**The following is a transcript of the virtual learning opportunity on an “Introduction to Deaf-Blindness and the Virginia Project for Children and Young Adults with Deaf-Blindness” that took place on March 27, 2020 in Virginia. The transcript was provided to Virginia Hands & Voices by Virginia Relay. Call moderator was Terese Urban. Presenters were Hilary Hodes, Technical Assistance Specialist and Ira Padhye, Project Coordinator, both with the Virginia Project for Children and Young Adults with Deaf-Blindness at the Partnership for People with Disabilities at Virginia Commonwealth University.**

Take a look at some of the settings here. Thanks for letting me know. Okay. I see the captioner has joined us. All right, so that's set. Ask >> This is Terry Urban with Virginia Hands and Voices. Good morning, everyone. Thank you for joining us. We're just making sure that everyone is able to get into the room. Hilary, there is not a waiting room. Everyone should just be able to join. >> HILARY HODES: All right. Looks like I'm getting a message now that it was working so should be good. >> Perfect. All right. Good morning, everyone. This is Terry Urban with Virginia Hands and Voices. Just going to check a few more technical things before we get started here. All right and I believe we are ready so Hilary, let me just record and then you can share your screen. All right and we'll make sure we keep the interpreter up. >> HILARY HODES: All right. This is Hilary. Can everyone see my screen and the interpreter? >> TERRY URBAN: This is Terry. I cannot see the interpreter. I can see your screen. Oh, I see, if we toggle. And for those who are using the interpreter, I was doing some research last night with Zoom. If you right click on that, and if you click on that and the interpreter, only her video will show on your screen but I think that we're good. I think that we're ready to go. Okay. Let me get situated here. Okay. Let's get started. So, good morning, everyone. Thanks for joining us today for our presentation on an introduction to Deaf-Blindness and the Virginia Project for children and young adults with Deaf-Blindness. We appreciate you joining us this morning. And -- excuse me. Let me take a quick moment and oh, sorry, I'm getting interrupted by my six year-old. I had a feeling that would happen. I'm hearing some giggling in the background. So, let me take a quick moment and introduce myself. My name is Terry Urban. I am the Chair of Virginia Hands and Voices. I am also the parent of three children. My oldest daughter is nine years old and profoundly deaf and I am joining today from outside of the Richmond area. We also have two presenters with us who are both from the Virginia Project for Children and Young Adults with Deaf-Blindness who I will introduce in a few minutes. So, for those of you who are using Zoom of course first time, we have turned the video off and we have muted everyone during this presentation. However, you'll see a chat box that you're able to access if you click on the bottom of your screen and feel free to type in any questions and we'll be sure to unfortunate that as we've allowed time at the end for questions. For the folks who are utilizing remote captioning, that does need to be accessed in a separate window by clicking the link provided. >> HILARY HODES: Terry, this is Hilary. I think he with lost the interpreter. Just so we don't lose access. Oh, there we go. >> TERRY URBAN: Okay. Did you find her? Okay. There we combo. So, we wanted to thank Civic Access for providing our video relay interpreting for those who have requested it so thank you, Lauren, our interpreter for joining us today. Before we begin, I just wanted to take a minute and acknowledge all of us taking the time to be here this morning despite all the uncertainty in the world right now. We know that life has drastically changed for many of us regarding our job and children being home from school. Mine are currently crawling on the floor around me so I'm trying my best to not be too distracted. So, clearly, this has put some constraints on us as we all are working in truly a virtual world but we're trying to stay positive and focus on our mission of providing unbiased support and resources and our state chapter of Hands and Voices along with our national Hands and Voices repeats virtually anyway so we're happy to still provide these supports to p parents and professionals as we get through these times together and continue to practice social distancing. I'll let Hilary and Ira speak more about how today's climate change their presentation slightly in just a moment but I did want to say that personally it's helped me to stay positive by trying my best to enjoy the time with my family and also taking some time to join a conference call or a virtual presentation when it comes to my involvement with Hands and Voices because honestly it feels good to on as usual especially since our deaf and hard-of-hearing children need our support now since they aren't receiving it in an educational setting. That being said, let's go ahead and get started if you want to advance to the next slide please. Here's our agenda for the next hour or up until 11:00 and we're excited to go over what Hilary and Ira have prepared for us today if you want to go on to the next slide. So, for those who aren't familiar with our presentation, we would like to welcome you. Virginia Hands and Voices is a nonprofit parent organization dedicated to supporting families and children who are