

## The Powerful Sense of Smell

by Gloria Rodriguez-Gil, M.Ed., CDBS Educational Specialist

Several years ago I was shopping at Macy's in New York when suddenly I smelled something familiar, and I immediately thought of my childhood doll Lucy. You see, I had not thought about Lucy for years, much less that Lucy had been my favorite doll when I was growing up in Spain. Looking around, I realized that I was in the store's toy section and that I was very close to a stand of dolls. Out of curiosity I reached out for one of the dolls. On the box it said: "Made in Spain".

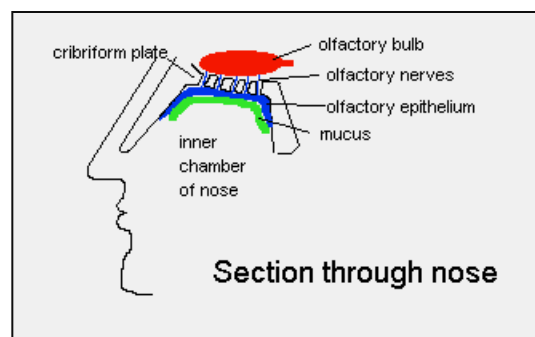
This experience was incredible to me—that something so far back in my memory could be brought to the present by something so fleeting as one smell! Years later I recalled this incident when I learned that the part of the brain responsible for our sense of smell—the limbic system—is related to feelings and memory.

In order to make sense of what smell is and how we can think of using it in our work, let's first explore how the sense of smell is put together.

### How the sense of smell works

The sense of smell, just like the sense of taste, is a chemical sense. They are called chemical senses because they detect chemicals in the environment, with the difference being that smell works at dramatically larger distances than that of taste. The process of smelling goes more or less like this:

1. Vaporized odor molecules (chemicals) floating in the air reach the nostrils and dissolve in the mucus (which is on the roof of each nostril).
2. Underneath the mucus, in the olfactory epithelium, specialized receptor cells called olfactory receptor neurons detect the odor. These neurons are capable of detecting thousands of different odors.
3. The olfactory receptor neurons transmit the information to the olfactory bulb, which is located at the back of the nose.



from [www.cf.ac.uk/biosi/staff/jacob/teaching/sensory/olfact1.html](http://www.cf.ac.uk/biosi/staff/jacob/teaching/sensory/olfact1.html)

4. The olfactory bulb has sensory receptors that are actually part of the brain which send messages directly to:

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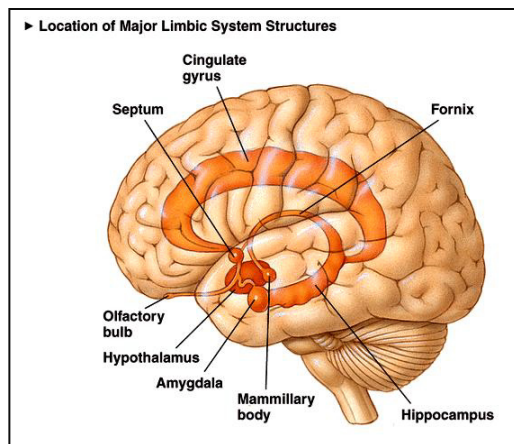
- The most primitive brain centers where they influence emotions and memories (limbic system structures), and
  - “Higher” centers where they modify conscious thought (neo-cortex).
5. These brain centers perceive odors and access memories to remind us about people, places, or events associated with these olfactory sensations.

It is important to add that: “Our sense of smell is 10,000 times more sensitive than any other of our senses and recognition of smell is immediate. Other senses like touch and taste must travel through the body via neurons and the spinal cord before reaching the brain whereas the olfactory response is immediate, extending directly to the brain. This is the only place where our central nervous system is directly exposed to the environment.” (von Have, Serene Aromatherapy)

### The Sense of Smell and the Limbic System

The olfactory bulb is one of the structures of the limbic system and a very ancient part of the brain. As mentioned in the previous description of the olfactory process, the information captured by the sense of smell goes from the olfactory bulb to other structures of the limbic system.

