



The Biloxi Breeze

Summer 2017



A Publication of the Gulf Coast Blind Rehabilitation Center
Gulf Coast Veterans Health Care System

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Mission Statement

The mission of Blind Rehabilitation is to provide instruction to Veterans and military personnel who are blind or visually impaired. The goal is to promote independence, self-care, and improve the overall quality of life.

Produced By

The Biloxi Breeze is a publication of the Gulf Coast Blind Rehabilitation Center (GCBRC).

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Gulf Coast Blind Rehabilitation Center:

Vision Statement

To help veterans and their families live more fulfilled and productive lives by providing the best rehabilitation experience possible. Veterans receive world class rehabilitation with access to the latest technology and proven techniques for living with vision loss surrounded by highly trained licensed and certified staff in a state of the art program.

Values

Integrity, Commitment,
Advocacy, Respect, Excellence

Characteristics: "I Aced It"

Integrated, Attentive,
Compassionate, Encouraging,
Diligent, Independent,
Trustworthy

Message from the Chief:



Hello, from the Gulf Coast Blind Rehabilitation Center (GCBRC)!! We are having a very busy year maintaining a full house of Veterans. Our occupancy rate has been over 99% so far. On the uSpeq survey that Veterans complete as they discharge from our program, we have a 96.6% satisfaction rate from our Veterans with 100% saying they would recommend us to a friend, our services enabled them to do things better, and that they were overall satisfied with the services received. We feel highly encouraged by these scores, and we are thrilled to be able to meet the needs of our Veterans.

Our internship program is growing by leaps and bounds. We have three interns with us this summer in the Orientation and Mobility (O&M) Department—Joanna, Lo Gayle, and Richard. In the Fall, we will have two interns in O&M and two in Living Skills with one staying on two complete a Vision Skills internship as well.

Our staff is also growing and changing. We have added a new face in O&M, Shelby Carroll, this spring. You will read about her in this issue. In the coming months, we will also be filling quite a few vacancies so that our staff is back where it needs to be. We are excited by the approvals to fill these spots and to see who all the new faces will be.

There is lots of information in this newsletter and some fun pictures from community outings. Enjoy! Keep in touch!

*Debra Gilley, M.Ed., COMS, CLVT
Chief, Gulf Coast Blind
Rehabilitation Center*

Featured Staff:



Shelby



Deanna

Orientation and Mobility Specialist: Shelby Carroll

Shelby is our newest Certified Orientation and Mobility Specialist here at the GCBRC. Shelby was born and raised in Decatur Alabama until she attended college at Auburn University where she received her Bachelor's Degree in Rehabilitation and Disability Studies. Shelby then went on to attend the University of Arkansas at Little Rock where she received her Master's Degree in Orientation and Mobility Studies. Shelby was a previous intern of the GCBRC in

the fall of 2016. She loved the work she was doing, her fellow co-workers, and most of all, the veterans. Shelby started working at the GCBRC April 17, 2017. Shelby has always loved the ocean and the beaches so she was more than excited to be able to move down to the coast. She is excited to begin her new adventure and cannot wait to see what Biloxi has in store for her!

Manual Skills Specialist:

Deanna Morehead

Deanna Morehead moved to the Biloxi area from Birmingham, Alabama. She studied psychology and education and earned her Master's Degree through the University of Alabama at Birmingham. After graduating she was a lead teacher in Alabama for several years ensuring a quality education for 5th- 8th grade

exceptional education students. Deanna also served as a Math teacher and the Orientation and Mobility Specialist for the schools in her county.

Passionate about working with the visually impaired population, the move to Biloxi was a natural fit. Deanna began working at the Gulf Coast Blind Rehabilitation Center in August of 2012 as an Orientation and Mobility Specialist. Two years later, she transitioned to the Manual Skills Department where she is better able to employ her skill set.

In her free time, she enjoys cooking, studying and using homeopathic remedies, spending quality time with family, and attending church. Grateful for an amazing group of neighborhood friends, Deanna and her family make sure that new residents are welcomed and made to feel part of the community.

Manual Skills Update

*Deanna Morehead, M.Ed., COMS,
Manual Skills Specialist*

Yes!! Spring is here and the garden is blooming in our courtyard. Our weather has been mild and the Veterans have enjoyed getting out for our monthly CBI trips. As usual, we have been very busy in the Manual Skills shop making a variety of projects from leather, copper, wood and ceramics and having a wonderful time in the process. Last quarter's Manual Skills section of our newsletter dealt with the science and the more serious side of what we do and, I must say, Dan did a marvelous job of explaining what Manual Skills is and the important purpose it serves. My focus will be on the creative and social aspects, and my intention is to give a personal perspective with our Veterans being highlighted. I'll leave off the

names to protect the innocent – you know who you are!

Some Veterans come into Manual Skills uncertain and somewhat stressed because they are new to the Blind Rehab and do not know what to expect. Humor and stories help them feel more at ease and enjoy the journey while they learn. I'll always remember a certain Veteran who was so tightly wound that he was literally shaking every day when he came to my class. Turns out, he was putting a great deal of pressure on himself to learn everything he could as quickly as he could. Stress hinders learning. So, every day we would breathe deeply, slow down the speech rate, put things back into perspective, and laugh a lot. He enjoyed manual skills and made a variety of projects. I believe that he took away much more than some leather projects. He told me later that he really

looked forward to coming to class because it helped him with his entire program.

