



HEARING and VISION
CONNECTIONS

EARLY INTERVENTION TRAINING and TECHNICAL ASSISTANCE

A DTV is NOT a Vision Therapist

A DESCRIPTION OF THE PROBLEM:

Sometimes, DTVs are mistakenly called Vision Therapists rather than Developmental Therapists for Vision. A DTV is actually a Teacher for the Visually Impaired credentialed to work in the Illinois Early Intervention System. The term Vision Therapist means something specific in the vision community and it is ***not*** what DTVs are trained or credentialed to provide. The term Vision Therapy refers to services provided by a doctor and describes specific clinical procedures that are primarily provided by optometrists with a focus on a number of different visual problems. These problems could include inadequate accommodative or convergence ability, amblyopia, eye fixation inaccuracies, binocular coordination problems and combinations of the previous particularly in relation to their interference with visual reading and learning. Visual perceptual problems are also tested, analyzed, and treated when appropriate. Vision therapy is more focused on vision problems of children and adults who have normal acuity and field except in the case of amblyopia where acuity is decreased, but often in one eye only. Vision Therapy can be appropriate for some carefully identified children with vision impairment, but vision stimulation or eccentric viewing training are often more appropriate to those problems than vision therapy.

A DTV is ***not*** a Vision Therapist and ***does not*** provide Vision Therapy. Instead, a DTV focuses on infant and toddler development. Most people can easily imagine the difficulties in learning that might result from growing up with a vision loss. But many parents, early intervention providers, optometrists, and ophthalmologists are unaware of the existence of the educational services that a DTV is trained to provide.

A RESULT OF THE PROBLEM:

The misconception that DTVs are providing Vision Therapy services has a negative impact on children and their families.

Please do not use the term **Vision Therapist** when referring to a **DTV**. Instead, he/she should be described as the person on the team who provides for the developmental needs of children with diagnosed visual impairments. In the Illinois Early Intervention Services System that person is called a **Developmental Therapist for Vision**.

First, some optometrists and ophthalmologists may be reluctant to refer children for early intervention services, even when a child has a diagnosed visual impairment. DTVs are not trained to provide Vision Therapy services, and when an eye doctor misunderstands that this is the service that DTVs provide – then the doctor may encourage parents **not** to pursue early intervention DTV services.

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Second, when an optometrist or an ophthalmologist examines a child and determines a course of action related to a child's vision loss that **does not** include Vision Therapy services – that doctor may misunderstand the DTV's role and be upset to learn that the family's early intervention team is considering adding a DTV to the child's services. When, in fact, **educational** services related to vision loss make perfect sense for the child with low vision.

Third, families may receive conflicting information. Their early intervention team may encourage them to pursue DTV services (sometimes misnamed vision therapy) while their eye doctor may discourage DTV services (thinking vision therapy is being suggested). These parents, who are already in a tough situation, are asked to make decisions about their child in the midst of very confusing and conflicting information.

Fourth, DTVs are sometimes called into situations in which parents and doctors are confused and frustrated about the role of the DTV. DTVs must continually explain who they are and what they do so that their services are not mistakenly perceived as Vision Therapy services. Instead, DTVs work to address the developmental needs caused by diagnosed vision impairment.

Fifth, when confusion about the role of DTVs exists, DTVs may not get necessary information from the child's eye doctor. Since DTVs are **not** doctors, they rely on information from the doctor's examination to learn the extent of a child's visual loss and the long-term ramifications of the diagnosis. For example, if a child has a field loss as seen through an ophthalmologist's internal eye exam, the DTV needs to know this. It will dramatically impact the way in which information is presented to the child so that he can learn about his world and function safely within it. When DTVs, with parents' permission, request information from the doctor, that eye doctor is sometimes reluctant to provide the information to the non-medical person whom they mistakenly perceive as trying to provide a service they are not legally allowed to provide...that being the DTV.

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