

OCTOBER 2023

NDVS/SB OUTREACH NEWSLETTER

NDVS/SB provides individualized services and resources to infants, children, and adults with visual impairment to empower them in achieving their goals.



What is the ND Dual Sensory Project?

Submitted by Lacey Long, ND Dual Sensory Project Director

The North Dakota Center for Persons with Disabilities (NDCPD) recently responded to a notice inviting applications for the *2023 OSEP Technical Assistance and Dissemination to Improve Services and Results for Children with Disabilities - State Technical Assistance Projects to Improve Services and Results for Children who are Deaf-Blind and National Technical Assistance and Dissemination Center for Children who are Deaf-Blind*.

NDCPD has been approved for funding for the next 5-year grant cycle to coordinate **the North Dakota Dual Sensory Project**. The new 5-year grant cycle will run from October 1, 2023, to September 30, 2028.

The North Dakota Dual Sensory Project is a state and federally funded technical assistance and training program designed to enhance the provision of services for children and youth, birth through age 21, with combined vision and hearing loss. The mission of the project is to help state educational agencies, local educational agencies, Part C agencies, early intervention service providers, teachers, service providers, and families address the educational, related services, transitional, and early intervention needs of children and youth who are deafblind.

Technical assistance (TA) includes free consultation, training, and support to families and educators of children and youth who are deafblind. The North Dakota Dual Sensory Project offers three levels (universal, targeted, and intensive) of technical assistance through distance and face-to-face formats based on the specific needs of the recipient(s).

Interested in learning more about the ND Dual Sensory Project? Email Project Director, Lacey Long, at lacey.long@minotstateu.edu.



CARING FOR YOUR MENTAL HEALTH WITH AMY OSVOLD, MSW - PART 2

Here is the second part of a conversation with NDVS/SB's Amy Osvold. Amy has been a Vision Rehabilitation Specialist at NDVS/SB for 15 years, and now, after receiving her masters of social work degree, she will be providing some new services to students and adults, including adjustment to vision loss groups, social skills classes, and mentoring opportunities, as well as providing support to families as they navigate the reality of life with vision loss. In Part 1, Amy talked about her new role. In Part 2, she explains what to watch for if you're concerned about someone you love experiencing mental health issues.

What are some warning signs that your child may be having mental health issues?

Parents, family, friends, and teachers, ask yourself these questions:

Is there any change in moods or behaviors? For example, does your child suddenly not like to do things that they once enjoyed? Are they more irritable than usual? Are they self-isolating? Are their emotions fluctuating more than usual? Are they doing any forms of self-harm, such as picking at skin, cutting skin, hitting themselves, eye pressing or eye poking (new or worsening)? Are they acting out at home or school (yelling, crying, hitting, biting others)? Are they expressing more negative self-talk (name calling, personal criticism, etc.)? Are there changes in their sleep habits (not sleeping or sleeping more)? Are they complaining of headaches, stomachaches, or other aches?

The temptation to consult "Dr. Google" might be great, but it is better to notice/document behaviors, changes in behaviors, and the situations prior to and post behavior, and take them to a professional.

As always, if you think there might be risk of self-harm, harm to another, or suicidal ideation, contact the Suicide Hotline at 988 or seek emergency services such as 911.

What should families do if they observe those warning signs in their child?

First, noticing and documenting will be the best guard against someone slipping through the cracks. Second, ask others if they have noticed the same or similar behaviors. (If possible, emergent situations should be dealt with

quickly). Third, speak to a professional. This could be a school counselor, their family doctor, or a therapist.

Again, any situations that involve self-harm, threats to others, or suicidal ideation should be addressed immediately.

What can families do to support mental health?

First, it is important to recognize how you feel stress, anxiousness, or sadness. Some things I work on with students and clients is identifying their body symptoms. Some may include:

- *Butterflies/lump in stomach or general stomachache
- *Diarrhea
- *Tightness in chest
- *Headaches
- *Tightening muscles such as in hands or shoulders
- *Rapid heartbeat
- *Clenching jaws
- *Increasing in rocking, eye pressing, or eye poking (are they/you self-stimulating as a coping mechanism)

Everyone displays different signs. Just because it is not listed does not mean it is not a sign of stress, anxiousness, or sadness.

To read more from Amy, including what a self-care plan looks like and activities that can help calm when an individual is stressed, anxious, or sad, go [here](#). Contact Amy by calling 701-857-7635 or 701-340-9226 or email abrunner@nd.gov.