Another Veteran is like everyone's favorite uncle. He has attended the GCBRC several times to continuously learn new skills, and we all look forward to working with him. I don't believe I've ever met a man who is as polite and kind. He is encouraging, uplifting and kind to all. He helps make new Veterans feel at home from the moment they arrive and offers up sound and helpful advice in a non-domineering, humble manner. It has been my privilege to work with him as a manual skills instructor as well as a Mobility instructor. He tells me that he loves manual skills because he can make things with his hands and enjoy good company at the same time.

We get our share of Veterans who love to give us a hard time and keep us on our toes, too.

The challenge is to reassure these Veterans that we are here to serve and do our best to help them improve their quality of their life. Not everyone understands this from day one. I enjoy earning trust, developing lasting friendships, and working with our Veterans every day. Manual Skills provides the atmosphere to learn new skills and have a GREAT time doing it!! Looking forward to seeing you again if you have new skills you want to learn!!

OCR Options

*Robin Kelley Sniffen, M.Ed.,
COMS, CATs Specialist*

Many visual and non-visual readers can benefit from OCR software. OCR stands for Optical Character Recognition. It may sound like science fiction, but this software can take a picture of a magazine or other print and turn it into readable text you can

edit or access with your screen reader. This is a game-changer for our Veterans who are totally blind but can also benefit many Veterans with low vision. There are many options available. Specialists from the Visual Skills, Living Skills, and CATs Departments work with our Veterans to determine which OCR device, if any, are appropriate. Here are a few different devices we commonly issue. Check them out!

Standalone devices:

The Eye-Pal is a stationary, standalone device that does not require a computer to work. To operate the machine, you simply place your document onto the base of the device and the camera on the arm takes a picture. The device will start reading automatically, and you can control the speech with a few simple buttons. It is not portable and it does not save the text, but it is very user friendly.

Computer software:

All the computers we issue have some sort of OCR software. Chrome computers have an OCR built into Google Docs that can be set up and utilized. Windows and Mac computers use the IRIS OCR that comes with the printer/scanner we issue. Both the OCRs work very well. With a little setup, you can scan books, magazines, bills, and other text on your scanner and have the computer read to you. This can be extremely helpful with long documents or on "bad eye days". Eyestrain can shorten reasonable long term reading time and having the computer read the text may help you avoid headaches. You can also edit the text or share it with someone else.

Smartphone and tablet apps:

As we see a shift towards more and more portable devices and

fewer full computer systems, OCR software such as the KNFB reader is becoming more popular. Using the camera on your iPhone or iPad, you can take a picture of text and have your device read to you. These apps take some practice, especially for non-visual users. You need to line your camera up correctly and get a good picture of the text so your device can read to you properly. The text can still be edited, read, and shared. Plus, you have portability!

Glasses-mounted OCR devices:

These devices are still in the development phase and certainly have some quirks to work out. One OCR we have worked with is called the OrCam. It mounts to your glasses and can read text when you control it with hand gestures or by pressing a button on the controller. These devices are

still a little cumbersome--requiring a wire from your glasses to your pocket--but some users are finding them helpful.

As we see technology grow and develop, we look forward to more user-friendly and well-integrated OCR devices and software. Right now, these devices cannot read handwriting (only printed text), and some are very complex. Talk to your specialists about these devices, and we can find out if one of them is appropriate for you!

Assistive Technology Currently Offered

*Tim Sniffen, COMS
CATs Specialist*

Apple iPhone 6s and 6s Plus

The iPhone is by far the most popular technology we and other Blind Rehabilitation Centers (BRCs) currently offer. We don't issue the iPhone 7 or 7

Plus for two reasons. First, and most importantly, the iPhone 7 series does away with the standard headphone jack and comes with earbuds that plug into the Lightning power jack. We feel that standard earbuds or other headphones offer more and better choices for our users. Second, the iPhone 7 series does away with the physical home button at the bottom of the screen. There is still a home button, but it doesn't push in the way the home button does on all previous versions of the iPhone, and it throws many blind users for a loop. We don't feel the iPhone 7 offers substantive benefits over the iPhone 6s, but we will re-evaluate our practices when the new iPhone comes out this fall.

The iPhone is a full computer in compact size. We often issue a bluetooth keyboard, a 27 inch monitor, and either an HDMI

cable and Apple adaptor or the Apple TV with the iPhone for those who can benefit from the size of a traditional monitor. With these add-ons, your iPhone can take the place of a traditional computer at home. There is nothing you can do on a traditional computer that you can't do on an iPhone with the proper add-ons, and you may benefit from learning only one device that can be used in different ways for different circumstances.

Apple iPad Pro 9.7 inch Model

We current issue the iPad Pro to Veterans who can benefit from a larger screen than the iPhone offers or who don't want to pay a monthly carrier fee for an iPhone. The external keyboard, monitor and Apple TV or cable are also offered to iPad users if they plan to use their iPad as their main computer. If you cannot see the screen, then there is no benefit of using both

an iPhone and an iPad, since they both offer the same experience other than screen size and the ability to make calls or send text messages to non-Apple mobile phones.

These two Apple devices - the iPhone and iPad - offer the easiest, most accessible, and the most adaptable computing experiences on the market. We highly recommend that you start there and see if one or both of these devices don't meet all your computing needs.

Android Phones

None of the VA Blind Rehabilitation Centers issue Android phones such as the Samsung Galaxy series and other models. First off, there are many different Android phones, and it would be very difficult for instructors to keep up with the unique features each model offers. More importantly, Android's screen reader, called

Talkback, is nowhere near as easy to use or reliable as VoiceOver on the iPhone, even though it sometimes offers better feedback than VoiceOver when items on the screen update or change. Google has made great progress improving Talkback and other accessibility features in Android, and we will continue to assess developments.