deaf and hard-of-hearing. What really makes us unique is that we are unbiased about communication modes and methodologies and we believe that whatever choice choice a family makers is the right choice. Our outreach activities, parent professional collaboration and advocacy efforts are focused on he enabling deaf and hard-of-hearing children to reach their highest potential. Oh, if you can go to the next slide, thank you. And I just got a text from someone that they're having trouble seeing the interpreter. You can toggle through the videos that we have pulled up. You can kind of customize that on your screen. Everyone else is hidden except for the presenters and our interpreter. So, what do we do locally and nationally. Well, we strive to provide resources to families and professionals across Virginia and the United States. You'll see on the screen if you're joining us with that capability, you'll see that we have a map of the U.S. on there, a small one and each star that you see represents a Hands and Voices chapter so almost all of our states do have chapters. We even have chapters in a few provinces in kanaka and even in Africa. If you're joining us and we can go to the next slide, please. Oh, I'm sorry. Wait. Stay on this slide. This is my last part here. So, if you are joining us via audio today only some example that's we have here on the screen of what we do here locally include offering outreach activities, social opportunities, we help parents improve educational outcomes for their children and we provide virtual learning opportunities such as this one. All right. Enough of me talking. Let's go ahead, I'd like to ADA our presenters. So we have Hilary Hodes with us today, technical assistance and Ira Padhye is a project coordinator both at Virginia project for children and young adults with Deaf-Blindness. We're excited to have you ladies present your work with the Deaf-Blind project. Like I said, earlier, if you could please remember to state your name before speaking so our folks utilizing remote captioning are able to follow along, that would be great. So, with that said, thank you for joining and we will turn it over to you. >> IRA PADHYE: Hi, this is Ira. Like Terry said, I'm the project coordinator for the Virginia project for children and young adults with Deaf-Blindness and that is a mouthful so our short name is just the have vier Deaf Blind Project and we are a federally funded project. Like Terry said. Out of VCU's school of ed partnership for people with disabilities located in richmont, provide support to teams and families all throughout Virginia and what we do is we provide training and technical assistance which is basically the federal definition for consultation and training for educational teams which obviously includes families of children with a combined vision and hearing loss. Next slide, please. So, you know, in this incertain time, we just want med to thank thisle opportunity to thank you all for joining us and being enthusiastic about really supporting our children who are deaf and hard-of-hearing so we just wanted to acknowledge this enthusiasm and seeing so many of you here online on a Friday. Next slide, please. So, one of the things with our Deaf Blind Project that we really tried to share with everybody is what Deaf-Blindness actually means. Oftentimes, we don't get students identified as being Deaf-Blind because there's this myth that people assume that Deaf-Blind always implies that there's a total absence of vision and hearing. Probably the most famous person that we o know who had Deaf-Blindness was Helen Keller and unfortunately, that is not who our child with Deaf-Blindness now looks like in today's world. So, actually, the federal definition of Deaf-Blindness means that there's a combined vision and hearing loss that impacts a child's education so about 90 percent of our children who fit that description have some fudgessal level of hearing and vision. Only 10 percent are totally blind and deaf and that combined p vision and hearing loss impacts a lot of things in our child's lives day-to-day. Next slide. So, some etiologies that are considered to be synonomous with deaf-blindness, there are some hereditary syndromes. CHARGE syndrome is probably the most common, currently the leading cause the deaf-blindness. Usher syndrome, type one, two, and three are also synonomous with deaf-blindness. Down syndrome, although not all children who have Down syndrome are considered b deaf-blind, we just like to put that in there because there is a possibility that a child with down syndrome could have hey combination of deafness and blindness that could impact their education. Some prenatal or congenital complications include cytomegal ovirus or CMV, meningitis, microcephaly or hydrocephaly. Congenital rubella. Although it's eradicated in the United States, there are still many countries that it's prevalent and if a child is to be adopted from one of those countries and their deaf-blindness is caused by rubella we like to keep that in there because that could be a reason and more commonly now, Zika is also one of those warnings, some of those just to be aware that deaf-blindness can be caused by Zika. So, with the combination of vision and hearing loss, those are our distance senses. So, when we have limited access to our vision and hearing, it impacts a lot of things, including communication, exploration, mobility, engagement, participation, our relationships from day-to-day, our memory had concept