The limbic system is a network of connected structures near the middle of the brain linked within the central nervous system. These structures “work together to affect a wide range of behaviors including emotions, motivation, and memory” (Athabasca University, Advance Biological Psychology Tutorials). This system deals with instinctive or automatic behaviors, and has little, if anything, to do with conscious thought or will.



from [www.driesen.com/the\\_limbic\\_system\\_-\\_2.htm](http://www.driesen.com/the_limbic_system_-_2.htm)

The limbic system is also concerned with translating sensory data from the neo-cortex (the thinking brain) into motivational forces for behavior. The limbic system is centrally involved in the mediation between a person’s recognition of an event, their perception of it as stressful, and the resulting physiological reaction to it, mediated via the endocrine system: Stimuli are processed conceptually in the cortex, and passed to the limbic system where they are evaluated and a motivational response is formulated.

### What does this have to do with our field?

In the field of deaf-blindness, we have always known that many children who are deaf-blind have a very sensitive sense of smell to compensate for their limited use of vision and hearing. Consequently, we have always said that the sense of smell plays a key role in this population for identifying people, places, objects and activities.

The following statements are heard frequently in this field: avoid wearing strong fragrances because they can elicit seizures in some children; use the sense of smell to provide additional information (olfactory cues) to the child about what is about to happen to the child, e.g., bringing a bar of soap close to the child’s nose before taking a bath to tell him that soon he will be taking a bath; or to wear the same soft scent every time you work with a particular child so he can recognize who you are by this smell. All of this is very valuable information. The sense of smell is a strong sense for identification purposes and can have a strong impact in your brain because it is such an integral part of it (to the point that strong chemical smells can definitely elicit seizures).

But what about the role the sense of smell plays in relation to children’s moods, levels of arousal, emotions, memories and physical reactions? Now we know that they are connected.

Many times we are with a child and we can’t understand what is going on with him. He can’t tell us in a formal way. Maybe he is fussy or crying or smiling and we don’t know why. Why is he having these behaviors? Could it be about something he smells? We don’t know. We definitely know we should be paying more attention to this environmental factor to see if and how this is affecting the child.

I still have questions relating to the impact of the sense of smell in children who are deaf-blind and whether we can use this sense to our advantage, e.g., the use of consistent olfactory cues that might provide information a child could use to better understand what is happening,

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or eliciting a specific response from a child using a specific scent.

Are children who are deaf-blind more impacted by the sense of smell than children who have normal vision or hearing?

Are children who are deaf-blind with neo-cortex lesions more strongly impacted by the sense of smell because they might depend more on the information processed by the limbic system?

Can we help a child become more alert or less overexcited using a particular scent?

Can we calm a child using oils that have a calming or soothing scent?

### Conclusions

Even though we don't know exactly how children who are deaf-blind are impacted through their sense of smell, we know this sense is very strong and basic. When interacting with a child who is deaf-blind we should be aware of the environmental odors that might be affecting the child's behavior. Ideally we should be pairing an odor with its source so the child can make the connection between what he is experiencing and its concrete referent.

As an educational specialist in the area of deaf-blindness, it would be interesting to work with a team that includes a neuroscientist and an aroma-therapist to find ways to use the sense of smell to the benefit of children who are deaf-blind.

The emotional connections and memories attached to a smell can be very personal; it seems to be intrinsically enmeshed with the individual experience. I am certain that if another person had been walking with me that day through Macy's, he or she would not have noticed the doll's smell. And on perceiving the smell, he or she would not have thought of my doll Lucy or felt the same feelings I had with this experience. But strong memories can be encoded and become accessible through the natural workings of the sense of smell. It may be possible to create these links to help open another avenue for communication with children who are deaf-blind.



#### RELATED LINKS:

[www.driesen.com/the\\_limbic\\_system\\_-\\_2.htm](http://www.driesen.com/the_limbic_system_-_2.htm) (The Limbic System). Driesen, Neuropsychology and Medical Psychology Resources.

[web.sfn.org/content/Publications/BrainBriefings/smell.html](http://web.sfn.org/content/Publications/BrainBriefings/smell.html) (Smell and the Olfactory System). Society for Neuroscience, Brain Briefings, 1995.

[psych.athabascau.ca/html/Psych402/Biotutorials/18/intro.shtml](http://psych.athabascau.ca/html/Psych402/Biotutorials/18/intro.shtml) (Limbic System). Athabasca University, Advance Biological Psychology Tutorials.

[www.cf.ac.uk/biosi/staff/jacob/teaching/sensory/olfact1.html](http://www.cf.ac.uk/biosi/staff/jacob/teaching/sensory/olfact1.html) (Olfaction). Cardiff University, A Tutorial on the Sense of Smell.