Some of our Veterans come to us having already purchased an Android phone. We are open to training them to use the accessibility features on their phones if that is what they prefer, but we are not ready to commit to issuing these phones from Prosthetics Service.

Chromebooks and Chromebase Desktops

Some people want a more keyboard-based traditional laptop or desktop experience

than the iPhone or iPad offer with full desktop web pages instead of streamlined mobile web sites and more traditional word processors. For years that has meant moving on to a Windows or Macintosh computer. But now there is a simpler solution. Computers that run Google's Chrome OS software turn on in seconds and jump right to the web browser, where most people spend most of their time on traditional computers. Webmail applications such as Gmail, Yahoo Mail, and Microsoft Outlook Mail are now full featured and fully compatible with Chrome OS's screen reader, called ChromeVox. Additionally, Chrome OS offers a built-in magnifier and inverse video.

The all-in-one desktop model we offer comes with the same 23 inch touch screen found in the Windows computers we issue, so

you can “pinch to zoom” just like on a Windows computer or iPad. Chrome OS computers are immune to viruses because they cannot run executable programs. They update often and quickly with no need for you to do anything, and they are easy to reset and recover everything in under a minute should the need ever arise. Chromebook and Chromebase computers currently represent the best solution for most users who feel more comfortable with a more traditional laptop or desktop system than the iPhone or iPad with add-ons provide.

Macintosh Computers

We offer the 27 inch iMac all-in-one desktop or the 13 inch MacBook Air to those who can benefit. Many people assume that the Macintosh is the logical step up from the iPhone or iPad. It is true that they have the same set of basic applications and

offer VoiceOver and Zoom, but there is a big caveat. VoiceOver on the Mac is much more complicated than VoiceOver on the iPhone, and the Pages word processor and other productivity software is far more complicated to use than comparable word processors, spreadsheets and presentation programs on the Chromebook. There is a lot more to learn to successfully use a Macintosh computer, and we’ve had several students who were used to the iPhone or Windows struggle a great deal trying to learn the Macintosh, and some have given up and returned to what they are using. If you have the ability, need and desire to master the power of the Macintosh, then we will work with you to achieve your goals. We issue many Macintosh computers and envision doing so in the future. Like the iPhone or iPad, the Mac offers superb dictation with screen reader

feedback and also offers the ability to open application, click menus or buttons, and even web links using voice commands. If you need voice control and accessible voice dictation, we will steer you toward the Macintosh over Windows.

Windows 10 Computers

Windows is in transition. No computing platform has changed so much in the last several years, and traditional accessibility software such as Zoomtext or JAWS has not caught up with all the changes. The new software that Microsoft places front and center - their new Mail program, their Edge web browser, News app, Weather app and other programs are either inaccessible with Zoomtext or JAWS or work poorly with them. It's just hard to get a screen reader to read the information you want to hear and know is there in front of you. If you are content to use

Internet Explorer and Microsoft Office, then the older accessibility options continue to work, but you can't entirely avoid the newer apps and system tools, and there is so much new to learn that many former Windows users have transitioned to Chrome OS or the Macintosh.

That said, Windows' built-in screen reader, called Narrator, and its built-in Magnifier work in all the new apps, but Microsoft encourages you to avoid some of them. Like Talkback on Android phones, the Narrator screen reader is just not as easy to use or as reliable as VoiceOver or ChromeVox. Many users find it unsatisfactory.

Microsoft is committed to improving its built-in accessibility tools and will need to do so because they are releasing a new version of Windows 10 for

schools and home use called Windows 10S to compete with Chrome OS, which has taken over the education market in America. The new version of Windows will only run apps that are available in the Windows store, and all indications are that it will not run third-party accessibility tools such as Zoomtext or JAWS, which require deep-level access to the operating system. Windows 10S should be much more reliable than traditional Windows and much less susceptible to viruses and malware attacks. We will look at Windows 10s and the updated versions of Narrator and Magnifier when they are released in the fall.

Safety Tips When Cutting

*Lorrie Bowen, CVRT
Supervisor, Living Skills/Vision Skills*

“I didn’t know I cut myself!”

That is a statement that you may have said to yourself at one time or another. Sometimes individuals who experience low vision may not be comfortable using a knife or they may have received training and feel comfortable with a knife. Regardless, what happens when people with low vision cuts themselves and they don’t realize it? A common fear of working in the kitchen is getting cut. Although it rarely happens, but it does occur. Don’t feel like you are alone if you get cut, because it happens to everyone at some point in time. The difference is a sighted person can see the cut whereas a visually impaired person may not be able to see that there is one.

So, I would like to share some basic safety techniques when using knives in the kitchen. Knives can cut you and that is a fact, whether they’re sharp or

dull. They will cut. If some of your knives are dull, they need to be re-sharpened. Please place them in a container until you can get them sharpened. Dull knives are more dangerous than sharp knives because they are harder to control. If you do not have a Knife Sharpener Sharpening system, you might want to consider purchasing a Knife Sharpener Sharpening System. You can purchase one online at Walmart.com or Amazon.com. Very sharp knives also can easily cut skin. You also want to keep them in a safe place when you are not using them. It is just as important to be careful when you are using a sharp knife. The number rule that I always tell my Veterans, never cut anything while holding it in your hand. Always use either a cutting board or a flat surface of some kind when cutting, slicing, dicing, or peeling.