development, independence and distance learning. When we this I about it, we use our distance senses every day. Most of the materials our children have r in school are through access vision and hearing so when that is limited, our child can deaf-blindness, their access is only limited to how far they can see, hear, and the reach of their arm. So, it really impacts almost all of our day-to-day. Next slide, please. So, this is what we like to call the pyramid of learning on the left hand side. This is a pyramid of learning for a typical child with normal hearing and normal vision. So, the most impactful way our children learn who don't have any sensory impairments is through incidental learning. Now, incidental learning means that they are learning through observations in our environment. Probably, a really common example of incidental learning that we all have experienced is if our little ones pick up a toy, put it to their ear and pretend to have a conversation e, it's that incidental learning. They've seen us pretend to have these conversations on the phone. Secondary learning is when you get information from a source like reading a book or a teacher lecture in the classroom. Probably the least amount -- not least amount, but not a big percentage of our learning for somebody who is typical is through direct learning which is hands on. So, for a child with deafblindness, that pyramid is completely flipped over. So, incidental learning and secondary learning are not as impactful, and so they need more of that hands on direct learning in order for them to learn. So, the reason why we really encourage children to be identified as deafblindness is because this this way they can get that access to learning as opposed to incidental and direct learning and they can build that access to communication, and learn which is what we all want our kids to do. So, what we offer from the Virginia project for children and young adults with deaf-blindness is we have family support from our projects family engagement specialists. We work with teams to provide on site, although, not so much on site right now, currently, with what's going on. But, more of that virtual coaching. We are still working and we are always available to you through Zoom and any type of virtual coaching and consultation. We can provide training on deaf-blind specific strategies when it comes to communication, access to the general Ed curriculum. We have an access to network of parents of children with deaf-blindness in Virginia. We have a free lending library of books, videos and other resources and we have online training modules that focus on a variety of topics that impact the child with deaf-blindness. We have connections to many national and state foundations. The national association of deaf-blindness. The charge syndrome foundation, the Usher syndrome foundation and Ava's Voice. So, what we're currently working on with the Virginia Deaf Blind Project is the child count. So, we are federally required to keep a child count of individuals in the state under the age of 22 who meet that federal criteria of deaf-blindness. Now, this means that the child does not necessarily have to have deaf-blindness as their primary eligibility category but if they have a vision and hearing loss like we said before that impacts their education, they can be considered to be deaf-blind and on our census. So, looking at how many -- this is kind of like a snapshot of what, how many students there are, within our state. And compared to the national average. Aces you can see, we have oftentimes that we don't get children identified until they start school age, oftentimes during the SOL time that teams kind of say oh, there's something not quite right and that's when our child gets identified with either vision or hearing and so what we're right now working on is really increasing our birth to five numbers, too. Because it's so important to start that access to communication and understanding deaf-blindness at a really early age so we're really working on that and our numbers have definitely increased over the years and it's definitely because of partners like you who allow us to come in and talk about what our project does. So, some frequently asked questions about whether a child can be referred to us. If a child still has vision loss but not does receive services, question still be on the child count? Yes, as long as the vision or hearing impacts their access to education, they can be on our child count and receive support. And if there is a vision or hearing loss suspected, it's not diagnosed yet can they still be on our child count? And the answer is yes. When you fill out our child form, there is an option that says, further tested neated under vision or hearing and that child can be on our child count for up to one year while the team works on getting that diagnosis and for that one year, the family and team can receive that support from the Virginia Deaf Blind Project. So, we don't work directly with children but we do work with teams and we help them to provide, we can help them to help the strategies that the teams have done. Next slide. So, if you would like some more information on our child count or our census, we have a webinar through the intergritted training collaborative that's also hosted at the partnership. There is a webinar called sense us and census-ability to help us understand what vision or hearing can look like for a child with deaf/blindness and how to refer them to our project so