[www.serene-aromatherapy.de/aromaolfactory.html](http://www.serene-aromatherapy.de/aromaolfactory.html) (The Olfactory Response). von Have, Serene Aromatherapy.

[faculty.washington.edu/chudler/chems.html](http://faculty.washington.edu/chudler/chems.html) (Our Chemical Senses: Olfaction). Murray, Neuroscience for Kids Staff Writer.

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## e-distribution update

With the last issue (Fall 2003) of *reSources* we included an aqua-colored postcard announcing that future issues of this newsletter will be sent via "e-distribution" unless people with no internet access return the card to request paper copies.

We asked all others to provide us with a real name and valid email address for inclusion in the new e-distribution *reSources* mailing list.

Unfortunately, due to technical issues at our ISP, the [resources@pacbell.net](mailto:resources@pacbell.net) email address could not (and cannot) receive messages; therefore some people who tried to give us their email address for *reSources* received bounced mail, and for this we are very sorry! If you are among those who sent to [resources@pacbell.net](mailto:resources@pacbell.net), we did not receive your request and ask that you please try again using the following info:

**Send to:** [cadbs@pacbell.net](mailto:cadbs@pacbell.net)

**Subject line:** "reSources" or "reSources mailing list" or "reSources e-distribution"

**Body of msg:** your name, your email address

THANK YOU SO MUCH!

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# Becoming Aware Through Touch

by Gloria Rodriguez-Gil, M.Ed., CDBS Educational Specialist

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**F**or the last four years I have worked with Project SALUTE, a research project that looks at the sense of touch as a way to enhance communication and learning with children who are deaf-blind and have additional disabilities (which I will refer to as “the population” or simply “the children” or “the child” for the sake of brevity). This article will focus on the sense of touch without disregarding the importance of using of a multiple sensory approach.

## Setting the Stage

In-depth learning about touch and how to use it when interacting with this population is a new area of study for many of us serving children who are deaf-blind. Before I started with Project SALUTE, I knew that the sense of touch was important for the population and I think all the people who started with the project knew it as well. But we all went ahead and continued doing the things we were supposed to question: taking children’s hands every time we wanted to introduce objects so they could touch them, introducing hard plastic objects that had little tactile identity, changing objects one for another before giving the children adequate exploration time... and the list goes on and on.

In this field there is little time for slowing down long enough to think about what we’re really doing. Slowing down allows us time to observe, discuss, think and learn about the kinds of things we do with this population, and to be open-minded about change. Project SALUTE provided us with the space to learn about touch and the many different techniques and strategies related to touch. It helped us become aware of the importance of this sense—for communication and learning—and of its unlimited possibilities.

Learning a new way of interacting takes time; it is a gradual, ongoing, and subtle process. This is important to remember so that we don’t become impatient with ourselves and/or give up too easily when we don’t see results the first time we try new approaches. A parent summed it up best when she said, “It has taken me years to learn how to communicate appropriately with my child, and I am still learning.”

## The Process

All of the Project SALUTE participants were working with or had a child with deaf-blindness. It helped enormously with the process to have discussions that were based on personal interests and on situations that were currently happening, as well as sharing techniques with each other that could be practiced the next time participants interacted with their children.

For some of the SALUTE participants it was difficult for them to change old habits and begin using new tactile approaches, and some had difficulty believing that the sense of touch could really be an important key to opening the door to their children’s communication and learning. For other participants it was hard to think of the sense of touch as a main channel for communication. Some parents believed that recognizing the importance of “touch” was giving up on their children’s “vision”. It was important to explain to them that “vision” and “touch” do not invalidate one another. I frequently observed adults looking only at their children’s faces and not their hands or bodies for responses.

As the participants began thinking about their own hands and how they used them when communicating with their children, they began to be more aware of the kind of touch they were using. The participants also began to think of their children’s hands and whole bodies as means for communication and learning. It helped them to think of their children’s hands as another pair of eyes, and of their children’s bodies as sensory organs that could “feel” and convey communication.

Once convinced that the sense of touch could be a main channel of communication and/or could enhance other channels of communication, we began to see changes in the participants’ behavior. These changes varied from person to person depending on their interests and needs, as well as their child’s level of communication and responses. One parent reported that she became more consistent when she began observing changes in her child’s communicative behaviors.

