That’s How I Roll!

Rolling is a big step in human sensory development as a child builds an internal sense of their body and how they can move to achieve a goal. Here’s why this skill is important.

- Rolling over is the first time babies experience independent mobility. It also prepares them for movement milestones to come.
- Rolling over helps babies strengthen muscles that are necessary for other movements, like pulling themselves up.
- Rolling over helps develop two important senses: vestibular (balance) and proprioceptive (body awareness).

Rolling over is harder for a child who is blind or has low vision. It is more difficult for a child with a visual impairment to know that a toy or object exists when it’s out of reach and out of sight. Rolling is an awesome way to practice object permanence via touch or low vision.

A child with a visual impairment doesn’t have the typical motivators that create curiosity. They need environmental adaptations that match their unique curiosity style.

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And finally, it is more difficult for a child with a visual impairment to transition from a static position because “in-between positions” provide less comfort and are physically complicated.

**Duration**

This activity will take 5 to 10 minutes depending on your child’s mood and interest.

**Materials Required**

- Sofa, couch cushion, pillow, or beanbag (a preferred, familiar object that works for your family). This lateral surface will act as a landmark.

- A safe, comfortable area on the floor near your landmark

- An object cue, such as a blanket

**Activity Steps**

1. Do this activity with your motor therapist and your Early Intervention Teacher of the Visually Impaired (EI-TVI) present the first time so that you can work together to share special knowledge: What are your child’s current movement goals? What are your child’s muscle tone, motor strengths, and limitations? What special techniques help your child with low vision or blindness learn?

2. Go to a safe, comfortable area in your home. Decide on a landmark like a sofa, couch cushion, pillow, or beanbag (a preferred, familiar object that works for your family) so that one leg and hand can be in contact with the side of that landmark in the starting position. That way the child isn’t just out in space with only one surface underneath. Having two surfaces – the floor and your landmark -- builds security. The child can roll out and then come back to their connected space.

3. Prepare your child for the activity using a clear beginning. Hug your child and say, “You are going to lie on the floor now.” If your child uses object cues, show them the blanket before you put your child down on it.

4. Place your child on her back in contact with the landmark. Take a moment to “greet” the two surfaces while you say their names, “Hi, floor,” (patting it) and “Hi, couch,” (patting it). This gives a fun way to label the floor and the couch. In the next step, we say goodbye to the couch as we roll away.

5. Use a language cue and a touch cue to start the rolling. An example is to touch your child’s hip (the one closest to the landmark) and say, “We’re going to roll!” or “Goodbye, couch!”
6. Use the strategies to support rolling that the motor therapist is bringing to the team.

7. Allow your child to roll half-way or the entire way and then give a preferred reward like kisses, a song to comfort or praise, a bowl for echo vocalization, or a lighted toy. Go very s-l-o-w-l-y during this part so that your child has time to adjust and initiate.

8. Use a language cue and auditory cue to prepare your child for the end of the rolling routine. You can scratch or tap the couch and say, “There’s the couch, you go get it!”

9. Refer to the motor therapist for the best way to initiate the roll back.

10. Finish the activity by sharing your joy. “Hooray! You did it!”

11. Allow your child to take a break and have some down time. End the activity before the child is exhausted. This is a lot of work physically for the body and mentally for risk taking. You have given your child a positive physical and mental experience.

**Tips**

- Consider dimming the overhead lights so that they don’t glare in your child’s eyes. This will also reduce distraction. Also, shut off the TV and other auditory clutter.

- Take your time during this activity. This will prevent scary feelings. Going slower feels safer when you have low vision. We are building confidence and trust in movement. The couch is a safe space, and then the child takes a risk and moves out. Then the child moves back to the safe space.

- You can put your child’s favorite blanket on the couch, pillow, or beanbag if your child responds well to the sound or the texture of the fabric.

- Caregivers can try doing this activity themselves. Lie on your back and roll out in space and then try it when you are next to a landmark. Did you feel safer and more confident in one place over the other? What does it sound/feel like when someone else pats the floor as you lie on it? When someone else pats/scratches the couch?
Extension Activities

- Play rolling games like “Ten in the Bed.” “There were ten in the bed and the little one said, ‘Roll over! Roll over!’ There were nine in the bed and the little one said, ‘Roll over! Roll over!’” etc.

- You can also read the book, Roll Over!

- Talk about other objects that roll. Balls roll, the dog or cat rolls over when it plays, the wheels on a car or truck roll. Things in your house might roll up or down, like a window shade. A tortilla rolls up into a burrito. How do you roll?

- Look for cues that the child is not comfortable with rolling—crying, fear, resistance and/or stiffness. If you see that the child isn’t quite ready, try these pre-roller activities to give the idea of moving from one position to another:
  
  o Lay them next to a physio ball. Play drum games on it. Next, let them be under the ball. Roll it gently back and forth on their belly. Often, they will experiment with making it move by cupping it with their legs and arms.

  o Then, try sharing the experience of rolling on top of the ball. Put them on your lap and gently roll from side to side.

  o Place them on a blanket and lift the sides inches off the ground in a supported roll where they feel hugged, but also roll a bit to the side. Swinging in a blanket is also helpful for pre-rolling or a reward for rolling.

  o Have the caregiver hold the child on his/her lap. Have the caregiver move back and forth or up and down gently while singing a movement song and predictable words. This is roughhousing with love.