



# Things to consider when supporting a Deaf-Blind individual during COVID-19

On July 1, Secretary of Health Dr. Rachel Levine signed an Order Requiring Universal Face Coverings. This Order has implications for service provision, especially for individuals with deaf-blindness. Some of the restrictions create barriers to communication and would impede effective supports for Deaf-Blind individuals. It is essential to remember that the needs of each individual must be considered separately. There will be no one-size-fits-all plan to support someone who is Deaf-Blind.

Here are some things to consider in your planning:



## The Individual's Awareness of COVID-19

- Are they aware of COVID-19?
- Do they have the information to make an informed choice to continue or pause a support service?



## Hand Washing and Hand Sanitizing

- What level of support is needed to perform these activities?
- Can handwashing be scheduled into their daily routine (such as before/after eating or before/after getting dressed for the day)?
- Are there specific activities, before and/or after, where hand washing makes sense (such as before/after using restroom or entering/leaving a room)?
- Are there certain scents to avoid or preferred soap scents?



## Minimize Touching of the Face

- Be aware that some sign language vocabulary normally makes contact with the face.
- Can the individual use modified signs or pictures/objects instead of the signs that would typically touch the face?
- Collaborate with the individual to develop modifications.



## Masks and Face Shields

- Can the individual tolerate wearing a mask and/or face shield?
- How long can they tolerate it? Would they benefit from a desensitization plan to tolerate a mask longer?
- Would it be beneficial for others to wear a clear face mask in order to see facial expressions? Be aware of glare and/or fogging issues that may impact visibility.



## The Individual's Hearing Loss

- Hearing loss is very individualized! Understand how it impacts the person and plan ways to make the most use of available hearing.
- Can the individual hear clearly from six feet away and still communicate effectively at this distance? (Remember that masking muffles sound.)
- Consider both receptive and expressive communication strategies from six feet.



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The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



## The Individual's Visual Impairment

- Visual impairment is very individualized! Understand how it impacts the person specifically and plan ways to make the most use of available vision.
- Can the individual see clearly from six feet away and still communicate effectively at this distance?
- Consider both receptive and expressive communication strategies from six feet.



## Tactile Signed Communication (if applicable)

- Consider if both communicators will be wearing gloves?
- Can the individual tolerate wearing gloves?
- Can the individual understand tactile communication received through gloved hands?
- If social distancing is not possible due to the individual's communication modality, can the number of people interacting closely with the individual be minimized?
- Can protocols for handwashing or using hand sanitizer be increased?



## Communication Supplements

- Are there creative ways to standardize some communicative interactions throughout the day to help minimize contact, such as an object or light cue (e.g. turning the light switch on and off to indicate a schedule change)?
- Can the individual learn these new cues?
- How will these new cues be taught to an individual? Repetition and consistency will be necessary.



## Medical Concerns

- Many Deaf-Blind individuals also have medical concerns and/or dual diagnoses.
- Is the individual considered high risk as indicated by the [CDC guidance](#)?



## Isolation

- Remember, Deaf-Blind individuals are at a greater risk of isolation. Isolation brings many concerns with it, such as deteriorating mental health, depression, confusion, regression of communication skills, Information Deprivation Trauma, and more. These are major concerns, especially during these times.
- Identify the activities that have the highest risk and determine ways to mitigate risk exposure in advance to ensure they are not isolated.
- Be proactive and consider a plan to address the risk of isolation.

Ultimately, we need to assure that individual's communication, choice, preferences, needs, and understanding of personal risk are balanced with concerns for safety.

For Deaf-Blindness 101 training, please click [HERE](#).



For further guidance and individualized support on things to consider in your planning, please contact the Office of Developmental Programs, Special Populations Unit at: [RA-ODPDeafServices@pa.gov](mailto:RA-ODPDeafServices@pa.gov)



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