## What Came Out of The Process?

The process of discovery and learning went on for two years. During this time we saw changes in behaviors and

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# Fact Sheet

## Utilizing the Sense of Smell in Children and Youth with Deaf-Blindness

*by David Brown, CDBS Educational Specialist*

**MOST OF US HAVE HEARD THESE KINDS OF STORIES.** A child with significant visual and hearing impairments always becomes very upset when being taken into the hospital building even though he cannot possibly have seen and recognized the building nor understood, from spoken conversations, that he is being taken to a hospital. Another child becomes excited and begins to salivate as lunch is being cooked in the room next door, even though he has not seen or heard the food being prepared. An older child routinely searches for the hand of every new person who enters her classroom and lifts it to her nose to sniff, then she either drops the hand and walks away or she smiles and embraces the other person. When a girl with profound disabilities is allowed time to smell the dish of lavender-scented oil that is always used in her weekly massage session her eyes open wider, she becomes gradually more animated, and she breaks her customary silence with quiet vocalizations. All of these are examples of ways in which the sense of smell can offer vital and meaningful information to children with deaf-blindness.

Some children with deaf-blindness have no sense of smell (we think that this is the case with many children with CHARGE Syndrome, for example), and others do not appear to show any awareness of the sense even though it may be intact and working. In other cases children give very clear evidence that smell is an important sensory input for them, as in the examples mentioned above, and many children show levels of environmental and social awareness that are surprising and perplexing to us (like the boy upset by hospital visits), until we realize that their sense of smell must have given them the essential information they needed for this awareness and recognition.

Sometimes people involved with a child with deaf-blindness think of using smells in a deliberate way to help the child know what is going on, and in these cases the following guidelines might be helpful.

1. Helping the child to become more aware of smells that are already present in existing environments and regular routines might be a useful thing to do, and there are usually many more of these routine smells around than we realize. Time spent exploring and thinking about this, and discussing your ideas with others, should be helpful.
2. Any ideas about introducing new smells artificially should be treated with caution. If the smell is not already an integral part of the activity it might in fact be a distraction from it. Since the smell is being

*Fact sheets from California Deaf-Blind Services are to be used by both families and professionals serving individuals with dual sensory impairments. The information applies to students 0–22 years of age. The purpose of the fact sheet is to give general information on a specific topic. More specific information for an individual student can be provided through individualized technical assistance available from CDBS. The fact sheet is a starting point for further information.*

introduced artificially it might also be difficult for everybody to remember always to introduce it consistently and appropriately, and to remember exactly which smell is to be used with which activity.

3. Many smells released into the atmosphere remain perceptible for a very considerable period of time, and they cannot be 'put away' like we would switch off a light or a music box, or remove a "feely" toy from a child and put it in a drawer. If too many different smells are artificially introduced in one place they will blend together, which could cause confusion and distraction, and might even be a potential health hazard (depending upon the type of smells being used). Everybody in the room will be exposed to these smells, not just the child for whom they are intended. It is reported that the sense of smell 'tires' and the nose begins to lose its sensitivity after exposure to three or four different smells in succession (Sanderson, Harrison, and Price, 1991, p. 18).
4. All of us have hypersensitivities to certain smells and to certain intensities of smell, and, while some children with deaf-blindness may demonstrate these hypersensitivities with obvious adverse responses, others might not be able to let us know that they are suffering. (For more information on hypersensitivities see [www.handle.org/miscinfo/environ.html](http://www.handle.org/miscinfo/environ.html).)
5. Hypersensitivity might be reduced if essential oils are used to provide the smell rather than an impure source like an aerosol spray or some other type of air freshener. Essential oils are powerful chemical substances, however, so should only ever be used after consultation with an aromatherapist.
6. Essential oils can be used in massage sessions, and this is one activity where it seems like a very good idea to introduce a consistent smell in the massage lotion to help to 'label' the activity for the child with deaf-blindness. If used in a massage lotion these oils will be absorbed both through the nose and through the skin so it is particularly important to consult an aromatherapist and to follow all safety guidelines. For massage purposes any essential oil should always be greatly diluted in a bland vegetable oil, and the dilution needs to be greater for young children than for adults. Many specialists recommend that no essential oil be used in massage lotion for the very youngest infants, and then only essential oil of lavender or chamomile be used with children (both of these are said to have calming, soothing properties).

Sanderson, S., Harrison, J., and Price, S. (1991). *Aromatherapy and Massage for People with Learning Difficulties*. Lutterworth, Leicester: The Abbott Press.

