, and the importance of, disability awareness training amongst sighted peers. The finding from the Scottish Social Inclusion Report (2000) reinforces this, the Scottish children stressing the importance of classmates and friends understanding the implications of visual impairment. One of the report's final recommendations was for schools to develop ongoing awareness raising with peers on visual impairment issues.

The steering group supported the idea of making a video to contribute to what was felt to be a relative dearth of materials/resources to support the delivery of awareness raising sessions in schools.

Two Birmingham secondary schools, both with mainstream resource bases, were selected to take part in this project. During the course of the project links were established with staff and students from RNIB New College Worcester. This enabled young people from the both the mainstream and special education sector to come together, and through their work on the video, share their stories and experiences.

The project is ongoing, working to an Autumn term deadline (2004). Birmingham and Solihull Connexions have provided an additional small grant to enable us to finish filming/editing and to record the background music with support from Birmingham Symphony Hall's Disability Co-ordinator.

From the outset the young people have played a key role in creating the ideas and structure of the video. It will be a video made by young people, for young people, and will reflect their voices and views.

The video has been supported by Rubber Ears Video Company, who have considerable experience in making videos with young people, and by the Women in Theatre Company who have worked extensively with Birmingham schools, using drama to explore issues around inclusion.

### Video outline

It was decided that the video would cover three broad areas:

- social and emotional issues
- practical issues
- support issues.

### **Focus: Social/emotional issues**

Video diaries made by a number of young people who differ in age, cultural background, levels of vision and personality will illustrate the individuality of the young people whilst simultaneously drawing out shared experiences in relation to visual impairment.

### **Focus: practical**

Young people talking about practical difficulties in a Big Brother type chair combined with footage of cooking/putting on make-up/mobility etc. Specialist equipment and strategies will be an incidental part of this. Comedy sketches, using well-known TV formats such as "What not to wear", will be used to underline some of the points.

### **Focus: Support/independence issues**

This will be footage of the young people in and out of school, talking about access, support and independence issues. It will cover a broad range of lessons and situations at school and will include a cross section of leisure pursuits out of school. It will explore the implications of support - practically, socially and emotionally.

Throughout the video attitudes around disability will be explored both from the young people themselves and members of the general public.

## **Year 6 transition day**

### **Outline (see Appendix 2 for programme)**

#### **Session one - Ice breakers**

The children initially are asked to get together in pairs and find out three things about each other and then share this with the group.

"Hello Bingo" is played next (see Appendix 3). The children have to find someone in the room, pupil or staff, whose name they can put by each category. They are asked to try and speak to everyone in the room and to enter a different name in each box.

#### **Session two - Expectations for the day**

The children are encouraged to articulate what they want from the day and their ideas are recorded on a flip chart. The facilitator reassures the children that their expectations for the day will be returned to at the end of the day.

#### **Session three**

Working in groups of three, with flip chart and pens, the children focus on what will be different about secondary school and what worries they have.

After sharing their thoughts with the whole group the children then go through their lists and try to find ways in which they could stop themselves worrying, to find solutions to their anticipated worries and concerns.

The solutions are then shared within the larger group.

### **Session four**

This session of the morning requires the children, still working in groups of three, to role play how they would deal with one of the concerns/worries raised. Bullying, getting lost, being left alone and detentions were some of the worries that the children shared with the group. When sharing with the group the children are asked to set the scene for each role play and outline the characters.

### **Session five**

The final session of the morning, using the "help sheets" is a way of drawing the morning's work to a positive conclusion.

At lunchtime the children are joined by four secondary pupils with visual impairment, one each from Years 7 and 8, and two from Year 9.

The children chat together informally over lunch, which proved to be a very valuable part of the day!

### **Sessions six and seven**

These sessions rolled into one, with the secondary pupils beginning by sharing their experiences of life at secondary school followed by a question and answer session.

The secondary pupils were all eager to come to the transition day, not just because it was an afternoon off school, but because they all understood and had shared similar anxieties about starting secondary school.

### **Session eight**

The last session of the day enables the children to reflect on what has been helpful and returns to their expectations of the day recorded on the flip chart at the beginning of the day.

## **Evaluation**

Two questionnaires were filled in, one during the day (Q1) and one at the end of the day (Q2) (See Appendix 4).

All responses to the questions are listed, followed by a summary of their comments.

## Questionnaire 1 (Q1)

Nine children filled in the questionnaire.

### 1. The Training has helped me to:

- how to learn from my mistakes
- what to do when I have forgot my homework
- build up my confidence towards the pupils and teachers
- it made me think secondary school was not the end of the world
- be more confident for secondary school
- to know more about how secondary school will be
- be more confident with my secondary school and also so I could get to know it more
- it has helped me with my secondary school teacher and pupils
- to make new friends
- work hard in new school
- be comfortable about what some of what we have listened about secondary school would be about
- when we had been to my induction and had helped me here a lot
- learn about my new school
- helped me to know about detentions, dinner and uniform
- to be more confident
- to listen and not be distracted.

A quarter of the responses related to the fact that the training day satisfied the children's need for information about what secondary school was like. For example, "Helped me to know about detentions, dinner and uniform." A further quarter of responses related to improving problem solving skills. For example, "What to do when I have forgotten my homework". The remaining responses related to the children's self-evaluation of their confidence levels - such as "Build up my confidence towards the pupils and teachers."

### 2. I need help with:

- other children because there might be more people in secondary schools
- buildings
- work within secondary school
- getting lost

- PE
- uniform.

Four children did not respond to this question.

All of the responses related to concerns about finding their way around the new environment and worries about uniform and kit.

### **3. When I go to my new school I will try to:**

- make more friends by talking to them about themselves
- when I go to my new school I will try to talk to lots of children
- be more confident in myself and to overcome my fears
- make new friends
- make as many friends by talking to them
- make as many friends as possible on the first day
- do the things that I have learnt to do
- work hard in my new school and make friends
- do my best and work hard and make friends
- I think I should try my best
- make as many friends as possible.

A third of the responses related to friendships and the expectation that they will make new friends. Generally the responses indicated a degree of confidence, self-belief and a desire to work hard and do well.

### **4. I am most looking forward to:**

- meeting another visually impaired pupil and doing PE
- all my cousins that go there and my friend, also my brother that goes to the school I am going to
- Science, English, Maths and PE
- new subjects and topics I have to learn
- making friends
- go to my new school and try my best every time
- my new school to see if the teachers would be nice or mean
- PE, Technology, Science.

A mixture of responses relating to excitement about various aspects of secondary school ranging from making new friends, the challenge of a range of subjects and the possibility of being with another child with visual impairment.

## **Questionnaire 2 (Q2)**

Eight children filled in the questionnaire. (One child had left early due to transport difficulties.)

### **1. What did you enjoy most about the day?**

- I enjoyed meeting the secondary people and getting to know them
- food
- I learnt that secondary school is going to be a big step
- talking to Bournville students.

Meeting the secondary children seemed to be an important experience for most of the children. They met informally over lunch followed by a chaired discussion in the afternoon. Both sessions were animated and lively.

### **2. What did you enjoy least about the day?**

- talking to the secondary school children
- doing more talking and answering
- coming here (the VTS centre)
- the list
- at the start because I did not know anyone
- I felt embarrassed doing the play and getting lines right.

Most of these responses indicate a degree of social shyness or embarrassment in relation to a new situation and meeting new people. Role-play can be an excellent teaching tool but it can also be a challenging or daunting activity for some children.

### **3. What was most helpful?**

- nothing
- answers from other people
- Year 8 coming in
- secondary
- role-play
- meeting secondary school pupils

- **help**
- **talking to other pupils.**

The value of talking and listening to others characterises some of these responses and references again to the benefits of having the opportunity to talk to secondary pupils.

#### **4. What was least helpful?**

- **4 x nothing**
- **the question that we know**
- **lists**
- **playing in ball pool at the start (session took place in a room with early years equipment!)**

It was encouraging that half of the children felt that the experience offered nothing negative.

#### **5. Anything else you would like to say?**

Only one response was recorded which was the child wondering what their new uniform would be like!

#### **6. Would you like to come back in October and tell us what transferring to secondary school has been like for you?**

All children stated that they would although unfortunately, due to the usual commitments and pressures on teachers, this did not happen!

Overall the Year 6 transition day was perceived by children and staff to be a great success and is now an annual event for the Year 6 children in Birmingham.

# Social skills project - primary

## Stage 1 aims

1. To establish a baseline of the children's perceptions of their social interaction patterns and competencies in school.
2. To establish a baseline of the class teacher's perception of the children's social interaction patterns and competencies in school (see Appendix 4).
3. To establish a visual profile for each child.

## Stage 2 aims

1. To explore, through circle time, issues regarding social interaction.
2. To explore listening, feelings, bullying, friendship and conflict.
3. For the counsellor and class teacher to be aware of and sensitive to the feelings of individual children in relation to any issues raised. For the counsellor to have time available for follow up with an individual child if required.
4. To create a structure within which individual children's needs in relation to social and emotional development and communication skills are more easily identified.
5. To develop children's awareness, insight and understanding of the role of an individual within a social group.
6. To develop children's awareness, insight and understanding of their own role within a social group.
7. To develop a more specific programme of intervention based on observation and outcomes of this stage.

## Outline of Stage 2

### Circle time activities

#### Rules

Talk about kindness and rights; encourage, through questions, the children to think of the rules, initially for the time of the project but for all the time. Start each group with the rules.

- being kind to each other
- listening to each other
- helping each other
- talking to each person every day.

## Listening

Listening is not just sitting still and not fiddling, it is also not interrupting someone, having the time and understanding what someone is saying.

Thought storm the differences between listening when you have a visual impairment and being sighted.

Children to think about who listens to them and give examples of good and bad listening. Talk about main elements of each.

Role play in pairs good and bad listening.

Role play talking to a partner and give feedback on listening skills and how you knew you were being listened to.

In pairs, find out three things about your partner, and feedback to the whole group.

## Feelings

With appropriate music encourage the children to act out or dance different feelings (happy, sad, scared, angry).

Discussion after each:

- what makes you feel ...?
- what do you do when you feel ...?
- does this help?
- what else could you do?
- who do you tell when you feel ...?
- how can others tell that you feel ...?

## Other people's feelings

Working with a partner using either a questionnaire or audiotape, encourage the children to discuss how they feel when someone shows:

- a feeling
- what they want to do and how they know and how they could help, for example, if someone is feeling sad.

## Role play the children's suggestions

Go round the circle saying in turn:

- favourite toy/game (why?)
- favourite food (who else likes it?)
- who they like to play with (why?)
- a good thing about me is ...