that is available to you whenever you like. So, if you'd like to connect it with our project, we have professional development opportunities. Our project is still ongoing right now. After listening to us, if you think your child or a child that you work with is suspected of having that combined vision and hearing loss, you can always contact us. We have our Google sites available that has our contact information. And we also have a Virginia Deaf-Blind Educators Community that is designed for educators that work in Virginia for students with deaf-blindness. We have monthly online web courses and resources so if you would like to sign up for that, there is a link for Google Forms. And I'm going to send it over to Hilary. >> HILARY HODES: All right. Thank you, Ira. So, we are going to shift gears a little bit now and talk about early prelinguistic communication. And one of the reasons that we're excite bad this collaboration of Hands and Voices is because like that, like you, we believe in finding the best choice to match a student and don't tend to focus on one type of communication over another. And when we got started talking about the idea of this collaboration, we thought, well, one group that can be hard to figure that out for are these early communicators. We'll spend a little time looking at some strategies and kind of who these communicators are and recognizing that this would be a huge topic for an entire course let alone just the beginning of an hour. To start with, I'm going to get a better sense of what you think of when you hear this term so we can start to have a shared understanding so I'm going to ask you for just about a minute or so here to add to what you think of when you hear early prelinguistic communication. And you can do that either by typing into the chat box, which I mean auto going to pull up on the sign here. I'm in the sure if that shows up on your screen when I do that. And then also by using the annotation tool and to use the annotation tool, you should be able to click on view that shows up in the menu bar at the top, give you the option to type a picture, embed a picture, whatever it may be there. Yes, let you, I'm going to stop talking here for a minute and if you would just share some of your thoughts in the room. >> TERRY URBAN: Hilary, this is Terry. Are you able to see the chat box? We're getting a bunch of comments here that are popping up in the chat and for those of you who can't access the chat, if you just hover your mouse on the bottom of the screen, you'll see the little chat icon. >> HILARY HODES: Great. Thank you, Terry. I'll give just another few moments for that, if you are just on audio, some of the ones coming in are babbling, pointing, gestures, using informal gestures or vocalization. Oh, dear, sorry. Babies crying when they are hungry. The stage before learning formle a expressions. Facial expressions -- oh, excuse me. The stage before learning formal language. Great and so it's really helpful, oh, subtle movements. One more there. It's really helpful to get a sense of what we're thinking about and I think it's really interesting that what this group mentions was lots of different ways in a we can communicate and a way before language. And I know Ira and I even had a conversation, well, what exactly is prelinguistic because we often work with early communicators. And linguistic speaks to that language piece and we know language has that abstract meaning. It has rules and a grammar structure and that can happen in different forms and ASL or spoken language or written language, even a picture but really it revolves around those ideas of abstract symbol and grammar and rules. So, we're thinking about who is included in the group before we're using some of that and these were some great examples to get started. Let me see. Of course now I don't know how to get rid of the annotation. I knew we could do it. I am sorry about that. Okay. Hopefully, it will pause with us there. And stay on this screen. All right. So, one way that we can start to think about children who are early communicators is with an assessment. An assessment can carry a more formal and intimidating representation but it's really just a way to help us think about who a child is as a communicator and we had like to use the communication matrix. And the communication matrix is a tool that we're happy to talk to you more about. Here is just a quick snapshot of it. It uses levels of communication. It starts with what someone mentioned, that preinternal communication where a child is responding to something either internal or in the environment but not trying to communicate something with us. Through when that behavior starts to become intentional, more unconventional communication, through early symbols that are really concrete, beginning to think about abstract symbols and then for this particular assessment stops when we hit language of two to three phrases. Of course, we know our children can continue to grow and develop beyond that but then we can use a different tool to assess them or start to think of them as more traditional communicators. And then we can also think about why a child communicates or y we communicate and this tool uses four basic functions. How do we refuse or reject something we wouldn't want. What strategies are being used to obtain or get something you want. Social communication. And then, information. And if you look at communication matrix, information doesn't even start until conventional communication