# Hoja de Datos

## Como Usan el Sentido del Olfato los Niños y Jóvenes Sordo-Ciegos

*by David Brown, Especialista en Educación de CDBS*

**CASITODOS NOSOTROS HEMOS OÍSO ESTE TIPO DE ANÉCDOTA.** Aunque un niño(a) con un impedimento de audición y visión significativo no pueda ver o reconocer el edificio, ni saber adonde lo están llevando por las conversaciones que hay a su alrededor, siempre se altera cuando lo llevan al hospital. Otro niño se entusiasma y empieza a salivar cuando empiezan a cocinar el almuerzo en el cuarto de junto, aun cuando él no haya oído ni visto que están preparando la comida. Un niño mayor rutinariamente busca la mano de cualquier persona nueva que entra al salón de clase y se la acerca a su nariz, puede dejar caer la mano y seguir caminando (si no reconoce a la persona) o sonreír y abrazarla. Cuando se le da a una niña con discapacidades, suficiente tiempo para oler la botella de aceite con esencia a lavanda que siempre se usa en su sesión semanal de masaje, sus ojos se van a abrir muy grandes, y gradualmente la niña se va a animar más y más, hasta que rompa su acostumbrado silencio con vocalizaciones suaves. Todos estos son ejemplos de maneras en las que se puede ver que el sentido del olfato ofrece información significativa y vital a los niños Sordo-Ciegos. Algunos niños Sordo-Ciegos no tienen el sentido del olfato (por ejemplo, pensamos que ese es el caso de los niños que tienen el Síndrome Charge), y parece que hay otros que no muestran conciencia del sentido del olfato, aunque posiblemente lo tengan intacto y en buen estado. En otros casos, los niños dan una evidencia muy clara que el sentido del olfato les proporciona información muy importante, como en los ejemplos que se mencionaron anteriormente. Muchos niños muestran niveles de conciencia social y ambiental que nos sorprenden y nos dejan perplejos hasta que nos damos cuenta que su sentido del olfato debe de estar dándoles la información esencial que necesitan para reconocer y entender el ambiente donde están (por ejemplo, como en el caso del niño que se agita cuando visita un hospital).

Algunas veces, las personas que participan en la vida de un niño Sordo-Ciego han pensado en usar los olores de una forma deliberada para ayudarle al niño a que sepa lo que está pasando en su ambiente, y en estos casos las siguientes sugerencias pueden ser de gran ayuda.

1. Posiblemente sea de gran utilidad ayudarle al niño a que tenga más conciencia de los olores que existen o que están presentes en el ambiente y en las situaciones regulares, y generalmente hay muchos más olores de este tipo presentes de lo que nos damos cuenta. El tiempo que invertimos buscando y pensando sobre esto, y hablando sobre las ideas con otras personas va a ser de gran ayuda para los niños.

*Las hojas de información de California Deaf-Blind Services están disponibles para que las usen tanto las familias como los profesionistas que dan servicio a los individuos con impedimentos sensoriales duales. La información corresponde a estudiantes de 0 a 22 años de edad. El propósito de las Hojas de Información es ofrecer información general en un tema específico. Se puede proporcionar más información específica para un estudiante en particular a través del apoyo técnico individualizado disponible en CDBS. La Hoja de Información es un punto de inicio para empezar a reunir más información.*