- what is your very best sort of day?

Hopefully by talking about the "best" it will give us an understanding of any concerns or difficulties.

For example, if the best sort of day is when "someone plays with me", how often is this child left without someone to play with?

## **Bullying**

Describe a short scenario giving an example of playground bullying. Discuss with the children and encourage the children to think about:

- what the child being bullied could do?
- who could he tell?
- what could his friend do?

List other kinds of bullying:

- why do people bully? Why are people bullied?
- who might be bystanders, how could they help?
- what should the school do to stop bullying?

Role play the scenario, then again with changes as discussed.

## **Friendships**

Thought storm the qualities children look for in a friend.

In pairs (questionnaire/audiotape) find out two things your partner:

- likes to do
- does not like to do
- is good at
- is not good at.

Talk about what children like to do with their friends, and what they do if they fall out or if their friend is unhappy.

## **Conflict**

Read and discuss the green monster story (see page 53).

Make a large monster picture, encourage the children to think of how they "grow" a monster; hitting someone back, name calling, being angry etc. What can they do to "shrink" the monster; say sorry, make friends, include others in games.

These are an example of some activities used in the social skills project. Sessions were held over eight weeks with either 2 x 30 minute sessions per week or 1 x 1 hour per week, depending on topics.

# Social skills project - 10 to 14 years

This project is still under development and will be available following its implementation and evaluation in Solihull LEA. Its aim is to address the emotional and psychological needs of young people with a sensory impairment aged between 10 and 14 years. Thus far it comprises 8 lessons, each lasting 45 minutes to an hour. It will have an introductory lesson to set the scene and enable the students to "tune in" to the project and the concluding lesson will be an opportunity to reflect on their learning during the 6 preceding lessons. The programme is being written by Mike Lane, an educational psychologist, who himself has a dual sensory impairment and Veronica Myko, a children's counsellor working with RNIB.

## **Lesson 1**

Outline of the project's aims/tuning in to the project

## **Lesson 2**

Challenging negative self-thoughts via positive self talk strategies

## **Lesson 3**

Problem solving skills

## **Lesson 4**

Coping skills - developing an understanding of and being able to address stress factors that are either externally or within-person located

## **Lesson 5**

Social skills

## **Lesson 6**

Assertiveness training

## **Lesson 7**

Challenging helplessness and hopelessness - implementing and using problem solving skills and coping skills to address negative emotions.

# Bright futures day

The steering group had identified young people with degenerative and adventitious conditions as a high risk group in terms of adjusting socially and emotionally to sight loss. Dual sensory impaired young people such as those, for example, with Ushers syndrome or Sticklers were highlighted as a significant sub-group within this larger group.

The steering group discussed at length the impact of both a gradual or a sudden loss of sight on self-image, self-esteem and independence. In particular, the feelings of frustration and loss that many of the young people experienced as a result of not being able to drive, was of concern.

Out of these discussions evolved the idea of holding a regional family day bringing together young people with degenerative/adventitious conditions, their siblings and their parents. The day would provide opportunities for informal support through workshops and discussions and a range of challenging and exciting activities to build confidence and raise self-esteem.

The "Bright Futures Day" was planned by RNIB's Education Officer and Sense West with the support of an educational psychologist from the region, who himself is dual sensory impaired.

The day was held at the Warwickshire Adventure Sports Centre and we were blessed with sunshine which was fortuitous since many of the activities were outdoors!

Eleven families attended the day, comprising 16 parents and 21 young people aged between 10 and 21, both visually impaired and sighted.

Parents and the young people had separate workshops and activities throughout the day, but came together for lunch and at the end of the day for Human Table Top football which is a wonderfully inclusive and fun game and was a brilliant, if not exhausting way to end the day!

## **The event was supported by:**

Warwickshire Adventure Sports

Sense West

Sense Sibling Support Network

RNIB West Midlands, Education and Employment Division

Hair and Beauty Department of Birmingham College of Food, Leisure and Tourism

Look Connexions Officer

Children's counsellor

Aromatherapy and massage

# Programme for the day

## Parent workshops

- A day in the life of Wally Pepper - the aim of this session was to enable parents to share experiences within a context which raised hopes and aspirations. Wally, for example, despite being blind, had been a washing machine repair man, had owned a number of cars, had written for a car magazine and held a land speed record for driving!
- Moving on from school to college - this was led by the RNIB Post 16 Officer, himself blind.
- Employment access - led by the RNIB Employment Officer
- Sharing experiences - facilitated by a counsellor and an experienced QTVI, herself a parent of a young disabled adult

In the afternoon the parents had a chance to try out the activities on offer, such as massage, a makeover and careering round in a 4-wheel drive Land Rover!

## Young people's workshops

The young people were divided into groups and took part in a range of workshops:

- 4-wheel driving in Land Rovers. Every child that could reach the pedals (from about age 11) had a go at driving. The instructors were not fazed by any level of vision loss or moderate additional disabilities - one participant being registered blind, hemiplegic and very small! The track was very rough, mostly consisting of steep, challenging hills. This activity was extremely popular and uplifting for the participants, if not a little scary for the support staff at times!
- Armoured personnel driving. This was an exciting opportunity to drive a tank across very rough terrain. Not for the faint hearted as it can be very bumpy, a little disorientating with lots of interesting fumes from the engine!
- Music technology. Two activities were available - Using E-Jay, a simple building block based software programme, which allows the user to quickly and relatively easily produce their own dance music. Magnification software was installed on each of the lap tops but young people who were blind were supported individually or participated in the alternative activity. This involved using real instruments, voices and software instruments to compose and record individual compositions.
- Hair and beauty. A chance to have hair styled, face made up or nails painted
- Aromatherapy and massage. A qualified aromatherapist relaxed some of the young people and a few mums, with head, neck, shoulder, hands and feet massages.

In the afternoon the young people chose to attend two out of the following four workshops:

- **Moving on from school to work**
- **Getting help at work and college**
- **Why me? Growing up with a visual impairment**
- **What are my rights?**

## **Human table top football**

The day finished with a Human Table Top Football tournament. This has to be played to be believed! It is a game which acts as a great leveller and as such was a great end to the day. Everyone joined in, young and old, blind and fully sighted. It is played like the table top football game, only outdoors in a field. It consists of a rectangular inflatable structure with poles going across to which the players are fastened. Players can only move from side to side, along with other players attached to their pole, and can also only make contact with the ball with their feet. As the pitch is contained and players are safely attached to the pole, it is relatively easy to join in and score goals. Some players fared better than others but there was great laughter and delight when one of the smallest participants, who had a visual and physical disability, scored against a strapping, fully sighted able bodied lad!

## **Evaluation**

Evaluation of the day took place in a great hurry, at a time when many of the young people and parents were exhausted from the football tournament and slumped on the grass! Nevertheless, 21 evaluation forms were completed and the day seemed to be well received as the following comments and two case studies indicate:

**All the activities were great fun, and meeting just one or two people in a similar situation to myself was a great source of inspiration.**

**Informative, nice to meet other families, team building.**

**The day was fantastic.**

**I enjoyed the fact that the children could be together and try new things that they might not otherwise do.**

### **Case Study 1 - Mark (name has been changed)**

At the time of the event Mark was 16 years old. He was registered blind the year previously, following the very sudden and completely unexpected diagnosis of lebers optic atrophy. He attended the "Bright Futures Day" with his sighted friend and his dad. Mark was "car crazy" and prior to his diagnosis had already bought an old car which he was doing up with his dad and learning to drive in car parks. Understandably, the vision loss was devastating for Mark, and his family who were all struggling to come to terms with the implications, both emotionally and practically.

Mark and his dad left the day feeling much more positive about the future. His dad had been very pleased to meet Wally Pepper and encouraged by all that Wally had achieved and Mark now wanted to work towards a new land speed record for a blind driver and was keen to pursue off-road driving.

A month or so later, Mark's dad contacted RNIB's Education Officer very concerned about the impending long summer holidays and generally worried about Mark's ongoing adjustment difficulties. He wanted to pursue off-road driving. We discussed possibilities but as Warwick Adventure Sports was too far to get to on a regular basis we looked for more local opportunities. After several rejections from go-carting centres due to health and safety issues (regarding his visual loss) we struck lucky with Birmingham Wheels Adventure Park. They were extremely supportive and saw no problems with health and safety issues or insurance. Suddenly a barrier had been lifted! The Education Officer successfully bid to the National Blind Children's Society for money to fund his attendance at Birmingham Wheels during the summer holiday.

## **Case Study 2 - James (name has been changed)**

James, a young man in his early twenties with Ushers syndrome, attended the day with his younger brother, who also has the condition, together with their parents. Colleagues from Sense had been concerned for some time about the degree of denial that James was experiencing in relation to his visual loss, still wanting to risk driving his car, for example, even though it was not safe to do so. James enjoyed the Bright Futures Day, particularly the driving aspect, and as a result of chatting informally to the key worker from the Sense Sibling Network, agreed to put himself forward for the peer mentor training. This training, in preparing an individual to support other young people with Ushers, simultaneously helps in the process of coming to terms oneself with the impact of the condition. Although only a small step it was felt to be a breakthrough for James.

# Audit of materials for social and emotional support

The West Midlands Social Inclusion Project confirmed the significant role that teachers and teaching assistants play in supporting the social and emotional needs of children and young people with visual impairments. There is a wealth of resources in the emotional and behavioural field that are relevant to the support of these children. We wanted to bring these resources to the attention of professionals within the visual impairment field. The materials cover social skills and emotional literacy - the ability to recognise, understand, handle and appropriately express emotions.

This review was compiled by Annie Bearfield and Liz Hughes with the support of Suzy McDonald, Lisa Evans and Chris Thomas. The views are those of the authors, and we do not accept responsibility for the suitability of products for particular pupils who you are involved with. The items were chosen based on the following criteria: how visual impairment friendly the item was, how easy it would be to adapt and how it would suit the needs of teachers and teaching assistants working in a variety of settings.