Here are some techniques that you may find helpful to use:

- On your cutting board, slice the food or vegetable in half and lay one piece at a time flat. Keep your fingers curled under and hold the food item with your curled fingers. Begin slicing the food item. For every slice, move the hand away from the knife. Continue until the item is fully sliced.
- When chopping, use a cutting board. Place food on flat side. Place your free hand on top of the other hand that is holding the knife, press downward in smooth even strokes, shifting the knife forward. Lift the blade back up and repeat until the item is chopped. It is important to be extra careful with your fingers because of the knife is moving fast.
- When using a peeler rather than a knife, always peel away

from you in a downward motion onto the cutting board, As you are peeling, rotate the food item around to ensure you are removing the skin. If you must use a knife, wear Cut Resistant Gloves. When using a knife, hold food item at a 45-degree angle, as you are peeling, use the rotating method, peeling away from your body. Once you have completed the peeling, remove the gloves and check the food with your finger tip to feel if it is smooth and well peeled.

Knife Injuries during Food

Preparation:

No matter how careful you are in cutting, slicing, or peeling, there are no guarantees that you won't cut yourself. Getting a cut in the kitchen is both the worst and best place to break skin. Worst, because uncooked food is nearly always covered in

bacteria. Best because soap and water are nearby. If you cut yourself during food preparation, infection is your worst enemy. Soap and water are all you need to clean a wound, even a wound covered in bacteria.

Whether it's an emergency or not will depend on how long, how deep, and where the cut is, located. You will want to follow these guidelines:

If it is an Emergency:

- Finger cuts are almost never life-threatening. When talking about emergencies at the finger level, we are more worried about loss of function or the loss of an entire finger. Large cuts across the palm, for example, or cutting off multiple fingers do have the potential of being deadly. If the bleeding is severe, then immediately take the steps to control bleeding and call (911) or get to an Emergency Room.

If it is not an Emergency:

- Wash with soap and water.
- Encourage the blood to ooze out of the cut for a few minutes. As long as the blood isn't pouring out like a garden hose, then you should squeeze out a little extra. Blood oozing from the inside to the outside helps to flush out any bacteria that can cause infection.
- Control bleeding. Make sure to wash the cut first. You don't want to wash the site after you stop the bleeding, because that will wash away the covering that is starting to form and start the bleeding over again.
- Once the bleeding has stopped and the wound is clean, you can dress it with an adhesive bandage. After you bandage it, place a glove on the hand if you are still preparing food.

- Don't put any antibiotic ointments or creams until you are done preparing food in the kitchen.

Always check your hands after you have cut, slice, and or peel something. If you have cut yourself, you will feel the blood. If you ever feel like you have cut yourself, stop and take care of your cut immediately

Finally, I would like to list kitchen aids and accessories you may want to consider adding to your kitchen collection. If you have attended the GCBRC program, you may have already received some of these items. If not, when you come for training you will receive adaptive kitchen aids if cooking is one of your goals.

- Low Vision Cutting Board- Black/White- made of sturdy plastic, easy to hold, works great with contrast, and easy to clean.

- Low Vision Cutting Board- Black- A great choice for the low vision, arthritic and one handed. Holds securely to your kitchen countertop with 4 suction cups. Textured surface with Stainless Steel corner plate holds food in place for safety and ease of use while cutting.
- H.E.L.P. Magic Slicing Knife- Right or Left Hand-H.E.L.P. Magic Slicing Knife with ergonomic handle for both right-handed and left-handed people with dexterity issues. This dexterity aid features a serrated stainless steel blade, with adjustable guide that makes it easier and safer to use.
- Cut Resistant Gloves by FORTEM- 2 PAIRS-Durable cut resistant gloves, made with the highest level (5 cut, chop, and laceration

protection material to protect your hands in variety of cutting tasks.

- Super Chop Kitchen Tool and Cutting Aid- Immediate chopping prevents loss of juices. Safe and quick and easy action within confined area. Easy to clean.
- If you don't have knife sharpener kit, Amazon and Walmart have various kits. Just online and visit their web-site.

Enjoy cooking but be safe and always remember, never cut anything in your hand. Always think safety and be safe. Until next time, have fun in the kitchen!!!!!!!

Information for this article came from the following web sources:
Knives and Cutting Accessories
Knife Skills: The 4 Knife Cuts
Every Cook Should Know

How to Use Kitchen Knives Safely-Dummies
In a pickle: What to do if you cut yourself in the kitchen

Where Are Your Filters?

*Lorrie Bowen, CVRT
Supervisor, Living Skills/Vision Skills*

So many times, I ask that questions when I don't see Veterans wearing their filters. As the supervisor of Low Vision, I often see not only my Veterans but others not wearing their filters when they are indoors or outdoors. One day, I found myself asking, what do Veterans do with their filters once they return home? Do they understand why it's important to wear filters both indoors and outdoors? Are they still having problems with glare and lighting and feel that the filters aren't working and just don't want to say anything? Or, do they just

put them down not realizing the importance of wearing the filters?

Well, I wanted to do an article for this Newsletter sharing with you the importance of wearing your filters. I know most of you have been through our Low Vision program and received basic training including how to take care of your filters. So, I am not going to talk a lot about filters, but I want to give some tips about why you should wear filters and not leave them in boxes collecting dust.

How can filters and tints help?

Low Vision filters are specially developed tints designed to enhance vision for individuals with low vision. The inability of the eyes to deliver the appropriate level of contrast can often make reading, walking and other daily activities difficult. When I discuss filters, I often say to my Veterans "are you able to

visually see your surrounding area, is the lighting causing glare, are you are walking, is lighting good or not”.