2. Cualquier idea sobre introducir olores de una forma artificial se deberá pensar con cuidado. Si el olor no es una parte íntegra de la situación, puede llegar a ser una distracción. Ya que el olor ha sido introducido artificialmente, podría llegar a ser difícil que todas las personas recordaran que siempre deben de presentar el olor de una manera consistente y apropiada, y recordar también con precisión que olor se debe usar para cada situación específica.
3. Muchos olores que se sueltan en la atmósfera permanecen en el ambiente por un período de tiempo considerable, y estos olores no pueden ser “retirados” como cuando apagamos una luz o una caja de música, o cuando le quitamos al niño un juguete táctil y lo ponemos en un cajón. Si se introducen artificialmente varios olores al mismo tiempo en un solo lugar, estos olores se van a mezclar entre si, lo que puede causar una confusión y distracción, además este puede llegar a ser un peligro potencial a la salud (dependiendo del tipo de olores que se usen). Todo mundo en el salón va a estar expuesto a estos olores, no sólo el niño para quien están dirigidos. Se ha reportado que el sentido del olfato ‘se cansa’ y la nariz empieza a perder la sensibilidad después de ser expuesta a tres o cuatro diferentes olores en sucesión. (Sanderson, Harrison y Price, 1919, p.18).
4. Todos nosotros somos hipersensibles a ciertos olores y a ciertas intensidades de olores y, aunque ciertos niños Sordo-Ciegos posiblemente demuestran esta hipersensibilidad con respuestas adversas obvias, otros posiblemente no puedan decirnos que los olores les están molestando. (Para más información sobre las hipersensibilidades, consulte [www.handle.org/miscinfo/environ.html](http://www.handle.org/miscinfo/environ.html).)
5. La hipersensibilidad se puede reducir si se usan aceites con esencia para presentar el olor en lugar de recurrir a una forma adulterada tal como spray en aerosol o en otro tipo de refrescante ambiental. Los aceites con esencia son sustancias químicas poderosas, entonces se deberán usar solamente después de haber consultado a un aromaterapeuta.
6. Los aceites con esencia pueden ser usados en las sesiones de masaje. Esta es una actividad donde parece muy buena idea siempre introducir el mismo olor en la loción que se usa en el masaje, esto va a ayudarle al niño Sordo-Ciego a reconocer la actividad. Si se usan estos aceites en una loción para masaje, van a ser absorbidos a través de la nariz al igual que de la piel, por eso es particularmente importante consultar con una aromaterapeuta y seguir todas sus recomendaciones referente a la seguridad del uso de los aceites. Para motivos de masaje, cualquier aceite con esencia deberá ser muy diluido en un aceite vegetal blando, y la proporción para diluirlo debe de ser mucho más grande para un niño que para un adulto. Muchos especialistas recomiendan que no se use aceite con esencia en las lociones para masaje para niños muy jóvenes. Cuando los bebés son mayores, se debe usar solamente aceites con esencia de lavanda o manzanilla (se dice que ambas esencias tienen propiedades paliativas y tranquilizantes).

Sanderson, S., Harrison, J., and Price, S. (1991). *Aromatherapy and Massage for People with Learning Difficulties (La Aromaterapia y Masaje para Personas con Dificultades de Aprendizaje)*. Lutterworth, Leicester: The Abbott Press.



attitudes in the people involved. While some of these changes were too subtle to measure, others were clearer to perceive and document:

- ❖ More consistency developed among the team members for the use of tactile strategies.
- ❖ The use of a larger variety of tactile strategies increased over time.
- ❖ More and more members of children's teams ventured into the new ways of interacting.
- ❖ The need to create predictability through tactile strategies in the interaction with the children increased.
- ❖ More time was allowed when pausing and waiting for responses from the children during interactions.

The process also had its rough spots, mainly due to circumstances that are just a part of life: children's illnesses, change of one-to-one aides and other team members, and even complete change of educational teams and schools. These issues actually helped us keep in mind the realities of complicated lives. Part of our learning included the need to take into account human frailties while remaining flexible enough to gather useful results.

### Looking Ahead

We've learned a great deal over the past four years and, more importantly, children's lives have improved. For the children, new and exciting avenues for communication possibilities were opened. We also recognize that with these changes come a great deal of work to do and challenges to overcome.

Interactions are still used mainly for instruction and support purposes and not for "conversations" with and about children's interests. Interactions happen mainly between adults that support the children and the children themselves, and rarely between children. This continues to isolate children from their peers.

Implementation of tactile strategies is challenging when children are not interested in touching, have physical limitations such as cerebral palsy, or are defensive when others try to touch their hands.

Methods and practices reached by consistent teams is partially or completely disrupted by changes in the make up of teams. Some teams may have little experience and/or time available for tactile adaptation of visual materials,

and children who need tactile strategies then may have limited participation in the class environment.

We already have some ideas of what to do in the situations described above. We need to continue implementing these ideas with the collaboration of all the people involved in the education of our children.

### Conclusion

The sense of touch—and the strategies that can develop from its use as a main or auxiliary communication channel—does improve communication and learning with these children. Adopting this point of view, with all the study and practice that it entails, definitely increased our awareness of what we do and how we do it. It led us to question what we were doing, and it led us to learn new strategies and/or improve the ones we already had.

I invite everybody to study and become familiar with touch and its possibilities. It does make a difference.