**The resources reviewed are all stocked by Incentive Plus - See page 54 for ordering details.**

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## Key

Early Years: **EY**

Primary: **PR**

Secondary: **SEC**

Individual/One-to-One Use: **1:1**

Group use: **GRP**

Suitable for those with moderate low vision: **MLV**

Suitable for those with severe low vision: **SLV**

Suitable for those who are blind: **BL**

Best products: **BP**

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**Because I'm special** by Margaret Collins (Ref 25-4001 - Price £19.80)

**MLV SLV BL PR 1:1 GRP BP**

A take-home programme which is designed to enhance the self-esteem of children aged 6 to 9 years. The activities it contains emphasise the role that families have to play in the building of self-esteem, and in preparing the way for good home-school relationships. It contains 10 sets of "take home" worksheets (which can be started in class and completed at home), which could be photo enlarged or brailled. The sheets cover self identity, self worth, friendships, body language, intercommunication, feelings, confidence, empathy and sympathy, relationships and co-operation. The A4 worksheets are very clear, are not cluttered and the print size is approximately 20 point.



## Social skills

**Socially speaking - LDA** by Alison Schroeder (Ref 1-447 - Price £18.99)

**MLV SLV BL EY PR GRP BP**

A unique social skills programme which lasts a whole school year and is divided into three units - Let's Communicate, Let's Be Friends and Let's Practice. It aims to introduce and develop the skills which pupils need in order to develop and maintain positive relationships. It contains over 50 worksheets which could be photo enlarged or brailled. Activities include eye contact (and behaviours for when you cannot make eye contact), body language, friendship and emotions. Evaluation is simple, clear and brief and assessment sheets are included. It can also be used with pupils who have mild learning difficulties. This is a comprehensive practical manual which is packed with teaching ideas.



**101 games for social skills** by Jenny Mosley & Helen Sonnet (Ref 1-4020 - Price £15.99)

**MLV SLV BL PR GRP**

A fun resource containing tried and tested games, which aim to help children develop positive relationships and to learn the skills required for healthy interactions. The games teach looking, listening, speaking, thinking and concentration skills and they also provide opportunities for the skills to be applied in different social contexts. Materials, such as pictures and words, which are needed for activities are included and could be photo enlarged or brailled. The games could be used in Circle Time or as part of the regular curriculum.



**Social skills activities** by Dianne Schilling & Susanna Palomares (Ref 2-1136 - Price £19.95)

**MLV SLV BL PR 1:1 GRP**

An American manual which teaches self awareness and social skills, and also provides meaningful experiences in which pupils can establish and maintain healthy and effective social relationships. The book covers the areas of anger and fear, positive self talk, effective communication, responsibility, rules and friends. It contains worksheets that are clearly laid out and text is a minimum of 14 point, and the sheets could be photo enlarged or brailled as required. These activities could form part of Circle Time.



## If we were all the same poster (Ref 142-4114 - Price £5.00+VAT)

### MLV PR SEC GRP

A large clear poster on which are a series of identical faces and large clear text. This could be used for wall displays or for group/class activities.



## Time to talk - LDA (Ref 1-1441 - Price £19.99)

### MLV SLV BL EY 1:1 GRP

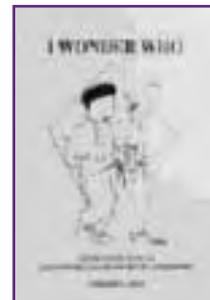
This resource aims to teach and develop oral language and social interaction skills to children aged 4-6, or older children with learning difficulties. It contains 40 sessions, which are designed to take place 2-3 times a week, for half an hour. Ginger the bear teaches and develops the "rules" of interaction, including eye contact, turn taking, awareness of feelings, listening and attention. The activities can be facilitated by either a teacher or teaching assistant and there is the opportunity to involve parents. There are worksheets and evaluation sheets which are well laid out and clear and could be photo enlarged or brailled. Some pictures would however need to be simplified before enlargement took place.



## I wonder who by Richard Biren (Ref 12-1483 - Price £10.95)

### MLV SLV BL PR SEC 1:1 GRP

A resource which aims to improve social skills for friendship, through activities including meeting others, listening skills (including listening for feelings), being honest, dealing with irritating behaviour and feelings. Activity sheets are photo enlargable and brailable.



## Early social skills posters (Ref 53-1308 - Price £22.50+VAT)

### MLV PR GRP

A series of 16 posters which help to teach social skills in the classroom, including following instructions, offering to help, asking for what you want, giving and receiving complements and criticism and talking with others. The posters are very clear, have simple line drawings and use simplified language in large print. Could be used for wall displays or for group/class activities.



**Let's get together** by Lynn Fox (Ref 2-494 - Price £19.25)

**MLV SLV PR GRP**

A manual which addresses how to foster positive social relationships and overcome prejudice. It contains activities and worksheets which can be photo enlarged. It focuses on friendships, promoting awareness of each others background, interests and feelings and helps to produce an accepting attitude. This American book is research validated.



**Be my buddy** by Toni McRae & Karen McDonald (Ref 96-1697 - Price £23.30)

**MLV SLV BL EY 1:1 GRP**

Two books which promote and support friendship between older and younger children. They aim to help pupils learn social and academic skills from each other, in a caring and friendly environment. Pages could be photo enlarged or brailled as required.



## Self esteem

**Helping children to build self-esteem** by Deborah Plummer (Ref 48-1643 - Price £17.95)

**MLV SLV BL PR 1:1 GRP BP**

A creative resource which contains 100 simple, practical and fun activities, which are aimed to help children build and maintain self-esteem. The resource also contains a theoretical section for teachers. The activity worksheets are clearly laid out in 18 point print and could be photo enlarged or brailled as required. The worksheets encourage children to use their natural imaginative and creative abilities to consider their relationships with others. The sections include who am I?, friends and feelings, talking, problem solving and setting goals.



**Because we're worth it** by Margaret Collins (Ref 25-1988 - Price £12.00)

**MLV SLV BL PR GRP**

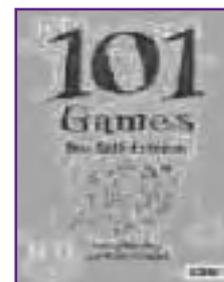
Aimed at 4 to 9 year olds this book aims to help children value themselves and to understand their own character and their strengths and weaknesses. It offers a range of practical ideas to enhance self-esteem. It is linked to curriculum guidance 5 - Psychological aspects of health education. The activities focus on aspects such as feeling good, someone different, falling in and out of friends, listening skills and I can do it. It also recommends story books that are appropriate for use with this book.



**101 games for self-esteem** by Jenny Mosley & Helen Sonnet  
(Ref 1-2009 - Price £15.99)

**MLV SLV BL PR GRP**

A practical collection of fun games which aim to promote self-esteem, help children to relate well to others and to feel more positive about themselves. The games also teach children important skills including self awareness, empathy, co-operation and trust. Materials, such as pictures and words, which are needed for activities are included and could be photo enlarged or brailled. The games could be used in Circle Time, as part of the regular curriculum, and some can also be used as playground games.



**Exploring my self-esteem game** (Ref 152-4136 - Price £42.50+VAT)

**MLV PR GRP**

A non-threatening game which requires children to draw upon their own experiences and emotions to reveal how they see themselves and how they deal with emotions. The game focuses on worry, wishes, fear, anger, sadness, school and play. The board is clearly laid out, and is not cluttered. The playing cards are small and white (8cm by 6cm) with clear text. The cards could be photo enlarged if required.



**Self esteem game** (Ref 13-1797 - Price £13.50+VAT)

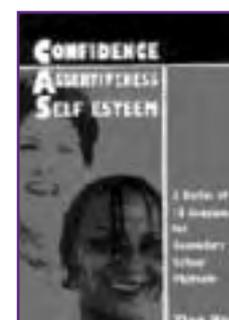
**MLV SLV BL SEC GRP**

This game aims to help pupils notice the positives in both themselves and in others, and to become more aware of their own strengths and personal qualities. Contains 72 playing cards (8cm x 5cm) which have a yellow background and black print. These cards could be photo enlarged or brailled. The cards are however slightly small and would require some modification, for blind pupils to access them, as some cards contain a large amount of text, which when brailled would not fit on the card.

**Confidence, assertiveness and self-esteem** by Tina Rea  
(Ref 25-1080 - Price £26.40)

**MLV SLV BL SEC GRP**

This programme aims to promote the inclusion of pupils who are experiencing emotional and behavioural difficulties by building their self-esteem, confidence and positive behaviours. The programme addresses negative thinking, positive points, friendship, acceptance, assertiveness and anger management. Each session includes a clearly laid out worksheet, with a print size of approximately 12 point, which could be photo enlarged or brailled as required. This programme could be used to support IEPs.



## Identifying strengths

**Strength cards for kids** (Ref 99-1670 - Price £29.95+VAT)

**MLV EY PR 1:1 GRP**

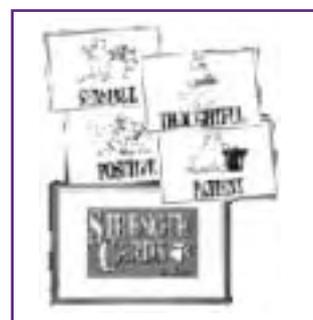
A set of 40 A5 cards each consisting of a large colour picture and one sentence below it to describe a strength. The cards are laminated and would therefore be hard wearing, however the coating may cause some problems with glare. The text on the card is large, approximately 36 point. These cards could be used to identify strengths and find solutions and could be used as part of Circle Time.



**Strength cards** (Ref 99-1667 - Price £29.95+VAT)

**MLV SLY BL EY PR 1:1 GRP**

A set of 48 cards which contain a simple picture and a one word positive concept in large print. The cards can be used to reinforce the principle that we all have strengths. These cards could be brailled. Accompanying stickers may also be purchased for this item.



## Feelings and emotions

**The mad sad glad game** (Ref 46-1266 - Price £22.50+VAT)

**MLV SLY BL PR GRP**

A fun game which teaches important lessons about matching feelings and emotions with situations. Children are read situations, such as "When someone yells at me I feel" they then have to respond with one of the following emotions, mad, sad, glad or afraid. The emotion cards contain pictures, but are also labelled with the words of the emotions. The cards are of good contrast with clear print, and could be photo enlarged or brailled as required. This simple game can be played competitively or cooperatively. It does however only use four emotions, and is therefore of limited use. It is a good starter game though, and it could be used with children who have emotional or learning difficulties.



**Face your feelings** by Lawrence Shapiro (Ref 45-1218 - Price £25.95)

**MLV SLY BL PR SEC 1:1 GRP**

A book and card game which displays 52 photos of children and adults expressing 12 basic feelings. It can help pupils to understand the importance of expressing and understanding feelings. The pictures could be photo enlarged as they are already in greyscale format, however the pictures are slightly grainy. The text is large and clear, approximately 24 point, and it could be brailled if required. The pictures would however be inaccessible for a blind child.