For Indoor Evaluations, I have my Veterans try on various filters and walk around the Center including their bedrooms, laundry room, dining room, training classrooms, hallways, and front lobby area. Why? Those are areas in which the Veterans will be most of the time. It is important that the filters they select meet their needs in reducing glare and lighting and that they will be able to safely mobilize within the Center.

For Outdoor Evaluations, once again, I have my Veterans try on various filters and walk around outside in bright sunlight and shaded areas. I asked “are the filters able to block the bright sun, is it reducing glare?” I

observe my Veterans walking away from the sun or into a shaded area. Do they feel safe in moving in various areas?

Choosing a Filter for You

While attending our program, your Low Vision Specialist reviewed the various filters for both indoors and outdoors— their functions including visual clarity, comfort and protection. I just want to review these quickly and discuss the variety of colors for indoors and outdoors. For indoors the colors that are most helpful are:

- Yellow: enhances contrast in low vision, improve visual acuity, and enhancement with glare reduction.
- Orange: Intensifies backgrounds, increases contrast and great for reading.
- Light Amber: Heightens contrast for indoor use, help

with overcast days, and sensitivity to indoor light.

- Light Grey: Relieves indoor glare, helps under fluorescent lighting.

For outdoors, the colors that are most helpful:

- Plum: Contrast enhancement and glare relief for the light sensitive and sunshine light.
- Medium & Dark Gray: Comfortable color for extreme light sensitivity. It also will cut the glare.
- Grey-Green: Glare protection with low visible light transmission.
- Med Grey –Green: All-purpose sunglass and glare reduction.

Finally, make sure you clean your filters with a soft cloth and warm soap water. Dry with a soft, clean cloth to prevent scratches. Always store your filters in the case that it was provided to you when you received them. Over

times, filters may get scratches. If so, please notify your VIST Coordinator and a new pair can be ordered.

It is very important that you wear your filters--both indoors and outdoors--so you can get the maximum benefit from your remaining vision.

Information for this article came from the following web sources: EyeHow –What to Know About Low Vision Filters and Tints Sunglasses –Wikipedia Eschenbach Optik of America, INC. www.MaxiAids.com

Golden Age Games

*Robin Riley, COMS
Orientation & Mobility Specialist*

Veterans from all over the country flooded the Biloxi area during the dates of May 7-11. They were here for the National Veterans Golden Age Games.

These games are held once a year in a different host city each time and are open to Veterans who are 55 years and older. Biloxi was lucky enough to be the host city this year. Veterans participated in a variety of sports including track and field, swimming, horseshoes, table tennis, archery, air rifle, and many more. There was one event that many of our staff got to play a role in as volunteers was an exhibition game of Blind Disc Golf. If you aren't familiar with disc golf, the jargon is similar to that of golf: you "tee off," each throw counts as a "stroke," each hole has a "par," etc. Instead of hitting a ball with a club, you stand at the tee and throw a disc. The goal at each hole is to get the disc in a basket, instead of a hole on a green. For the Blind Disc Golf event, beepers were attached to the discs as well as to the baskets. This allowed the Veterans with

visual impairments to locate their discs, and to also have a sound reference to know where to throw/aim the disc. We were blessed with beautiful weather for the event, and the Veterans who participated thoroughly enjoyed the experience.

Recreation- It's More Than Just Games

Kaitlin Borri, CTRS

Recreation Therapist

When you hear the word "recreation", what do you think of? Games? Exercise? Art? What about the word "leisure"? Do you think of relaxing? Reading? Recreation and leisure encompass so much more than simply the activities you do during your free time! Those activities say a lot about you-- maybe more than you realize. Sure, they say what types of activities you enjoy (crafts, board games, music, etc.), but it goes

deeper than that. Leisure will show whether you are more right brained or left brained, whether you lean more toward being introverted or extroverted, whether you enjoy exercising your body or your brain more, and so on.

Recreation and leisure at the GCBRC is so much more than just playing games or exercising. Regardless of the activities, there are multiple goals and objectives being met. In other words, there are many benefits to leisure. Most activities work to enhance fine and gross motor skills, visual scanning skills, as well as provide other physical, mental, and emotional benefits. There are many positive cognitive and attitudinal benefits recreation has on your brain. For example, remembering the rules to certain activities or strategizing to win a game are commonly needed while

recreating. Studies show that people who take time for leisure are typically happier people and tend to enjoy life a little more than those who do not.

Remember that saying, “All work and no play makes Jack a dull boy”?” Well, it’s true! If a person does nothing but work, they will eventually wear themselves out. This can leave them feeling dull, depressed, anxious, or with a myriad of other feelings.

So what happens when you feel as though you cannot enjoy leisure like you once did? There are many modifications or adaptations that can be done to almost any activity which will allow you participate in activities you once enjoyed! You can also learn new activities as well--even ones you think you will have no interest in. You never know what you will enjoy until you try it. Take up a new hobby. Never stop enjoying leisure or

recreation. Your body and mind will thank you for it!

Reaping the Benefits of Produce

*Jane Osowski, PhD, RD
GCBRC Dietitian*

Summer. It's one of my favorite times of the year. It brings back memories of carefree, lazy days, spending time outside on the farm. It was also a time that I helped my mother in the garden. We planted vegetables as soon as we could in the spring so we could enjoy them all summer long. Our garden was filled with sweet peas, sweet corn, tomatoes, onions, carrots, beets, green beans, lettuce, watermelon, squash and potatoes to name a few. Perhaps helping in the garden was when my interest in eating healthy started.

Fruits and vegetables provide many health benefits.