at level 4. And when we think about early communicators, how often are we either providing information that we are upper assuming they're processing or are we asking them to share information and maybe they're still working at those earlier levels. So, again, this is just one way to start to organize our thinking around that. There's a link at the bottom if you're interested in more information or please he reach out to us. We'd be happy to continue this conversation with you. Oh, dear. And I am sorry. I do not know how to get rid of our leftover annotation. If anybody has a tip, maybe you can let me know in the chat box. So, as I mentioned, we had a lot come up in our conversation in the initial what you think of with an early prelinguistic communicator around different forms. My guess is we have a few speech language pathologists as well. When you think specifically about communicating at this early level, speech therapist is a fantastic partner to think through that and share their expertise. And we can think about those both in terms of nonsymbolic forms and symbolic forms and here's just two examples of what that might look like with tactile objects or tactile symbols. Oh. Thank you, sorry. I saw come through a way to get rid of those. Sorry. We can think about those either in terms of symbolic or nonsymbolic and for nonsymbolic that's when we're really using the object that would be part of an activity or routine so we see the examples there where it might be an actual carton a child is using. Versus a child symbol where the symbol is going to be more representative and have more of a symbolic form to it. It might either be a part of something but the child still has to make that connection or it might just be an abstract symbol that represents an activity or object or person. So, chances are, also, if you are here, you are thinking about a specific child who is an early communicator and if you are thinking about that child, chances are, you're one of their primary communication partners if not their primary communication partner. And while we engage naturally with so many typical conversations, although, that might be shifting rapidly for us as we make our own adjustments in today's world, when we're thinking about communicating with an early communicator, there's some really intentional strategies and steps we can use and this comes from some new resources that were put out by our national deafblind collaborators and some links here at the bottom with some practice guides. Often, when we start with the team, we start with this idea of building a trusted relationship. I know when Ira talked to us about some of the challenges of a child who doesn't have access completely to their distant senses, a lot of it has to did with not knowing who or what is in their environment and so starting from a place of trust is really the foundation. And I think again recognizing that our challenges are changing daily as we get used to social distancing and having kids at home, that idea of being fully present with a communicator might feel challenging but it's really important for that child to learn that they can share their communication with the world. We'll talk about that waiting, basically available and working through activities so keep an eye out for some of those as we look at some examples of strategy in the next few videos. >> TERRY URBAN: Hilary, this is Terry. If I can interrupt quickly. Could you go back to that last slide and copy that link at the bottom and post it into the chat room. >> HILARY HODES: Yeah, I'm going to ask, Ira, if you're able to do that, I think I would have to escape from a presenter mode instead of advancing the slide so we will get that link in there and we can also share in the PowerPoints with all of these links. Thank you, Terry. All right. So, a lot of times, we've heard that we need to use this strategy called wait time. I know even just a few minutes ago when I was trying to use wait time as people were typing in some of their ideas a minute can feel like a really long time and when we're sitting with a child, even 30 seconds can feel like a long time. That's really our job to wait but the reason he we're waiting is because that hilled is processing and that processing might include processing what's going on in the environment, who they're communicating with, what's expected next. If there is some expressive or communication they want to share out, organizing those ideas. And then, organizing how that physically gets produced. Is it a movement? Is it a vocalization? So, while we're waiting, that processing that's happening includes so many things and that's why it's so important. So, fingers crossed, this is queued up right where it should be and as you're watching here, also keep an eye out for how the communication partner is available and acceptable to this student. No. Sorry >> IRA PADHYE: Hilary, this is Ira. It's not showing up. >> HILARY HODES: You can't see the video at all? Oh. Is that better? Thank you. So we saw in that video that the adult is giving the child that wait time and also so a tuned on her movements that she notices the really subtle leg shift here and acknowledging it. Letting the child know, I'm here with you. I see that and I know that was your communication and I know that video can feel long to watch with the pauses, but that's the reality of it. You also see that the -- proximity available so the student knows she's there ready and listening. Oh, Okay. I'm going to