## **Stress can really get on your nerves** (Ref 23-1236 - Price £7.75)

### **MLV SLY PR SEC 1:1**

A light hearted look at how children can understand and manage their stress. It includes tips for dealing with stress and being stronger and more assertive. The print is approximately 16 point.



## **Emotions photo cards** (Ref 1-1435 - Price £19.95+VAT)

### **MLV EY PR 1:1**

A set of 48 photo cards which depict real life situations, and aim to evoke a wide range of emotional responses. The photos are on cards 20cm by 14 cm and the images are clear. They also contain multi-racial pictures.



## **The feelings story book** by Alexandra Delis-Abrams (Ref 137-2452 - Price £9.95)

### **MLV SLV BL EY 1:1 GRP**

Contains 26 illustrated one-page feeling stories, which can be read aloud or individually by pupils. Each story focuses on a specific emotion, and there is an open-ended question at the end of each story to stimulate discussion, for example "how do you think the boy is feeling?". The storybook acts as a tool for promoting social and emotional growth through empathy and understanding.



## **Feeling good game** (Ref 152-4134 - Price £40.00+VAT)

### **MLV SEC GRP**

A game that encourages players to feel good about themselves by recognising, understanding and expressing their emotions. It has a clear and uncluttered board and the playing cards, which are 9cm by 6cm, have print approximately 16 point. The playing cards are either feeling or doing cards. Feeling cards contain questions pertaining to different emotions, for example "what do you do when you are angry?" Doing cards require players to act or draw out feelings, for example "act as if you are doing something that makes someone proud of you."



## **The feelings diary** by Gillian Shotton (Ref 25-4002 - Price £13.20)

**MLV SLV BL PR SEC 1:1**

A comprehensive resource designed to encourage the emotional development of children who are experiencing difficulties with anger management, social skills, stress management, interpersonal communication and friendship skills. This resource can potentially be used by pupils in years 2 to 9. The diary is completed each day (for approximately 10-15 minutes), which can be done with the help of a teacher or teaching assistant. The diary pages could be photo enlarged or brailled as required. A possibility for use would be for the child to write the diary each day, and then to share it with the adult once a week, when they could focus on controlling a particular emotion. It is essential that the pupil feels comfortable with, and trusts, the adult involved.



## **Behaviour difficulties**

### **Anger management game** (Ref 13-1902 - Price £13.50+VAT)

**MLV SLV BL SEC GRP**

Aims to encourage children to gain an insight into their own behaviour and that of others. Contains 72 cards (8cm x 5cm) which have a white background and blue print. These cards could be photo enlarged or brailled. The cards are however slightly small and would require some modification, for a blind child to access them, as some cards contain a large amount of text, which when brailled would not fit on the card.

### **Just stop.. and think** by Fiona Wallace (Ref 25-1699 - Price £19.80)

**MLV SLV BL PR SEC 1:1 BP**

A ready-made set of materials for those working with pupils who are experiencing difficulties with their behaviour. It is a solution focused model which aims to help pupils plan to improve their own behaviour. They are encouraged to look at the current situation, to explore the range of possible ways forward and to draw up an action plan of how to tackle their behaviour. It covers observations of their own behaviour, the point of view of others, how the future might look, the range of choices for action, potential sources of help and pitfalls. The resource contains 60 worksheets which could be photo enlarged or brailled. This resource would be suitable for peripetetic teachers for mentoring, as each work sheet requires approximately 15-20 minutes for it to be worked through.



**Learning to control your anger** by Lawrence Shapiro  
(Ref 45-1210 - Price £19.50)

**MLV SLV BL PR 1:1 GRP**

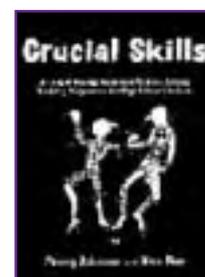
An entertaining book in which the Stop, Think and Go Bears teach a young boy a simple technique to control his anger. The book covers a variety of situations and is multi racial. The book is A4 sized and contains pictures and print that is approximately 24 point. It also contains exercises which have a print size of approximately 12 point and could be photo enlarged or brailled as required.



**Crucial skills** by Penny Johnson & Tina Rae (Ref 25-810 - Price £22.00)

**MLV SLV BL SEC GRP**

This programme is designed to help pupils who are experiencing difficulties in managing their behaviour, in a range of school situations, to self regulate their behaviour and feelings positively and to avoid conflict situations. It promotes the belief that pupils can make changes themselves and can achieve a positive outcome. It covers triggers to anger, modelling alternative responses, identifying effective strategies, solving conflicts and action plans. The worksheets are photo enlargable and brailable, with many requiring only minimum modification. The activities included involve a large amount of role play.



**Retracking** by Jenny Bates (Ref 38-1186 - Price £25.00)

**MLV SLV BL SEC GRP**

A resource pack aimed at children who have been experiencing difficulties at school, which may have led to, or be leading to exclusion. The pack aims to raise awareness of the factors that have led to the situation, increase understanding of emotions and behaviours, and to teach the skills needed to tackle the pupil's current difficulties. It includes topics such as friends, school, excuses, anger, problem solving, I am good at and listening. The resources are photo enlargable and brailable.



## **Bullying**

**Nah! Nah! Nah!** by Richard Biren (Ref 12-2306 - Price £13.95)

**MLV SLV BL PR 1:1 GRP**

An American activity book which can help pupils being teased to accept themselves. It teaches pupils how to recognise different kinds of teasing (friendly and humorous versus unfriendly and hurtful) and how to diffuse and deal with teasing situations. It contains activity sheets which are clearly laid out with a print size of approximately 16 point and they could be photo enlarged or brailled as required.



**How to handle a bully** by Susanna Palomares & Dianne Schilling  
(Ref 2-2370 - Price £19.50)

**MLV SLV BL PR SEC GRP**

Teaches pupils how to deal with bullying in a safe manner. It contains activities, stories and discussion topics which cover what bully behaviour is, speaking out against bullying and how to avoid a bully. It also covers positive self talk, creating positive affirmations and developing confident behaviour. The tasks and exercises could be photo enlarged or brailled.



**Stop the bully now** (Ref 70-514 - Price £30.95+VAT)

**MLV SLV BL PR GRP**

A very watchable video made exclusively for use in primary school classes. It is aimed to combat bullying at an early age, by defining exactly what bullying is and how to cope with it. It includes children describing their own encounters with bullies and what they did to deal with them. The video is very audio based and where words appear on the screen they are very large and clear - it would however need a small amount of audio description. The duration of the video is 13 minutes.

**Kick It - Bullying** (Ref 119-2342 - Price £22.50+VAT)

**MLV SLV BL PR SEC GRP**

A powerful modern anti-bullying video which gives simple messages for tackling bullying in peer groups. It sympathetically challenges current notions of what constitutes bullying, including racism, sexism and disabilities. The video would require some audio description. A worksheet which facilitates follow up work is included. The duration of the video is 5 minutes.



## Series

**Sometimes I like to fight...but I don't do it much anymore**

by Lawrence Shapiro (Ref 45-4401 - Price £17.50)

**MLV SLV BL PR 1:1 GRP**

An entertaining storybook designed to help children improve their social skills by increasing their self-esteem. It teaches the importance of good listening, good manners and cooperation.



**Sometimes I feel like...I don't have any friends (But not so much anymore)** by Tracy Zimmermann and Lawrence Shapiro

(Ref 45-4402 - Price £17.50)

**MLV SLV BL PR 1:1 GRP**



A short story which illustrates the importance of a listening adult who can provide guidance and support to help children to learn to control their anger.

The print in these American books is approximately 18 point and the text could be photo enlarged or brailled as required. The books could also be used under a CCTV. There are pictures in the books, which may need to be coloured in to aid vision.

## Good manners series

**MLV SLV BL EY PR 1:1 GRP**

**After you!** (Ref 97-2274 - Price £5.50)

**Hello!** (Ref 97-2275 - Price £5.50)

**I'm sorry!** (Ref 97-2276 - Price £5.50)

**No thank you!** (Ref 97-2277 - Price £5.50)

**Please!** (Ref 97-2278 - Price £5.50)

**Thank you!** (Ref 97-2279 - Price £5.50)

**Good manners series** (Ref 97-2280 - Price £30.00)

Each book contains three simple stories, which show children interacting with others and developing interpersonal skills. It encourages children to think about the effects of their manners and to learn respect for other people. The books could be photo enlarged, brailled or read aloud to a child.



## Good and bad series

**MLV SLV BL EY PR 1:1 GRP**

**Bully** (Ref 97-2281 - Price £5.50)

**Cheat** (Ref 97-2282 - Price £5.50)

**Liar** (Ref 97-2283 - Price £5.50)

**Moody** (Ref 97-2284 - Price £5.50)

**Selfish** (Ref 97-2285 - Price £5.50)

**Thief** (Ref 97-2286 - Price £5.50)

**Good and bad series** (Ref 97-2287 - Price £30.00)

Each book contains three stories showing different aspects of bad behaviour. They illustrate how a child should cope with their behaviour problems. These books could be photo enlarged, brailled or read aloud to a child.



## **Emotional impact series** - by Adolph Moser

**MLV SLV BL PR 1:1 GRP**

**Don't pop your cork on Mondays!** (Ref 55-1328

- Price £15.50) Anti-stress

**Don't feed the monster on tuesdays!** (Ref 55-1329

- Price £15.50) Self esteem

**Don't rant and rave on Wednesdays!** (Ref 55-1330

- Price £15.50) Anger control

**Don't despair on Thursdays!** (Ref 55-1331 - Price £15.50) Grief management

**Don't tell a whopper on Friday!** (Ref 55-1332 - Price £15.50) Truth control

**Don't fall apart on Saturdays!** (Ref 55-1333 - Price £15.50) Divorce survival

**Emotional impact series** (Ref 55-1334 - Price £86.00)

This excellent series is entertaining, fun and practical. It contains funny stories, which have clear and easy to understand narrative and which deal with important topics for children. These stories will really hold a child's attention. The font is approximately 16 point and is accompanied by clear and simple cartoons. This series could be photo enlarged, brailled or used with a CCTV.