- Most are naturally ***low in fat and calories***.
- They are important sources of ***potassium*** which may help maintain healthy blood pressure, reduce the risk of developing kidney stones and help decrease bone loss. Fruits sources include bananas, prunes and prune juice, dried peaches and apricots, cantaloupe, honeydew melon and orange juice. Vegetable sources include sweet potatoes, white potatoes, white beans, tomato products, beet greens, lima beans, spinach and kidney beans.
- They are sources of ***dietary fiber*** which may help reduce blood cholesterol levels and may lower risk of heart disease. Fiber containing foods also help provide the feeling of fullness with fewer calories and may help prevent obesity and Type II diabetes.

Fiber is essential for proper bowel function, helping to reduce constipation and diverticulosis. Remember, whole or cup-up fruits and vegetables are sources of fiber, but not the juices made from fruits or vegetables.

- They are an important source of ***vitamin C***. This nutrient is essential for growth and repair of all body tissues, helps heal cuts and wounds and keeps teeth and gums healthy. Vitamin C also helps with iron absorption.
- They are important sources of ***folate (folic acid)*** which helps the body form red blood cells.
- A diet rich in fruits and vegetables as a part of an overall healthy diet may reduce the risk for heart disease, including a heart attack and stroke, and may protect against certain types of cancers.

With the abundance of produce available in the summer, eating a variety of vegetables and fruits can be easier. Experts recommend consuming 2.5-3 cups vegetables and 2 cups fruits daily for an overall healthy diet. The good news is that all types of produce counts, which includes fresh, frozen or canned. Here are some tips to help you make the best choices.

Look for vegetables or fruits that are in season. They may be less expensive and at their peak flavor. Stop by a farmers' market. The vendors may have some new recipes for ways to enjoy the produce.

Frozen fruits and vegetable are healthy options. They are picked at the peak of ripeness and then flash frozen to preserve the most nutrition.

Some frozen vegetables contain added sauces and seasonings.

Watch for sodium content and choose the product with the least amount of sodium.

Canned fruits and vegetables are convenient to keep in your pantry.

Watch for sodium which is usually added to preserve them. Look for low-sodium, reduced sodium or no-salt-added foods. Drain and rinse canned vegetables to reduce sodium even more.

Watch for added sugar. Fruits canned in water, 100% juice or light syrup are a better choice.

As part of an overall healthy diet try to include several different colors and types of fruits and vegetables to ensure you are consuming a variety of nutrients.

Information adapted from USD ChooseMyPlate.gov and The American Heart Association

Social Work Corner: Grieving

*E. William M. Nail, Jr., LMSW
GCBRC Social Worker*

As you continue to move forward and cope with your vision loss, remember it is not only a loss to you, but to your family and friends as well. It is important to remember the five stages of grief and loss. Stage 1 is denial. Stage 2 is anger. Stage 3 is bargaining. Stage 4 is depression. Stage 5 is acceptance. It is important to understand these stages and know you can revisit stages even after you have gone through them. Once you have a good understanding of grief and loss you will be one step closer to a happier and more fulfilled life.

Grieving is a part of life, but life does move on.

Food for thought: a man is not measured by how far he falls, but how high he bounces back up once he hits bottom.

Relaxation Response (RR): Evidenced Based Practices to Reduce Stress and Anxiety

Sharon Moody, M.A.

Psychology Intern

Living with visual impairments and learning to navigate the world around you can be stressful, potentially frightening, and even anxiety provoking. You may have already begun to experience the world differently relying on intuition and your heightened sense of smell, sound, taste, and touch to navigate within your environment. In the early stages

of adjusting to living with visual impairments, anxiety, fear, and stress are likely magnified. This is not unusual. As a result, you may experience what is called the “fight, flight, or freeze” response, which occurs in threatening or feared situations. It is our body’s natural alarm system that alerts and prepares us to physically and mentally respond to danger. When this system is activated, our breathing and heart rate increases, pupils dilate, awareness heighten, impulses quicken, and perception of pain diminishes. In addition, our muscles and limbs are fueled by increased blood flow to provide energy to fight or run, and our immune system is activated for mobility. The body provides us with everything we need to increase our chance of survival.

However, what we know through research is that our

fight-flight-freeze response can also be activated in times of stress. The experience of multiple stressors over time can cause this system to become sensitive, thus increasing the likelihood of it malfunctioning. Imagine if your home security system alerted you every time your air/heating unit turned on or there was a strong wind. This would probably become annoying and exhausting. It also will likely prompt you to contact a technician to recalibrate your security system so that it only alerts you when there is a threat (e.g., intruder breaking into your home). Our body's natural alarm system response to stress is similar.

Our flight-fight-freeze response is activated due to stress and it alerts and prepares our body to respond in non-threatening situations. This increases the release of stress hormones (e.g., cortisol) and over time can

become problematic. There is overwhelming evidence that high levels of stress hormones released in the body can cause numerous health problems (e.g., headaches, hypertension, sleep disorders, anxiety, etc.). When our body's natural alarm system (fight-flight-freeze response) malfunctions, we need to recalibrate the system. One of the most important tools we can use to do this is called the Relaxation Response (RR). When we are stressed, anxious, and overwhelmed a little R&R is just the right prescription.

So, what is the Relaxation Response?

- Relaxation Response (RR) is our body's way of countering stress. Specifically, there are areas of the brain (e.g., hypothalamus and amygdala) activated in times of extreme stress, threat, or danger. When the threat is over or

neutralized, our bodies need to return to its natural state (e.g., homeostasis) and often do so on its own. RR is a way we can learn to communicate with our body to give it permission to relax. The RR can be helpful in a variety of situations including managing stress and anxiety associated with chronic pain, illnesses, and medical conditions.

