



Catalan Association for Deafblind People (APSOCECAT)

EQUAL OPPORTUNITIES FOR 20 DEAFBLIND PERSONS

"When you let go of my hand, it is as if we were miles away from each other"

Fini Straubinger

No words can express better the problem of the lack of communication of the deafblind people. They also express the priceless value of the intervener's task in deafblindness, link of communication between the deafblind person and the world.



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Project Summary

It is hard to imagine what means neither to see nor to hear, if we consider that from the moment we were born, 95% of what we learned was through the sight and the hearing: such as eating, walking, talking, dressing, giving and receiving affection.

People with deafblindness can not understand nor get a picture of the world without professional help, at all times and in every situation, someone who transmits things in a meaningful way for them: this specific professional is an **intervener** in deafblindness.

We offer to 20 deafblind persons the service of interveners which guarantees an effective communication and learning, based on the requirements and capabilities of each of them.

We give response to the needs of communication, access to information and help to mobility, because only by overcoming the communication barriers this sensorial disability implies, deafblind people can develop their full potential depending on their capabilities and exercise their right to access information, mobility and personal autonomy as society members.



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Project Need and Beneficiaries

With this project, 20 persons with deafblindness, with different levels of disability, will receive the necessary support during a year for accessibility, communication, language therapy, physiotherapy and mobility making it possible to overcome the barriers of the disability and allowing a prosperous physical, psychological and emotional evolution.

Deafblindness is a sensorial disability which, depending on the level, and specially in the case of congenital deafblindness, poses more specific needs of support and adaptation. Therefore, when a person is born with deafblindness, it is essential, from the first moment and during his/her entire life, to receive the care and support from specific professional interveners with whom they can effectively communicate to ensure his/her full development and life quality.

Deafblindness is recognized as a specific disability in the current Spanish legislation, but it is still a very unknown disability. Because of the lack of a specific census many of these people are not receiving the adequate attention. If we consider that there are 40 people with deafblindness per 100.000 inhabitants, we can say that thousands of people with this disability in Spain still do not have guaranteed their fundamental rights.

This project can guarantee that at least 20 people with deafblindness will receive adequate attention.



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Project Activities

One to one intervention, involving: daily routine activities (ex. get dressed, go shopping), leisure time activities (gardening, socializing), sport activities (swimming), physiotherapy, speech therapy and support activities (enhancing psychomotor and sensorial abilities).

Donation Options

\$20 cover one hour of intervener assistance in deafblindness.

\$35 finance one hour of physiotherapy.

\$50 fund one hour of speech therapy.

Potential Long-Term Impact

20 deafblind persons from different ages and levels of disability will receive the necessary support –daily and personalized- for a better evolution and equal opportunities like anybody else.

Budget Project for a Year

- 20 Deafblind persons to be attended by Interveners
- 1 Deafblind person to be attended by Therapist
- 20 Cover 1 Hour of Intervener
- 50 Fund 1 Hour of Speech Therapist
- 35 Finance 1 hour of Physiotherapist

- 5 # of hours of intervener for one Deafblind person a week
- 1 # of hours of Speech Therapist for one Deafblind person a week
- 1 # of hours of Physiotherapist for one Deafblind person every 2 weeks

Year Budget	One Db Person	All
Intervener	4.800,00 \$	96.000,00 \$
Speech Therapist	2.400,00 \$	2.400,00 \$
Physiotherapist	840,00 \$	840,00 \$
		99.240,00 \$

PHYSIOTHERAPY

Deafblind people have few motivations to move in and adapt to an incomprehensible world for them, where they feel defenseless, without control and where they receive few incentives to feel curiosity.

If, to all these, we add the little capacity to imitate and learn (95 % of what we learn is it from eyesight and from hearing), balance problems involving many auditory problems, and that many of the genetic syndromes that lead in to congenital deafblindness are poly-malformations (involving neurological and muscle-skeletal problems), as a result we got a poor psychomotor development which affects the cerebral maturity (already obstructed by little sensory stimulation).

In short, attention hours in physiotherapy are very important within the comprehensive and multidisciplinary care these people need.

In the case of newborn children it is necessary to focus on early attention, with monthly sessions. In these sessions, apart from follow-up the progress of the child and the assessment of the suitable equipments, guidelines will be given to the parents and keepers to work day after day. In these early stages it is necessary to train adequate positions for the child (to facilitate social intercourse and the use of possible audiovisual remains), the thick psychomotor development (to crawl, to climb, to walk), fine motor skills (manual manipulation) and to assure the necessary basis to promote the highest possible levels of mobility and orientation in the future.

With increasing age physiotherapy sessions turn to be more specific, with frequencies depending on the case. The comprehensive approach of early attention is replaced by one more concrete, focusing on specific problems and working to maintain skills already learned. Sometimes, physiotherapy work will be desirable for the whole life.

INTERVENER:

Functions of the social intervener

The main role of the intervener consists in:

- Facilitating the access to information from the environment.
- Facilitating the development and use of the receptive and expressive abilities of the deafblind person.
- Generating and maintaining an interactive relationship of trust that contributes to the social and emotional wellbeing.

During all routines and activities, the person with deafblindness needs to access systematically to the information of his/her environment and support for achieving both interactive communication and social and emotional wellbeing.

When planning a personalized program for a person with deafblindness, it should be both a proper assessment of the person's specific needs and an evaluation of the activities, in particular taking into account the combined loss of sight and hearing. The participants have to be experienced in the deafblindness field, understanding the effects of the sensorial combined loss in learning and development.

SPEECH THERAPIST:

The role of the speech therapist in the caring of deafblind people is very important, favoring the person to express verbally what she/he wants or feels.

The speech therapist sessions start from the diagnosis of the case (assessing needs of speech therapy care) till developing a workplan for each session.

Beginning of service:

Initially two sessions per week, each two hours, take place. During those first sessions, the therapist assesses the state of the voice and the speech. Normally, people with deafblindness communicate with augmentative and alternative communication systems (sign language, pictograms, etc). It should be taken into account these systems to achieve results at the speech therapists.

People with deafblindness who profit most from the speech therapists's sessions are those having usable residual hearing (with or without hearing aid help).

Development:

Once the diagnosis is done and the sessions are started, it can be specified a work plan and a way forward according to the results being obtained. Planned activities contribute to the active participation of the person cared.

It is essential to conserve the results that are being obtained to improve and evolve.

In order to obtain of optimal results the relationship with the speech therapist has to be based on trust, carrying out the sessions in an adequate environment.

The transfer to the main caregivers (parents or tutors) will be done in order to involve them into the process and make them contribute to the conservation of the learning, collaborating in the realization of daily basic activities.