**Just like every other...morning** (Ref 174-4474 - Price £44.95+VAT)

**MLV SLV BL PR 1:1 GRP**

The story contained on this CD-Rom focuses on bullying, isolation and fear. The CD-Rom allows children to read the book, re-write the story in their own words, answer questions about the book and themselves, and play word games relating to feelings and emotions. It contains audio text of the story, where children can re-click on sentences that they want to hear again. All buttons which require the pupil to click on them also have audio description on them. Print can be enlarged to approximately 20 point. The CD-Rom also has the facility to print off from sections where the child has written text, or answered questions. Blind children would be able to access the story, but may need some assistance to access the writing and games. Also available are the following titles:

**Just like every other...school bell** (Ref 174-4476 - Price £44.95) - Conflict at home and fear

**Just like every other...pupil** (Ref 174-4475 - Price £44.95) - Parental expectations, pressure and achievement

**Just like every other...mum** (Ref 174-4477 - Price £44.95) - Loss, stigma and responsibility

**Just like every other...class** (Ref 174-4478 - Price £44.95) - Disruptive behaviour, learning and expectations



## Listening skills

**Listen up game** (Ref 45-2431 - Price £20.25+VAT)

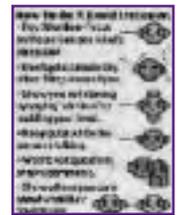
**MLV SLV BL PR 1:1 GRP BP**

A co-operative card game which teaches children the importance of listening carefully and respecting what other people say. This is an active listening game which motivates children to listen to others by answering questions and also responding to things that others have said. This game can be played in teams and is excellent for teaching blind children listening skills. The questions are contained on small (9cm x 6cm) cards, with print that is approximately 14 point, which could be easily photo enlarged or brailled as required.

**How to be a good listener poster** (Ref 41-1934 - Price £3.50+VAT)

**MLV PR GRP**

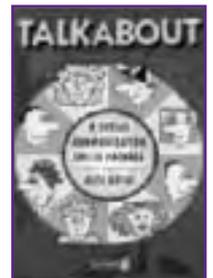
A large clear poster, with a yellow background, large clear text and simple pictures. Could be used for wall displays or for group/class activities.



**Talkabout** by Alex Kelly (Ref 77-1775 - Price £32.50)

**MLV SLV BL PR SEC 1:1 GRP**

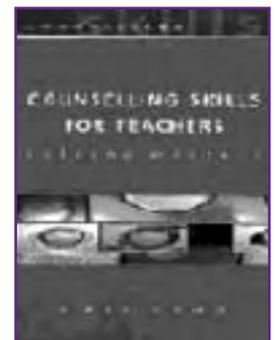
A practical manual which aims to raise self awareness, explore communication and develop better conversational skills. It contains worksheets that could be photo enlarged or brailled as required.



## For teachers

**Counselling skills for teachers** by Gail King  
(Ref 117-2425 - Price £16.25)

A practical book, for teachers working in mainstream secondary schools, which describes basic listening and responding skills and how to conduct a helpful interview. It also covers professional boundaries, role conflict, self-disclosure and culture awareness, teachers' legal responsibilities with respect to confidentiality and also the Children's Act.



To order your free catalogue of products, or to order any of the items shown in this review, please contact Incentive Plus by email at [orders@incentiveplus.co.uk](mailto:orders@incentiveplus.co.uk) or by telephone on 01908 526 120. For further information you can also visit their website at [www.incentiveplus.co.uk](http://www.incentiveplus.co.uk)



All items (except CD-Roms, posters and videos) are available for 7 day inspection. You will however be charged £2.50 to cover the postage of the goods to you, and you are also responsible for the postage charges if you choose to return the item(s).

# Counselling and mentoring support in the West Midlands

Counselling and mentoring support were felt to be key to the social and emotional well-being of children and young people with a visual impairment. Whilst the project was unable to directly fund specific developments or projects, it provided a vehicle for the sharing and dissemination of good practice within the visual impairment field. Two Visual Impairment services, a Visual Impairment secondary resource base and a Visual Impairment secondary special school have outlined their models of mentoring and counselling support to children and families.

## Birmingham counselling service for children with visual impairment and their families

In Birmingham, for a number of years, there has been increasingly effective collaboration between ophthalmologists, orthoptists, paediatricians, specialist Education Services for children with visual impairment, Birmingham Focus (formerly Birmingham Royal Institute for the Blind) and RNIB. Evidence for this includes much earlier referrals of newly diagnosed children with visual impairment from Health Services to the Visiting Teacher Service (Team for Visual Impairment) and a much improved flow of information between health and education, together with complementary services offered by health, education and voluntary agencies.

These partners, who work collaboratively to provide services, have together identified a serious gap in existing services for children with visual impairment and their families. They have found that at critical times in the lives of these children and their families, there is no specialist counselling support service to which GPs, ophthalmologists, specialist teachers of children with visual impairment, voluntary organisations, parents and children themselves could refer for emotional or mental health support. Professionals and parents have, therefore, taken the view that the personal, social and educational progress of children is being impeded because there is no service of this type. In many instances, it is not only the child, but also the whole family, who may find it particularly difficult to come to terms with the impact of visual impairment and its implications. In view of the identified major gap in service provision and the detrimental effect this was having on children and their families, a counselling service has been established for children with visual impairment and their families in Birmingham.

The service was commissioned in April 2001. It is funded by the Birmingham Children's Fund until March 2005. The Specialist Support Service manage the Counselling Service. At present, the counselling team comprises three part-time, fully-qualified counsellors, one of whom is also a qualified teacher of visual impairment. Two of the counsellors have only been very recently appointed and will each be working one day per week.

The main aim of the service is to address the social and emotional needs of children with visual impairment and their families, to enable them to experience improved well-being in all aspect of their lives.

### **Counsellors offer the following:**

- one-to-one counselling for children aged between 5-13 and/or their families
- individual counselling supervision to staff, with responsibility for children with visual impairment in Resource Bases and specialist support staff, who support children with visual impairment in mainstream schools
- in-service training to groups of professionals who support children with visual impairment
- group work with children at transition stage - primary to secondary transfer
- a service that is sensitive to the cultural diversity of children and families in Birmingham
- evidence of the benefits from a counselling support service for children with visual impairment and their families in Birmingham.

### **Client group:**

The clients are children with visual impairment between the ages of 5 to 13 and their families. Since 2001, 15 children and their families have used the service and all evaluations at the end of counselling have been extremely positive. Currently, there are 16 children on caseload and 3 on the waiting list.

### **Reasons for referral:**

- not accepting visual impairment
- parents blaming themselves for child's visual impairment
- combination of visual impairment and other difficulties resulting in isolation at school
- depression in child and family
- threat of suicide
- difficulty coming to terms with severe degenerative eye condition
- school non-attendance
- uncontrollable behaviour at home
- suspension/exclusion from school
- severe panic attacks at school
- aggressive behaviour
- being bullied
- terminal illness.

## Case study

<b>Client:</b>	<b>Sally</b>
Referrer:	SENCO of School
Presenting difficulty:	Sally, aged 13, is registered blind. She has a degenerative eye disease so the small amount of residual vision she has enjoyed is getting worse. She appears to be depressed, which is manifested by increased crying in school and withdrawal at home. She experiences loss of confidence both at home and school and consequently, she has an increased sense of isolation in her environment. She complains about bullying at school and seems friendless at home. Very low self-esteem is contributing to Sally's withdrawal both in home and school situations.
Identified risk:	Sally would become even more depressed, withdrawn and unable to cope. She would become increasingly more alienated from her environment and would be unable to take part in both school and home activities.
Method of engagement Agreed care plan:	Sally to have one to one private counselling sessions on a weekly/fortnightly basis. This would give her the opportunity to talk to a trained counsellor in confidence about her fears and anxieties.  Parents and school staff to be invited to review progress at end of term to ensure that strategies were put in place to facilitate work done in private sessions.

### Description of the initial contact and the agreed work

The method of intervention was one-to-one counselling. My first session with Sally took place after consultation with her parents and the Head of the Resource Base at the school. Sally was consulted by both and agreed to counselling with me. A private room was found where we could talk without interruption.

In the first session, I gave a definition of counselling and explained the way it would take place - times, place, confidentiality issues etc. I then invited Sally to tell me about herself and her problems. Sally gradually began to explain her problems and we looked at ways in which she could tackle the presenting problem ie bullying. She began to understand that she had always acted as a sighted person and now was the time to be honest with her peers and tell them how her blindness was affecting her. This was just touched on in the first session, but has become the basis for our subsequent meetings.

## **Issues encountered in working with the family**

Sally's mother and sister have the same eye condition and have very little vision. Both are registered blind. Her father, who is fully sighted, is finding it difficult to deal with blindness in his family. He is also very resistant to counselling and has only attended one review. Given this situation, long term work with Sally is on going to give her a real sense of identity and to build up her self-esteem to combat any lack of support.

## **Outcomes**

Sally does not cry in school any more and has learned strategies to deal with offensive comments from her peers, which have since significantly reduced. She is beginning to consolidate friendships with both sighted and blind students. She is becoming far more open with them and expressing her difficulties and accepting their concern.

She is much more positive about her future and has indicated a preference to continue her education at 16 at a college for blind students. She is going out more. She has joined a gym and works out with a friend 2 or 3 times after school. Previously, she would not even walk 50 metres to her local shop.

She is beginning to cope with the onset of blindness by using her white cane, but is still reluctant to use and develop her braille skills. As counselling progresses, and her self-esteem builds, her sense of identity and pride in who she is will make her far more able to cope in every environment she experiences.

## **Future of the service**

As the project developed it was agreed by the steering group that it was important to embed counselling skills across the wider specialist support service for children and young people with a visual impairment, particularly since the project currently only has funding until April 2005. A group of teachers, Teaching Assistants, a learning mentor and an RNIB Early Years Officer are now all undertaking first and second level training courses in counselling and meeting to discuss the implications for their support of children with visual impairment and their families.

### **Marilyn Webb**

**Counsellor for Children with Visual Impairment  
Birmingham Specialist Support Service**

## "Someone on side" - mentoring support at a visual impairment resourced mainstream secondary school

Mentoring schemes can give children an opportunity to explore social and emotional issues within a secure and trusting relationship with a learning mentor. At one mainstream school in Birmingham mentoring support is seen as a way to help students with visual impairments develop confidence and self-esteem. Lisa Evans discusses:

Bournville School is a mainstream comprehensive in South Birmingham; it has over 1,000 students on roll, from a diverse range of ethnic and economic backgrounds. A number of students with a visual impairment attend Bournville and are supported by the Visually Impaired Resource Base. The VIRB enables students to access the curriculum through enlarged materials, specialist classroom support and equipment. It has provided this valuable service for over twenty years.

In recent years there has been a need to provide both social and emotional assistance alongside visual support for the students with visual impairments. The chosen strategy was to employ a Learning Mentor to tackle the issues that related to the students' social and personal development. A mentoring scheme had been successfully established within the school to assist mainstream students to overcome their difficulties and it was felt that the students with visual impairments would benefit from a similar intervention. This led to my appointment in January 2002. I had previously worked as a Mentor in a neighbouring secondary school and had background experience of working with people with visual impairments.