keep it in this mode for just a moment so we can get to the next video. Another strategy we can tews with our early communicators is joint attention. And joint attention is usually around an object for something tangible and it's when we're recognizing what features a child is noticing and showing that we notice them, too. That we're sharing our attention on the interesting parts of what that child notices. (video playing, inaudible) And here again, that communication partner has the calm pace and wait time. She's very a tuned and noticing the child's reaction. Waits for the smell, just to know that she smelled by her smile and then is really creative in how she shows. Oh, I see you liked that feature, the scent. Look at me, noticing it too. You get the sense that this comes from having done this activity before and knowing that's a feature she liked and sharing it together. We often see reciprocal turn taking as a way to build early communication and this, we're going to start with a little bit more traditional, formal of an example in just a few quick seconds of this and then look at how it might be a little different for really early communicators or for somebody who is using more behaviors or movements as their form of communication >> HILARY HODES: Oh, sorry. Oh, dear. (video playing, inaudible) So, here we do see the child is using some more formal forms of communication, more traditional gestures, but, still engaged in that babbling. And the dad here is adding intention to that babbling, and showing oh, I see what you're trying to communicate, and eventually, over time, that can build more meaning and encourage that child to share their thoughts and ideas in more advanced ways along the way. And then our last example here, we see a young man with deaf-blindness. Repeat (video playing) And so there again, you see a communication partner who is really focused on noticing what the child is, or here, we have a young adult, is doing to communicate and building it into an interaction where it might have been just an activity for the child and for children who are really early communicators or who sometimes might seem like they're very involved in their own body and movements, this can be a way to turn some of that into communication, in terms of just the turn taking part of it. And especially with kids with combined vision and hearing loss, making this something that has that close proximity and give someone access in terms of had how others are involved in their world can be a strong foundation for early communication. And my guess is if there's some of us who have taken part in that kind of communication exchange, you've noticed that it has this really strong authenticity to it that can feel much more connected than even just a basic conversation and be such a powerful way to start to build communication with some of our early communicators. So, knowing that we only have an hour together, and knowing that this is again, just a brief snapshot of early communication in the beginning of a conversation rather than a whole component of it, I'm going to pause now and have a chance for questions from you guys or comments of what this might have looked like in your families or your work or any other ideas that you wanted to share with the group. So I'm going to, I don't know, Terry, at this point, I it turn it back over to you or we can just keep an eye on the chat box. I think if it's all right, I'm going to stop sharing my screen just to have a little better access to everyone. >> TERRY URBAN: Sure, and this is Terry here. We'll keep everyone muted so if everyone does want to take advantage of typing your question into the chat box, please go ahead and do that. Again, you can hover your mouse at the bottom of the screen and you'll see the little chat icon come up. We'll give it a few minutes there. It looks like Trisha has raised her hand. Go ahead, Trisha if you want to type your comment into the box or question. Okay. There we go. We have a comment. I have seen the video with the child and dad but it's such a -- to engage the children no matter what age or issues they may have. Thanks for a great presentation. Stay safe. Anyone else? This is Terry. Trisha, I see that you have your hand raised. I'm not sure -- >> HILARY HODES: Hi, this is Hilary. If she's phone he only, can we unmute for a moment? >> TERRY URBAN: Yeah, that's what I'm going to ask to, I just asked permission to show her video. And it looks like she's unmuted. We do have another comment. A therapist explained one time that every time you speak a request that it causes the child's brain to start trying to process over and over again not giving them the chance to fully process and react. I found it so helpful to think of like that. Thanks, Dawn. Tricia, you are unmuted if you want to go ahead and add something. >> Yes, I was having technical difficulties living in the very rural area that we're in and we're working from home. So, I missed the first part of the session and wanted to know if I could go back in and watch that to catch the first part of it. >> TERRY URBAN: Yes, this is Terry. Absolutely. We're recording this presentation right now and within about a week or so, we should be able to have it up on our website. Ira and Hilary, if you feel comfortable sharing your presentation with us, we can also upload that to our website. We also save the transcripts from the remotive conference captioning and we'll have that on our website as well. So, yes, you'll absolutely be