

Assistive Technology Parent Support Guide for Early Intervention (Birth-3) Services

What is Assistive Technology?

Assistive technologies (AT) are tools that help a child do a developmentally appropriate task that he/she could not otherwise do. If a child has difficulty seeing, hearing, communicating, sitting, standing, moving around, playing or other age-appropriate activities due to the impacts of his/her disability, he/she may use AT to help make progress toward the goals on his/her IFSP.

What is the Purpose of Assistive Technology?

AT helps a child participate in everyday activities across domains that are developmentally appropriate. It does so by bypassing or ‘getting around’ the barriers that are preventing the child from engaging in those activities. The barriers may be as a result of the child’s disability or barriers in the environment. AT may be used on a short-term or long-term basis.

Why is Assistive Technology Important?

For very young children, AT can assist the child in participating in everyday activities to develop & learn through play & social interactions with peers and adults around them. AT helps to bridge the child or student’s abilities with the expectations of the activity; AT helps a child or student “do”, participate, build capacity, & engage in the world around them.

What are Examples of Assistive Technology?

Playing	Sitting, Lying, Standing, and Moving	Eating	Communicating	Reading	Writing, Drawing, Cutting, and Painting
<ul style="list-style-type: none"> ● Puzzles with adapted grips ● Switch adapted toys ● Switches ● Adapted playground equipment 	<ul style="list-style-type: none"> ● Adapted seats ● Wedges ● Walkers ● Wheelchairs ● Standers ● Go Baby Go Car 	<ul style="list-style-type: none"> ● Utensils with larger grips ● Bowls/Plates with suction cups and/or higher lips ● Nosey cups or sipper cups with adapted grips 	<ul style="list-style-type: none"> ● Picture communication boards ● Recordable voice output communication devices ● Computer voice communication devices 	<ul style="list-style-type: none"> ● Books with page-turning aids ● Tactile reinforced books ● Apps for stories with audio output 	<ul style="list-style-type: none"> ● Big crayons ● Adapted scissors ● Large grip paint brushes and markers ● Slant boards and easels ● Tactile coloring books
Sensory	Hearing	Seeing	Social Skills and Behavior	Dressing and Self-Care	Computer/Tablet Access
<ul style="list-style-type: none"> ● Noise-canceling headphones ● Weighted blankets ● Fidgets ● Mouthing Devices ● Rocking seats/swings 	<ul style="list-style-type: none"> ● Hearing aid loops ● FM systems 	<ul style="list-style-type: none"> ● Enlarged text/pictures ● Text/pictures with enhanced contrast 	<ul style="list-style-type: none"> ● Video models ● Social stories ● Visual schedules 	<ul style="list-style-type: none"> ● Larger grip zippers ● Adapted toothbrushes ● Adapted toilet seats 	<ul style="list-style-type: none"> ● Stylus for pointing/typing ● Mounts to hold tablet

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Stage	What happens during this stage?	Question I might ask
Thinking about AT Needs	This is the point in which the parents/caregivers and the team would be considering if AT is a possible solution for your child. Asking questions about if AT would be good to help your child move toward his/her IFSP outcomes and sharing your thoughts on the topic is highly encouraged.	<ul style="list-style-type: none"> ● What is assistive technology? How can it help my child? ● Does my child need Assistive Technology to participate in activities like other children his/her age? ● Are there activities that my child should be doing in which AT may help him/her be successful? ● I think my child has difficulty with (name an activity). How can AT help my child? ● How will we, as a team, make a decision if my child needs AT? ● If my child does need AT, what is the process for getting AT for my child?
My Child has AT, Now What?	When your child has AT, it is important that you, your family, and other members of the team know how to use the AT to help your child. The parents/caregivers and the team should be thinking about making sure everyone who is supporting your child has training, how to help your child succeed with the AT, and developing a plan to make sure the AT is working for your child.	<ul style="list-style-type: none"> ● How will I and my family learn how to use the AT? ● How will training be done for other people (e.g., special education teacher, therapists, child care providers) on the team to know how to use the AT? ● How do we help my child use the AT so that he/she is successful and makes progress toward the stated IFSP outcomes? ● Who should I contact if I can't get the AT to work properly? ● If the AT breaks but my child still needs it, who pays to fix it? ● What is the plan to make sure that the AT is working for my child? ● How are we going to measure my child's progress with the AT?
Transitioning from Part C to Part B Services	If your child moves from early intervention to special education services, thinking about how the AT moves with your child or what new AT will be needed is important. If your child needs AT and AT services, the parents/caregivers and the team must consider how to write those AT devices and AT services into the child's IEP to make sure he/she is successful in the new services.	<ul style="list-style-type: none"> ● We are using AT at home. What happens to this AT? Does the AT go to my child's school? ● How will the AT that the team has already identified that is needed for my child be written into my child's IEP? ● Are there additional or new AT tools/systems that are needed for my child in the new program? ● If my child needs AT in the new program, what is the plan for obtaining the AT? ● Who will train the new staff about my child's AT? ● If my child takes his device to school, what do we use at home?