### **What is mentoring?**

A mentor offers advice and support, helping students to overcome difficulties that may interfere with their learning. Through consultation staff identified two major barriers preventing students with visual impairments from reaching their academic potential:

- difficulties in developing relationships with other students
- low self-esteem.

The role of the mentor in the base was to assist the students with visual impairments in developing much needed social skills to develop relationships, positive self-esteem and increased feelings of acceptance within the school. The support would be available to all students with visual impairments on a voluntary basis. I also developed close links with Marilyn Webb, a counsellor of visually impaired children, who provided supervisory support on general issues that affected the mentoring process.

### **Our approach**

The first stage was to raise awareness of the role within the school. This was publicised through staff meetings, notice boards and the school's Intranet/Internet web pages. Information leaflets were sent home to parents/carers with a letter to state that the mentor would begin working with their child, unless they objected. Parents were also invited to

come into school and discuss their child in person. Mentoring sessions would take place during lessons due to after school transport commitments. All sessions were negotiated with the teacher and lesson work was completed prior to mentoring or in the student's own time. Student extraction from lessons was rotated to avoid any one subject being affected.

## **Developing relationships**

The most important phase is for a mentor to develop a relationship based on mutual trust with the student. I held a semi-structured consultation with the students to help gain background information from the student's viewpoint. Similarly, self-assessment scales were carried out with the students to establish a baseline regarding their current levels of well-being. This could help the student understand where possible sources of tension may lie. The issue of confidentiality was also addressed, namely that most things would be kept private unless they constituted a child protection issue.

In mentoring I attempted to use a non-directive approach, picking up and reflecting back feelings either mentioned or observed (through non-verbal expression and gestures) to reinforce the relationship and provide useful feedback to the student. One of the main principles was to convey to the student an understanding of the world as they experienced it.

Students were encouraged to set targets in areas they identified for self-improvement. The student then broke down the targets into realistic and manageable steps. This meant that the student could chart their progress towards their goals.

Feedback from assessment scales also provided a means of allowing students to monitor changes in their emotions.

## **Case study - John (name has been changed)**

John, who has albinism, is in Year 9. He was referred for mentoring because of behavioural problems in lessons. He would often shout out, talk when the teacher spoke, leave his seat, answer rhetorical questions, undermine the teacher, and argue when challenged.

John and I would meet once a week. Initially in sessions he was sullen, refused to answer questions, and was easily distracted. Over time he became more responsive, talking and showing signs of interest in mentoring.

John agreed to be observed in a number of lessons and a baseline of target behaviours were recorded. He was made aware of the frequency that he engaged in specific behaviours. Over the forthcoming weeks, he examined when his behaviour had led to an intervention involving senior staff.

John was encouraged to analyse his behaviour patterns, noticing that he became disruptive when bored or when he felt self-conscious. He felt that his appearance and visual needs made him stand out as being different from other children. He had observed that students were often accepted by classmates if they behaved negatively. He mirrored this behaviour to gain status in his peer group.

Eventually, he began to realise he was often making more problems for himself and he had a choice as to whether to let these feelings control him.

Over a period of a year, John began to control his behaviour and reduced the number of times he was excluded on a fixed term basis from 10 occasions in Year 9 to 2 incidents in Year 10. Recently, John has become focused on his work and has expressed a desire to become a teacher.

This case study reveals the impact that problems of low self-esteem had on one child. Obviously all children are different and not all children with visual impairments will have behavioural difficulties like John. But the case reflects the importance of addressing social and emotional issues which might arise from a visual impairment and which, if left unchecked, might lead on to problems with self-perception, confidence and successfully interacting with others.

## **Feedback**

A questionnaire allows students and parents/carers to evaluate and comment on the help given by the learning mentor. Recent feedback has been positive with parents recognising the value of having "someone on side". One parent felt that the benefit of a learning mentor for her daughter was, "to help her with the daily struggle of coping with confidence and talking through situations that she finds difficult or frustrating." For the students the best thing about having a learning mentor seems to be "having someone to talk to", someone "nice and trustable" and with whom they can "work things out".

## **Conclusions**

Overall improvements have been made in students' attendance figures and feelings of confidence at school. A number of schemes have been undertaken, such as social inclusion initiatives in partnership with other schools and organisations. Projects have included theatre trips with touch tours or workshops, social trips with staff and students, induction schemes for Year 6 and 7 students. A number of schemes have also been undertaken with the regional branch of RNIB, such as a video project aiming to access views of students on a wide range of issues. All these social initiatives address the fundamental issue of developing greater self-awareness, self-esteem, and confidence.

My mentoring role has given me great enjoyment. I have watched children grow in confidence and learn to express themselves fully. I consider myself privileged to be able to see sides of children that have not previously emerged and to be able to build on strengths rather than weaknesses.

**Lisa Evans**  
**Learning Mentor**  
**Bournville School, Birmingham**

# RNIB New College Worcester - Supporting young people's social and emotional needs

## RNIB New College Worcester

- RNIB New College Worcester is a residential school for blind and partially sighted children and young people, aged 11-19

### **Pastoral care - a whole school approach**

We aim to be a listening and responsive school: we want students to feel safe and supported, informed and empowered. We recognise the central importance of the students' personal, emotional and social development. This is achieved through:

- ethos and culture based on value, respect and participation
- availability of "listening" opportunities - through other students, GAP students, school staff and/or through counsellors or other agencies working in the school
- policies, procedures and training - monitored and reviewed
- curriculum that promotes personal, emotional and social development - importance of PSE
- identifying students "causing concern" and having strategies for the early assessment of need and intervention
- developing the "extended school" through work with external agencies - support to students, parents and families, including student counselling and family support.

### **Organisation of pastoral support: in school**

- form tutors and associate form tutors
- pastoral team leaders
- vice principal
- sixth form students: form affiliate and prep duty
- nurse.

## **Organisation of pastoral support: in houses**

- 4 junior houses - each with senior houseparent, deputy houseparent, assistant houseparent
- sixth form hostel and sixth form house - residential care workers
- head of care and deputy head of care
- GAP students.

## **Student representation**

- school council
- tutor group meetings
- house meetings
- annual reviews.

## **People to listen**

- form tutors, pastoral team leaders, vice principal, houseparents, other staff
- nurse
- counsellors - two working in evenings and medical social worker from Moorfields hospital (confidentiality)
- external agencies, for example LEA representatives, educational psychologists.

## **Continuing professional development for staff**

- Visual Impairment qualifications for teaching and care staff
- whole staff training - for example:
  - child protection
  - epilepsy
  - Aspergers Syndrome
  - supporting children suffering loss
  - listening skills, counselling, bereavement training.

## **Curriculum to promote personal, social and emotional development**

### **Self-esteem critically important:**

A sense of positive self-esteem is almost universally viewed by those who have studied human development as the foundation of health in general, and mental, emotional and social health in particular. A lack of self-esteem has been shown to lead to problems with other key personal capacities and competencies, such as unassertiveness, self-criticism and a sense of powerlessness, and thus results in stress and psychological problems

("Promoting Mental, Emotional and Social Health: A Whole School Approach" - Katherine Weare; 2000)

### **Curriculum to promote personal, social and emotional development**

- PSE in form groups and lessons
- independent living skills (in school and in houses/hostel)
- mobility
- instrumental and singing lessons
- extra-curricular activities - physical education, outdoor pursuits, leisure activities
- short courses for small groups, eg making and maintaining friendships.

### **Students causing concern**

- year group reviews
- house/school liaison
- annual reviews
- meetings of key staff and, if appropriate, parents and/or student
- nurse/school doctor
- referral to specialist agencies.

### **Communication with parents**

- reports
- annual review meetings and parents' consultation
- information letters and packs
- regional parents' meetings
- questionnaire to parents
- family liaison
- regular two-way communication - including merit marks, achievement sheets.

**Mardy Smith**

**Acting Principal**

**RNIB New College, Worcester**

# Talk Time - Counselling support in Staffordshire visual impairment service

I was eager to see what Lucy, my very first young client, had written on her section of the review form after six counselling sessions. I knew she wouldn't hold back!: "Talk Time Rox Da Sox!" took some deciphering on my part. As I grasped - and marvelled at - the positive nature of her response, I laughed out loud. And then I cried. And perhaps that encapsulates something of the roller-coaster of a ride the setting up of Talk Time, a counselling service for youngsters with visual impairment in Staffordshire, has felt like.

Employed within the LEA's Specialist Support Service as a support tutor, my work takes me into schools and colleges throughout the county where pupils and students with impaired vision are enjoying the benefits of inclusion into mainstream communities. Successful inclusion, however, is dependent on a regular and rigorous examination of where resources can best be employed and the potentially far-reaching implications of sight loss. Spurred on by involvement in the RNIB West Midlands Social Inclusion Project, such examination led Staffordshire to a decision to expand its specialist service by introducing a counselling strand. In September last year, very quietly and very tentatively, Talk Time was born as the brainchild of Jo Morgan, Head of the VI Service.

As with any birth, much activity preceded this. With no qualified counsellor on the team, it was imperative that someone trained - and fast! Whilst I was quick to volunteer - having long held an interest in such matters - the idea of returning to formal study and written assignments at 54 was daunting. It's hard to believe that I'm now beginning my third and final year of a post-graduate diploma course at Keele University - and I wouldn't have missed it for the world.

Then there were policies and procedures to put in place. Where to begin? What were others doing? The willingness of colleagues in other authorities to share good practice was invaluable and I am indebted to Marilyn Webb, Lisa Evans and Veronica Myko for their help and advice. How to invite and receive referrals? When and how to make initial contact with school, pupil and parents? Assessment arrangements, reviews - all seemed potential minefields! Consultation with the British Association for Counselling and Psychotherapy, university tutors, and my own external supervisor lent confidence to our deliberations and, gradually, policies were written - and rewritten! In some ways it feels like we are making it up as we go along... and maybe we are! Changes are made in the light of experience, initial thinking reshaped - and sometimes ditched - but gradually a workable practice is emerging...

In this first year of offering the service, I have worked individually with just three pupils. This softly softly approach is deliberate. If we are to offer a meaningful response to young people who may be feeling at their most vulnerable, we must be informed, equipped and unhurried. We cannot be driven by targets and outcomes and we cannot rush those first tentative and often unsteady steps.