able to access all of it. Just give us, be patient with us as we get it uploaded there. >> Thank you so much. This was also my first time using Zoom so I had to kind of work through it >> TERRY URBAN: This is Terry. We all are, we become experts as we go along, right? >> IRA PADHYE: So, Courtney had a question. Thank you for the information. A friend of mine has a braille teacher who is moving away, trouble founding a new one. She said it is easy to find ASL instructors but not braille. Do you have any tips of where to search? She is in another state, not Virginia. So, Courtney, I'm not sure if your friend is working with a student with deaf-blindness but part of our network, each state in the United States has a Deaf Blind Project. So I would recommend going, I'm going to type in the national DB.org which is our national center on deaf-blindness and it has a link to all of the state Deaf Blind Projects so she can contact that particular state Deaf Blind Project for some information on teachers for visually impaired or access to braille instruction. >> TERRY URBAN: Thanks, Ira. There's another comment up here. This is Terry. I'm supporting teacher teams that work with students with more significant disabilities. I have found success in helping them plan with anticipation, motivation, communication, and confirmation in mind as they plan. >> HILARY HODES: This is Hilary. Those are some great points and if you're ever looking for resources to share with those teams we do some great one around anticipation and anticipation calendars as well as just ways to think about preferences and communication as well. So, we hope you would share your resources with us and we're happy to share ours with you as well. >> TERRY URBAN: All right and this is Terry. It looks like there's another comment. The individual might also reach tout o AER in your region as they might have info for TBIs. Does anybody else have any questions or comments out there? That was great, Hilary and Ira. Very informative. I loved that slide with the pyramid that was a gangbang kind of affirmation of how children do learn best. >> HILARY HODES: Oh, sorry I was trying to share our contact information one more time and did I delete this. >> This is Terry again, another chat sent privately indicating that someone would love to have information regarding the anticipation, motivation and communication resources. Turn my video on. Hi, I'm Terry. Does anybody else have anything that they want to add? Thanks, ladies, good info. The pyramid slide was insightful. Stay safe. That seems to be the of tag line of the weeks here. Stay safe out there. All right. Well I'm going to go ahead and close but if anybody does have anything to add then by all means, please go ahead and add it to the chat. So, that will conclude our virtual learning opportunity today. Thanks again Hilary and Ira for sharing your time and your expertise with us and we'd like to thank, again, Lauren and Civic Access for providing us withvideo relay interpreting today and the Virginia department for the deaf and hard-of-hearing and it's Virginia relay for providing remote conference captioning through Hamilton relay. Lastly, I want to thank everyone for joining us today from across the Commonwealth in supporting Virginia Hands and Voices. I also wanted to add that next Wednesday, April 1st at 8:00 PM, we are hosting our first ever virtual happy hour for parents only to really just offer an hour of time for us to come together and to connect as a community and to spend some time with others than we are quarantined with. We certainly are looking forward to that here. You're welcome to bring your beverage of choice to join us. So, please, if you're a parent on this call, we'd love to have you and if you work with parents and you're on that call, please pass along information. There is no agenda for that meeting. We're just going to get together. We'll have our cameras on our cameras off if you prefer and just kind of talk about what's going on and how we best can support our children as they're isolated from their peers and their supports. That's it. Registration information can be found on our website and Facebook page and then going forward if there is a topic that you would like us to present on virtually, please let us know your idea. This is our fifth virtual learning idea we've come and they have all kind of come about as requests from parents and professionals across the state or agencies coming to us wanting to partner with us to help get their information out to everyone. So please if you have an idea and you think it's something that you would want us to present on, we would be more than happy to try and make it work and we would love to hear from you. And what else? I'm seeing something else in the chat. Can you send that to me to share with our families? Family happy hour. Yes, absolutely, Mary. I will share it with you after we hang up the phone so that concludes our presentation and thank you everyone for joining us and we look forward to connecting with us soon. To end on a positive note. The sun is shining. The birds are chiropractorring. The brass is -- chirping. The grass is turning green. There will be no snow this year but summer, spring is mere and I'm going to go find my children. Hopefully, they have not destroyed my house too much in the past hour that I've been on this call and I look forward to seeing everyone soon. So, thank you again for joining us. Have a good day. Have a good weekend. Take care.