- There is a large body of research that shows that engaging in techniques that elicit a relaxation response for 10-15 minutes a day can significantly improve quality of life. Eliciting a relaxation response can decrease pain, increase energy and motivation, decrease irritability, improve sleep, enhance productivity, lower blood pressure, lower stress hormones, improve decision

making ability, reduce fatigue, and decrease anxiety.

- The Relaxation Response (RR) is probably one of the easiest and most important skills you can learn to regain control over your body. It is a powerful defense against anxiety, stress, and depression. There are several techniques that produce a RR including: *Progressive Muscle Relaxation (PMR), Body Scan, Meditation, Hypnosis, Yoga, Tai Chi, Biofeedback, and Deep Breathing*. The next section will focus on deep breathing (also referred to as diaphragmatic breathing).

When we experience stress, our breathing becomes shallow and rapid, making it difficult to relax and wind down. Deep breathing is a simple and automatic technique that helps produce a calming and relaxing state. The uniqueness of this skill is its

utility. It can be used any time, place, or situation with minimal preparation. It immediately produces benefits and allows you to achieve RR. The focus of this intervention is deep, slow, even breaths. For your daily prescription of RR, follow the instructions below.

- Inhale through the nose slowly and deeply for approximately 4-5 seconds and hold for 1-2 seconds.
- Make sure that the stomach and abdomen expand, but the chest does not rise.
- Exhale through the nose, slowly and completely, also for 4-5 seconds and hold 1-2 seconds.
- To help quiet the mind, concentrate on breathing and counting through each cycle.
- Repeat 5 to 10 times, and make a habit of doing the exercise several times each

day, even when not feeling stressed.

Creating Healthy Habits:

Remember, as with any new skill, regular practice is key so that in times of distress the application of that skill is easy and familiar.

From the Front Desk: Are Manners Important?

Janetta M. Bibbs-Williams
MSA Clerk

Thank you. You're welcome.
Please. Yes, ma'am. No, sir.

Each of those statements were pleasantries that once upon a time were literally as common as a cold. But just like anything else, time brings about changes and not always in a good way. We've begun to take so many shortcuts with everyday civilities that now it seems society, as a whole, has sometimes run out of simple kindness.

For every charity that has been created to ease suffering, a new way to cause pain becomes apparent. We turn on the news or read the media and know that bullying is everywhere and not just among children. So, I want more focus on the beauty of the world I know. We need to get back to caring about our fellow man.

The old saying is true that we never know what another person is going through so: Be kind. Take the time to really count your own blessings. Studies show that reflecting on what is happening that is good in your life will help change your perspective and decrease your negativity. So don't waste your time on disrespect or malicious gossip. The same time you have to misbehave can be used to smile and bid someone "Have a good day" or, even better, ask them how they are doing and establish a relationship.

Are manners important? You bet they are, and we need to

practice them 24/7 (and NOT just with people who are friends). Thank you and come see me at my desk.

Letter from a Veteran to his VIST Coordinator

I've just finished the six-week "Dual Course" at the VA Blind Rehabilitation Center in Biloxi, MS and want to share my thoughts about this wonderful program and to thank you for sending me. I hope all the eligible Vets under your care are able to go.

Most first time Vets, like me, take the six-week dual course. This combines computer training with basic blind rehab training. However, each Vet is evaluated to ensure that his or her individual training needs and goals are met. All training is "one-on-one" so each Vet learns

at his or her own pace. No one is left behind. And all the teachers really care about making a difference in the lives of the Vets they train.

Computer training includes learning the voice-over commands for a smart phone and a tablet; and, in some cases, the voice-over commands for a desktop computer. Some Vets are issued smart phones or tablets or computers. Once the basics are down, “reader” programs can be installed on these computer devices that will read a document to the Vet when necessary. Although I still have some vision in my right eye, having my phone read my email is a big help. Also, I know that if my vision gets worse, I’ll still be able to stay in touch with family and friends by dictating email and having their replies read to me.

Basic blind rehab includes training in manual skills, a kind of crafting course in which Vets learn to make leather projects or copper art projects or wood shop projects. For me, training in this sort of crafting was a great benefit. I had thought that my hand-work days were over. Now, I know that, with the right lighting and some patience, I can still make things with my hands.

After manual skills comes living skills. Here, one learns to navigate the kitchen, the laundry room and, for me, the keyboard. For the first time in 71 years, this half-blind old man learned to iron a shirt, sew on a button and cook with instruments that talked back (my talking thermometer.). I can now sort my socks with a small device which tells me the color of the object at which I am pointing. I still have to wash my own dishes, however.

After living skills comes mobility. Here, I learned the basics of the long cane and how to navigate lighted intersections, escalators, sidewalks, gravel roads and stairs. It was good to get out in the sunshine and have a nice walk, again.

Finally, we come to visual skills. Here, I learned to use magnifying devices. For me this was very important since I still have some sight. What I learned, as in manual skills, was that there was a way to do the things I had always done. I just had to learn the new way and have the patience to practice the new way until I got good at it.