Working as a guest within mainstream schools where pupils with impaired vision are located brings a variety of considerations and tensions. I recognise that, as a guest, I need to fit into the community and arrange visits at mutually convenient times. Few schools at present have a dedicated counselling room and I have to negotiate for a space which is available and reasonably appropriate! I have learned to take a "bag of ambience" with me wherever I go, containing, for example, music, candles, cushions, coloured throw, cuddly toy... Anything, in fact, which I can carry and which might help to create an atmosphere which is different from a classroom and foster a sense of acceptance and safety. Individual work often involves encouraging pupils to tell their story through the creative use of symbols and metaphors. Words alone, especially with younger children limits communication and the use of paints, crayons and playdoh, for instance, can be useful tools in helping the child tell their story.

Sometimes unlikely objects can be the most helpful. Some time ago I spotted a chunky, brightly-coloured moneybox in the shape of a cheeky-looking little girl with pigtails and rope legs which dangled over the edge of a shelf. She became "Tracey Troubles" to one young client who, each week, drew pictures of her own "troubles" and posted them into the moneybox so that Tracey could worry about them instead of her! I have also often found buttons useful to offer clients to identify and work on relationships with significant persons in their lives. This is not always practical or possible to use with a visually impaired pupil and so the idea has been adapted to the use of a variety of fridge magnets on a white board. The young client is invited to select one which represents him/herself and then others for parents, siblings, friends, teachers etc and place them all on the white board. This can be very useful in facilitating talk about significant relationships.

## **Support projects**

Individual work with pupils inevitably has its limitations. Another aspect of Talk Time, which again initially came out of the Social Inclusion Project, is our work with schools on peer support projects, reinforcing the work done with individual young people. We have been delighted to introduce and implement such projects in two Staffordshire schools where visually impaired pupils attend and are currently beginning work on a third. This involves training primary school pupils in basic listening skills and equipping them to support other children who may be feeling lonely or upset at playtimes. A brightly-coloured bench where children can go and be sure of a listening ear and two trained pupils on duty each playtime, overseen by supportive staff, can alter the mood of a playground, making it a friendlier place to be. The training offers opportunities for children to consider their own vulnerabilities and to imagine how others might be feeling - like the child new to the school, the child with a physical disability, the child with a sensory impairment....

## **But back to Lucy...**

I mentioned Lucy before. She burst into an early session flushed and obviously angry. "What colour's angry?" I asked her. "Red" came the immediate reply. Taking advantage of the large whiteboard on the wall I invited her to "draw some anger". Without hesitation she picked up the red marker and filled the board with angry pictures and captions. She worked

fast and - literally - furiously! And then she was spent. She slumped on to a cushion. "Anything good happening in your life at the moment?" I whispered. "Oh yeah" she replied. "What colour?" "Green." (Again, no hesitation). "Draw some?" "OK." She reached for the green marker and began gently and very calmly to fill in the spaces between all the angry pictures with detailed drawings of flowers, trees, people, pets, etc. I hadn't planned for the session to go that way. It just happened. But Lucy had told me a lot, and looked calm and relaxed as she left with a casual "See ya next week" thrown over her shoulder.

Another time Lucy announced she was going to be an airline pilot. Over the months that followed she began to explore in sessions some of the implications of her eye condition, although this never appeared to daunt her in her choice of career. When the time came for her to choose her options for GCSE, however, she nonchalantly announced a change of plan - "I couldn't be a pilot, anyway, because of my eyes." Something had changed; she was facing her giants.

Over the months of seeing Lucy weekly I began to see more change. Her SENCO commented on it too. She was less angry, she smiled more, she talked about her feelings articulately and, I believe, honestly. As an ending activity, Lucy created a design for the front and back of a T-shirt, showing on the front how she felt others perceived her and, on the back, how she perceived herself. The result was amazing, both for its beauty and its demonstration of Lucy's level of self-awareness. And it seemed full of hope.

On Lucy's final review sheet, she wrote the following under the given headings:

**Can you say in a few sentences what you think of Talk Time and how it has helped you?**

**It's been brilliant! It's helped me control my anger and helped me love myself for who I am not what I want to be.**

**Would you feel able to ask for some more sessions if you felt you needed them?**

**Yes - and I will 'coz I like 'em!**

**Would you recommend the service to other visually impaired pupils?**

**No. I want them all to myself - just jokin, course I would.**

**Could you offer any other comments or suggestions to improve the Talk Time service?**

**Buy beanbags for the staff and clients!**

We're not there yet - and maybe it will always feel like a roller-coaster ride but, as the service here in Staffordshire tentatively develops, I am sensing that something is beginning to happen and further opportunities are being created for children and young people's voices to be heard.

**Chris Thomas  
Staffordshire Specialist Support Service**

# ● Appendix 1

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## Visually impaired children's social and emotional development - Questionnaire

In this questionnaire we make a distinction between three levels of support of visually impaired children's social and emotional development:

- 1. Curriculum and school level support.** This includes areas of the curriculum which might be relevant (particularly Personal, Social and Health Education, and Citizenship). It will also include pastoral care (which may be provided by non-VI specialist staff in mainstream schools).
- 2. Visual impairment specialist level support.** This includes the types of monitoring and intervention provided by professionals with a specialism in visual impairment, eg QTVI and Teaching Assistants.
- 3. Mental health specialist level support.** This includes some of the more "formal" mechanisms explored in the first questionnaire and might include the use of psychologists or the child and adolescent mental health services (CAMHS).

We are interested in the relationship between these levels of work (if you work in a special school, levels 1 and 2 may overlap considerably). Below are a series of questions which ask for information about current and potential practice. Many of the questions present options - **please circle the most appropriate answer**. However, many of the questions are necessarily open-ended - we know these can be difficult and time consuming to answer, and appreciate all the information you can give us.

### Curriculum and school development

- 1 Is your service/school familiar with the **Citizenship** curriculum? **Yes** **No**

Please add comments:

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2 Do you think that the **Citizenship** curriculum gives opportunities to support the social and emotional development of children in relation to living with a visual impairment? **Yes No Unsure**

If **Yes**, tell us what you think they are and any experience you have had:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If **No** or **Unsure**, tell us about your reservations:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3 Is your service/school familiar with the **Personal, Social and Health Education (PSHE)** curriculum? **Yes No**

Please add comments:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4 Do you think that the **PSHE** curriculum gives opportunities to support the social and emotional development of children in relation to living with a visual impairment? **Yes No Unsure**

If **Yes**, tell us what you think they are and any experience you have had:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If **No** or **Unsure**, tell us about your reservations:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5 **Do any of your VI pupils have access to a school based mentor?** **Yes No**

If Yes, tell us about it:  
How many pupils?  
\_\_\_\_\_  
What type of schools?  
\_\_\_\_\_  
What experience/expertise has the mentor in VI specific issues?  
\_\_\_\_\_  
Anything else you think relevant?  
\_\_\_\_\_  
\_\_\_\_\_

- |           |                                                                        |            |           |               |
|-----------|------------------------------------------------------------------------|------------|-----------|---------------|
| <b>6a</b> | Do any of your VI pupils participate in lunchtime clubs?               | <b>Yes</b> | <b>No</b> | <b>Unsure</b> |
| <b>6b</b> | Do any of your VI pupils participate in after school clubs/activities? | <b>Yes</b> | <b>No</b> | <b>Unsure</b> |
| <b>6c</b> | Do you think more would participate if transport were provided?        | <b>Yes</b> | <b>No</b> | <b>Unsure</b> |

Please add any comments you have:

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## Visual impairment specialist and mental health specialist levels of support

- |          |                                                                                                                                             |            |           |
|----------|---------------------------------------------------------------------------------------------------------------------------------------------|------------|-----------|
| <b>7</b> | Do any members of staff in your service or school (or specifically assigned to a visually impaired child) have any training in counselling? | <b>Yes</b> | <b>No</b> |
|----------|---------------------------------------------------------------------------------------------------------------------------------------------|------------|-----------|

If Yes, tell us about them:

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- |          |                                                                                                                                          |            |           |               |
|----------|------------------------------------------------------------------------------------------------------------------------------------------|------------|-----------|---------------|
| <b>8</b> | Do any members of staff without any significant training in counselling have sufficient skills to support the emotional needs of pupils? | <b>Yes</b> | <b>No</b> | <b>Partly</b> |
|----------|------------------------------------------------------------------------------------------------------------------------------------------|------------|-----------|---------------|

If you can, please explain your answer:

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- |           |                                                                   |            |           |               |
|-----------|-------------------------------------------------------------------|------------|-----------|---------------|
| <b>8b</b> | Do you think there are training needs amongst staff in this area? | <b>Yes</b> | <b>No</b> | <b>Unsure</b> |
|-----------|-------------------------------------------------------------------|------------|-----------|---------------|

If you can, please explain your answer:

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**9a** Do you feel that your staff generally know when to refer on to specialists in mental health support? **All staff** **Most** **Some** **None** **Unsure**

If you can, please explain your answer:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**9b** Do you have criteria that indicate a referral to a mental health specialist is warranted? **Yes** **No**

If Yes, could you list them:  
\_\_\_\_\_  
• \_\_\_\_\_  
• \_\_\_\_\_  
• \_\_\_\_\_

**9c** Do you think there are training needs amongst visual impairment specialist staff in this area? ie in knowing when to refer on. **Yes** **No** **Unsure**

If you can, please explain your answer:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**10a** To your knowledge, how many children and young people in your school/service have been referred to mental health specialists in the last 12 months?

\_\_\_\_\_

**10b** Of the above referrals, who were the key people initiating the process? (eg QTVI and parent)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**10c** Do you think there are training needs in visual impairment issues amongst mental health specialist staff in this area? **Yes** **No** **Unsure**

If you can, please explain your answer:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**11** We would like you to tell us about examples where you have been active in identifying and meeting the social and emotional needs of visually impaired children (and their families). Below are a list of activities, please indicate those you have used by circling the relevant options.

<b>a</b>	Developing friendships	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>Partly</b>	<b>No</b>
<b>b</b>	Improving social interaction skills	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>Partly</b>	<b>No</b>
<b>c</b>	Helping with transition	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>Partly</b>	<b>No</b>
<b>d</b>	Assertiveness/confidence training	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>Partly</b>	<b>No</b>
<b>e</b>	Circle time	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>Partly</b>	<b>No</b>
<b>f</b>	Circle of friends	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>Partly</b>	<b>No</b>
<b>g</b>	Participation in buddy schemes	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>Partly</b>	<b>No</b>
<b>h</b>	Participation in peer support schemes	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>Partly</b>	<b>No</b>
<b>i</b>	Anti-bullying strategies	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>Partly</b>	<b>No</b>
<b>j</b>	Awareness raising amongst peers/staff	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>Partly</b>	<b>No</b>
<b>k</b>	Setting up parents groups/meetings	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>Partly</b>	<b>No</b>
<b>l</b>	Supporting parents one-to-one	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>Partly</b>	<b>No</b>
<b>m</b>	Sibling involvement in activities	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>Partly</b>	<b>No</b>
<b>n</b>	Facilitating support between particular parents	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>Partly</b>	<b>No</b>

Are there things we have missed?