#### FURTHER READING AND RESOURCES:

*Learning Through Touch: Supporting Children with Visual Impairments and Additional Difficulties*, by Mike McLinden and Stephen McCall. Published in 2002 by David Fulton Publishers, London.

**Project SALUTE** (Successful Adaptations for Learning to Use Touch Effectively). Northridge, CA: California State University. [www.projectsalute.net](http://www.projectsalute.net)

*Tactile strategies for children who are Deaf-blind: Considerations and concerns from Project SALUTE*, by Deborah Chen, June Downing, and Gloria Rodriguez-Gil. Published in 2001 in the journal *Deaf-Blind Perspectives*, 8(2), 1–6. [www.projectsalute.net/Learned/Learnedhtml/TactileLearningStrategies.html](http://www.projectsalute.net/Learned/Learnedhtml/TactileLearningStrategies.html)

*Talking the language of the hands to the hands*, by Barbara Miles. Fact sheet published in 1999 by D-B Link. [www.tr.wou.edu/dblink/hands.htm](http://www.tr.wou.edu/dblink/hands.htm)

*Touch*, by Barbara Miles. In *Understanding Deafblindness*, edited by Linda Alsop. Published in 2001 by SKI-HI Institute, Logan, Utah.

*Using tactile strategies with students who are blind and have severe disabilities*, by June Downing and Deborah Chen. Published in 2003 in the journal *Teaching Exceptional Children*, 36(2), 56–60.

*Where Do I Begin? Developing Communication with Children Who are Born Deafblind*. Published in 2001 by the West Australia Deafblind Association, Maylands, West Australia.

and

**present a workshop in Spanish:**

## I WANT TO LEARN HOW TO COMMUNICATE WITH YOU

**For:**

Family members and  
educators, including  
teaching assistants

**Of:**

Infants, toddlers, children and young  
adults who have significant visual  
impairments and who may also have  
additional disabilities including  
multiple disabilities and/or hearing  
impairments

**Participants will learn to:**

- Communicate effectively with children using the sense of touch
- Promote communication with children
- Apply—in practical ways—strategies for use in homes and/or schools
- Develop and maintain effective and positive communication with families and educational teams

Place: California State University, Northridge  
Address: 1811 Nordhoff Street, Northridge, CA 91330-8265  
Date: Saturday, May 22, 2004  
Time: 9 a.m. – 4 p.m.

**Presenters:**

|                      |                               |  |
|----------------------|-------------------------------|--|
| Gloria Rodriguez-Gil | <i>Educational Specialist</i> | <a href="mailto:gloria.gil@gte.net">gloria.gil@gte.net</a>         |
| Myrna Medina         | <i>Family Specialist</i>      | <a href="mailto:mmedina@earth0link.net">mmedina@earth0link.net</a> |

Or you may contact them at 1-800-822-7884.

Childcare will not be provided.

This training is sponsored by Project SALUTE and California Deaf-Blind Services, and is provided at no cost to participants.

y

San Francisco State University

**presentan un taller en Español:**

# **QUIERO APRENDER A COMUNICARME CONTIGO**

**Para:**

Padres de familia y  
educadores incluyendo  
asistentes de maestro

**De:**

Niños o jóvenes con ceguera y  
discapacidad múltiple incluyendo  
sordo-ceguera

**Los participantes aprenderán a como:**

- Comunicarse efectivamente a través del sentido del tacto con su niño o joven.
- Promover la comunicación de su hijo o joven.
- Aplicar—de manera práctica—estrategias para usar en el hogar o la escuela.
- Desarrollar y mantener una buena comunicación con la familia y el equipo educativo de su hijo o joven.

Lugar: California State University, Northridge  
Dirección: 1811 Nordhoff Street, Northridge, CA 91330-8265  
Fecha: Sábado, 22 de Mayo del 2004  
Hora: 9 a.m. – 4 p.m.

**Presentadoras:**

Gloria Rodriguez-Gil      *Especialista en Educación*      [gloria.gil@gte.net](mailto:gloria.gil@gte.net)  
Myrna Medina      *Especialista Familiar*      [mmedina@earthlink.net](mailto:mmedina@earthlink.net)

o se les puede hablar al 1-800-822-7884.

No se proveerá cuidado de niños.

Este entrenamiento está patrocinado por el Proyecto SALUTE y California Deaf-Blind Services, y se proporciona sin ningún costo a los participantes.

California Deaf-Blind Services  
*reSources*

Editor..... Maurice Belote  
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