Marilynn, this short note is growing whiskers. Nevertheless, I would be remiss were I not to mention the accommodations at the BRC. Each of us was assigned a private room with

bath. Really comfortable. We were served three meals a day, according to our health needs. I got the diabetic diet, of course, but the food was good and in abundance. The VA campus also has its own snack bar and exchange for those who need sundries or have the munchies. There are protestant and catholic services on Sundays and organized trips to Walmart each week for those with more particular needs. I found that, despite my daughter's best efforts, there were gaps in my inventory. The Walmart trips were essential. It was also possible to organize a ride over to Keesler Air Force Base to visit the BX (about as large as Walmart). No one could say that that there was something he or she needed, but couldn't get. Also, there were trips to the beach and other local points of interest. There was even a pier behind the BRC where Vets

could fish with rods and reels furnished by the Bait Shack. We had a fish fry week cooked by the Vets in living skills that was outstanding!

Marilynn, all eligible Vets should go to the BRC in Biloxi. This BRC is the finest healthcare facility of any kind that I have ever experienced. The staff is totally devoted to helping blind and low-vision Vets to rejoin the world. I feel like a person again.

Regards,
Lafayette Lou

Chaplain's Thoughts

Chaplain W. Lance Hoggatt

Have you ever fallen down?
Sometimes it seems to me that life is knocking me down and that I fall more than I stand. Confucius said "Our greatest glory is not never falling, but rising every time we fall." I was thinking about life's falling down moments as I recently

celebrated my daughter's seventeenth birthday. I began to reflect on the number of times I had felt anxious and worried over her last seventeen years. My daughter was born in Spokane, Washington and, before she was a year old, I moved her cross country to Enid, Oklahoma. When she was four years old, I moved her again to Washington, D.C. and then one short year later moved her to Altus, Oklahoma. Then in rapid successions were moves to Boston, England, and home to Mississippi. Along the way there were soccer games, track meets, doctor visits, meetings with teachers, father-daughter dates, and many falling down moments. The question that consumes my thoughts is where has the time gone?

I remember Dr. Seuss' profound words in his book *Oh, the Places You'll Go!* Dr. Seuss writes "If

things start happening, don't worry, don't stew, just go right along and you'll start happening too." Many times over the past seventeen years I have had fallen down and missed life happening.

I am also reminded that every day is a gift from God.

Oftentimes within our family there were anxious times but I always tried to stand on the promise of Matthew 6:34: "Therefore do not worry about tomorrow, for tomorrow will worry about itself. Each day has enough trouble of its own." These are hard words to live by when storms come into our life, but they are true words that

stand the test of even a hurricane force storm.

I encourage each of us to reflect upon our life and the inevitable march of days with its falling down moments. Don't live anxious and worried; keep moving forward one step at a time, and watch life unfold around you.

PHOTOS



Group photo from United States Marine, Inc

COMMUNITY BASED INSTRUCTION (CBI)



All Decked Out!



Group Picture from Mardi Gras



Group at National Seashore Park Nature Walk



Fishing on CBI



Using Monoculars



More Fishing!!!



VIST Support Groups

Pensacola, Fla., VIST Support Group

1 p.m. on the first Tuesday of each month. For additional information contact Scott Turner, VIST Coordinator, at (850) 912-2552.

Biloxi, Miss., VIST Support Group

10 a.m. on the third Thursday of each month in the GCBRC Dining Room.

Mobile, Ala., VIST Support Group

10 a.m. on the second Wednesday of each month in the sixth floor group room.

For additional information on the Biloxi and Mobile support groups, contact, VIST Coordinator, at (228) 385-6762.

Know Your VIST Coordinator

The Visual Impairment Service Team Coordinators are your case managers for blind rehabilitation care and services and your first contact when you need to enroll or apply for a program. Whether it be your first admission to the BRC, a special program to meet unique needs or a refresher program, these representatives are important to your success. The following is the current updated list for the South Central VA Health Care Network VIST Coordinators.

VIST COORDINATOR	LOCATION
Adrienne Thompson (713) 791-1414 ext. 25398	Michael E. DeBakey VAMC 2002 Holcombe Blvd. (580/112-C VISOR) Houston, TX 77030
Marcia Echavarria (713)791-1414 ext. 25327	Michael E. DeBakey VAMC 2002 Holcombe Blvd. (580/112-C VISOR) Houston, TX 77030

Harold Miller (601) 364-1551	G.V. (Sonny) Montgomery VA Medical Center 1500 E. Woodrow Wilson Dr. Jackson, MS 39216
Kara Aaron (501) 257-5070	John L. McClellan Memorial Veterans Hospital Central Arkansas Veterans Health Care System 4300 West 7th St. Little Rock, AR 72205-5484
Latrice Reaves 1-800-935-8387 ext. 7214 or 2671	Southeast Louisiana Veterans Health Care System 1515 Poydras St., Suite 650 New Orleans, LA 70112
Scott Turner (850) 912-2552 ext. 32552	Gulf Coast Veterans Health Care System Joint Ambulatory Care Center Pensacola, Florida
Vacant-Contact Scott Turner above	Gulf Coast Veterans Health Care System 400 Veterans Ave. (124) Biloxi, MS 39531
Marilyn Murray (318) 473-0010 ext. 1+2047	Alexandria VA Medical Center P. O. Box 69004 Alexandria, LA 71306
Melanie Shurden (601) 364-7937	G.V. (Sonny) Montgomery VAMC 1500 E. Woodrow Wilson Dr. Jackson, MS 39216
Paula Ellington (479) 443-4301 ext. 65364	Fayetteville VAMC 1100 N. College Ave. Fayetteville, AR 72703
Broderick Burks (318) 990-4839	Overton Brooks VAMC 510 E. Stoner Ave. Shreveport, LA 71101

GCBRC Biloxi Breeze

Gulf Coast Veterans Health Care System
400 Veterans Ave. (124)

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PART 135**