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**12** How often has your school/service provided awareness raising sessions to **sighted peers**? **More than once** **Once** **Never** **N/A**

Additional comments:

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**12b** How often has your school/service provided awareness raising for **mainstream staff**? **More than once** **Once** **Never** **N/A**

Additional comments:

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**12c** Has your school/service provided structured social skills training to VI pupils? **More than once** **Once** **Never** **N/A**

Additional comments (eg is the training routine or only if there are problems, etc.):

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**13** In your school/service, are some pupils given either 1:1 or small group support sessions to specifically address social/emotional issues? **Yes** **No**

Please give examples/details:

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If possible, could you send us copies of this documentation? We will treat this confidentially. **Yes** **No**

**14** Does the school/service have any policy documents in the area of social and emotional development (this might be a specific policy document, or embedded in other documents)? **Yes** **No**

If Yes, tell us about these documents:

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**15** Do you think there is a need for a counsellor with specialist knowledge of visual impairment to support children and families through VI schools and services?

**Yes No**

If Yes, you might want to elaborate:

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**16** Do you think there are opportunities to collaborate across the region in this area of social and emotional support?

**Yes No**

If Yes, give us some examples of how:

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**17** We may wish to contact you for further information - would you agree to this?

**Yes No**

Name:

---

Address:

---

---

Email:

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Phone:

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# ● Appendix 2

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## Preparing for secondary transfer for pupils with visual impairment

### Programme

- 10.00 Arrival, refreshments, practical information
- 10.15 Icebreakers including "Hello Bingo"
- 10.45 Expectations for the day
- 11.00 Small group discussion - How is secondary school different and what concerns you?
- 11.30 Finding solutions to your concerns and role plays.
- 12.20 Tips for building your confidence
- 12.30 Lunch and chat
- 1.15 Secondary pupils share their experiences
- 1.45 Questions
- 2.00 What have you learnt from the day?
- 2.30 Return to school

# ● Appendix 3

## Hello Bingo

Hello Bingo			
is a good swimmer	was born in another country	can say 'hello' in another language	can play a musical instrument
likes to read	likes pizza	is a good artist	wears glasses
likes to do science experiments	knows a poem off by heart	is left handed	put your name here
was born in the same month as you	likes school	has a grandparent living with them	is a good listener
likes the same sport as you do	can ride a bike	helped someone today	likes to do maths

# ● Appendix 4

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## Visiting teacher service for children with visual impairment

### Year 6 Transition Day

1. What did you enjoy most about the day?

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2. What did you enjoy least about the day?

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3. What was most helpful?

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4. What was least helpful?

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5. Is there anything else you would like to say?

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6. Would you like to come back in October and tell us what transferring to secondary school has been like for you?

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7. If we do this again - what else do you think would be helpful for Year 6 pupils?

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# ● Appendix 5

## Priestley Smith School Y6 Social Skills project

This questionnaire was provided by Birmingham Educational Psychology department

### Teacher's views about pupil's social response patterns and competencies in school

Name of pupil: \_\_\_\_\_ DoB: \_\_\_\_\_ Age: \_\_\_\_\_

Name of teacher: \_\_\_\_\_ Date first completed: \_\_\_\_\_

Social response patterns and competencies.

Teacher evaluation on a scale of 10. 1 = rarely seen 5 = sometimes 10 = always

<b>1 Shows confident responses in what s/he does in class and school</b>	
Where is s/he now?	<b>1 2 3 4 5 6 7 8 9 10</b>
Where would you like pupil to be?	<b>1 2 3 4 5 6 7 8 9 10</b>
What improvements/changes do you want to work on and to see?	

<b>2 Shows pleasure in his/her works/achievements in class and school</b>	
Where is s/he now?	<b>1 2 3 4 5 6 7 8 9 10</b>
Where would you like pupil to be?	<b>1 2 3 4 5 6 7 8 9 10</b>
What improvements/changes do you want to work on and to see?	

<b>3 Shows responses of feeling good about self in class and in school</b>	
Where is s/he now?	<b>1 2 3 4 5 6 7 8 9 10</b>
Where would you like pupil to be?	<b>1 2 3 4 5 6 7 8 9 10</b>
What improvements/changes do you want to work on and to see?	

<b>4 Shows positive interactions and responses with other children in class</b>	
Where is s/he now?	<b>1 2 3 4 5 6 7 8 9 10</b>
Where would you like pupil to be?	<b>1 2 3 4 5 6 7 8 9 10</b>
What improvements/changes do you want to work on and to see?	

<b>5 Shows positive interactions and responses with teachers and other adults</b>	
Where is s/he now?	<b>1 2 3 4 5 6 7 8 9 10</b>
Where would you like pupil to be?	<b>1 2 3 4 5 6 7 8 9 10</b>
What improvements/changes do you want to work on and to see?	

<b>6 Shows thoughtfulness and respect for other children</b>	
Where is s/he now?	<b>1 2 3 4 5 6 7 8 9 10</b>
Where would you like pupil to be?	<b>1 2 3 4 5 6 7 8 9 10</b>
What improvements/changes do you want to work on and to see?	

<b>7 Shows verbal and facial responses when others interact with him/her</b>	
Where is s/he now?	<b>1 2 3 4 5 6 7 8 9 10</b>
Where would you like pupil to be?	<b>1 2 3 4 5 6 7 8 9 10</b>
What improvements/changes do you want to work on and to see?	

<b>8 Shows good verbal social initiative and communications with others</b>	
Where is s/he now?	<b>1 2 3 4 5 6 7 8 9 10</b>
Where would you like pupil to be?	<b>1 2 3 4 5 6 7 8 9 10</b>
What improvements/changes do you want to work on and to see?	

<b>9 Can wait and takes turns working in group(s) with other children</b>	
Where is s/he now?	<b>1 2 3 4 5 6 7 8 9 10</b>
Where would you like pupil to be?	<b>1 2 3 4 5 6 7 8 9 10</b>
What improvements/changes do you want to work on and to see?	

<b>10 Can listen to other child(ren) talking without interrupting in class</b>	
Where is s/he now?	<b>1 2 3 4 5 6 7 8 9 10</b>
Where would you like pupil to be?	<b>1 2 3 4 5 6 7 8 9 10</b>
What improvements/changes do you want to work on and to see?	

<b>11 Shows self-control over own reactions and frustrations most of time</b>	
Where is s/he now?	<b>1 2 3 4 5 6 7 8 9 10</b>
Where would you like pupil to be?	<b>1 2 3 4 5 6 7 8 9 10</b>
What improvements/changes do you want to work on and to see?	

<b>12 Can share materials and equipment with others in class and school</b>	
Where is s/he now?	<b>1 2 3 4 5 6 7 8 9 10</b>
Where would you like pupil to be?	<b>1 2 3 4 5 6 7 8 9 10</b>
What improvements/changes do you want to work on and to see?	

<b>13 Accepts and responds to most class rules and group agreements</b>	
Where is s/he now?	<b>1 2 3 4 5 6 7 8 9 10</b>
Where would you like pupil to be?	<b>1 2 3 4 5 6 7 8 9 10</b>
What improvements/changes do you want to work on and to see?	

<b>14 Other children in class want to work, play, be friends with him/her</b>	
Where is s/he now?	<b>1 2 3 4 5 6 7 8 9 10</b>
Where would you like pupil to be?	<b>1 2 3 4 5 6 7 8 9 10</b>
What improvements/changes do you want to work on and to see?	

<b>15 Can get on well most of the time with other children in class</b>	
Where is s/he now?	<b>1 2 3 4 5 6 7 8 9 10</b>
Where would you like pupil to be?	<b>1 2 3 4 5 6 7 8 9 10</b>
What improvements/changes do you want to work on and to see?	

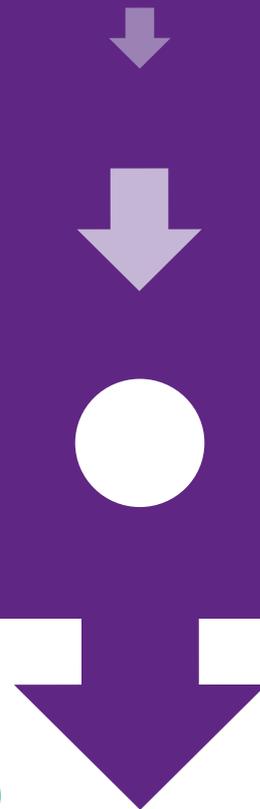
<b>16 Has a particular friend/buddy in this class (or in another class)</b>	
Where is s/he now?	<b>1 2 3 4 5 6 7 8 9 10</b>
Where would you like pupil to be?	<b>1 2 3 4 5 6 7 8 9 10</b>
What improvements/changes do you want to work on and to see?	

<b>17 Will independently offer to help other children (or when asked)</b>	
Where is s/he now?	<b>1 2 3 4 5 6 7 8 9 10</b>
Where would you like pupil to be?	<b>1 2 3 4 5 6 7 8 9 10</b>
What improvements/changes do you want to work on and to see?	

<b>18 Responds positively to praise/rewards/celebrations of own efforts and successes</b>	
Where is s/he now?	<b>1 2 3 4 5 6 7 8 9 10</b>
Where would you like pupil to be?	<b>1 2 3 4 5 6 7 8 9 10</b>
What improvements/changes do you want to work on and to see?	

The RNIB West Midlands Social Inclusion project set out to identify the critical stages and key issues in the social and emotional development of children and young people with visual impairment, with particular reference to self-esteem.

The project was ambitious in its aims and included a number of practical initiatives including the making of a video by young people, transition days for children moving on to secondary school and a Bright Futures day for young people. Our experiences and findings are presented here as a contribution to the continuing development of inclusive practice in the education of children and young people with a visual impairment.



Published by  
RNIB  
105 Judd Street  
London  
WC1H 9NE

[www.rnib.org.uk](http://www.rnib.org.uk)

[www.education.bham.ac.uk](http://www.education.bham.ac.uk)

