DEAF AND HARD OF HEARING

Characteristics

Children with hearing loss are often not identified. When a child is profoundly deaf they are easily identifiable. Most children with hearing loss are not deaf but have some usable hearing. Frequently their speech and ability to function in the classroom does not reveal the problems their hearing causes. As you become more familiar with the student, you may begin to notice some of the characteristics listed below.

These students may:

- Have headaches / dizziness or tugs at ear
- Omit / substitute some speech sounds
- Speak too loudly or too softly
- Mispronounce common words
- Request repetition frequently
- Lack confidence
- Frequently watch others before beginning task
- Make mistakes following oral directions
- Give inappropriate or irrelevant answers
- Seem to work below potential and show "gaps" in learning
- Seem socially immature, impulsive, disorganized
- Be inattentive, impatient, irritable or edgy
- Appear constantly tired
- Have language and vocabulary delays; may not know common words, idioms, expressions, syntax; may omit word endings
- Have difficulty with time concepts and math abstraction
- Lack general information
- Have auditory memory problems

- Have difficulty with reasoning (cause / effect, judgments, inferences) due to lack of language experience
- Have difficulty with word attack (sound symbol associations, phonics)

A Sensori-neural hearing loss is a permanent hearing loss related to damage to the inner ear.

A Conductive hearing loss is usually temporary but can still have serious effects on language, speech, learning, and social skills. This may be related to ear infections, colds or fluid in the ears.

If you think one of your students has a hearing loss ask the school based team to refer the child to the hearing resource teacher.

Instructional Strategies

- Preferential seating, taking into account the configuration of the hearing loss (eg. better ear) and location in the classroom, including good visibility of the speaker's face
- Use of a personal or classroom FM system if recommended, checking daily for optimum functioning and battery status
- Written back up of oral directions
- Electronic notes or photocopy another student's notes, or teacher notes
- Allow extra time to write, finish, or retake tests or labs
- Avoid use of oral tests or audio files whenever possible
- Use close captioned videos whenever possible
- Use visual cues (eg. overheads, graphic website organizers, pictures, diagrams, outlines, charts)

- Wait time of 4 seconds for processing oral information
- Ask "wh" questions - avoid "yes / no" questions when checking for comprehension

Behavioural Strategies

- Pair a student with a buddy to clarify assignments and information, including PA announcements
- Never turn away or speak from behind the student
- One speaker at a time and identify ahead of time if possible
- Provide a daily schedule of class routine
- Avoid surprises
- Alternate instruction time with other activities to give a rest from "straining" to hear
- Reduce noise level (eg. classroom management, use of silent overheads, carpeting, cover chair feet - tennis balls / felt chair slides)

Provide sign language or oral interpreters if needed

VISUAL IMPAIRMENT

Raj is a grade 4 student. He has had a loss of visual acuity over the summer and cannot see the board, read small print, maps or diagrams. He is very disruptive in class, frequently talking to other students and interrupting lessons. Prior to his vision loss, he was exceeding expectations in all subject areas. He had many friends. Currently, he is struggling to keep up with his work.

Students with low vision have a great deal of difficulty adjusting to vision loss. All tasks take more time and effort. Students fatigue quickly, get frustrated and anger readily. They cannot easily locate friends or access information that is readily available to their peers.

Needs

- Difficulty seeing the blackboard, clock, overhead projector or any materials that are posted around the classroom
- When reading most print materials may need optical devices or large print
- May have some difficulty with drawing diagrams, printing on worksheets, and working with maps and other visual materials
- May need better lighting to reduce glare or lower lighting for light sensitivity
- May need additional time to complete tasks in the time allotted
- Will need consideration to adapt the PE programs
- May need visual breaks due to eye strain or visual fatigue

- May miss non verbal cues which require some peer intervention strategies

Visual Adaptations

Goal: to provide visual access to materials that the low vision student cannot easily see.

- Each student's vision is unique; what works for one person will not necessarily work for another - consult with your Vision Resource Teacher in order to provide optimum conditions to meet the needs of the student
- Provide preferential seating for all activities to enable the student to read near and far materials
- Whiteboards are best; use black or blue markers, green and red are very difficult to see
- If you do not have a whiteboard, use white chalk on a very clean chalkboard; yellow chalk on a dusty board is virtual invisible to a student with low vision
- Overhead projectors are hard to see due to glare
- Give students individual copies of all overhead materials and those that are posted around the classroom i.e. schedules, class rules
- Provide optimum lighting
- Avoid glare: windows, laminated materials, etc.
- Provide adequate desk and shelf space for student books and equipment; the student will likely require special equipment and materials such as a slantboard, computer, magnifying equipment, large print books, etc.

The behaviour of students with low vision may lead many people to underestimate their abilities. They can participate in almost all activities with their peers (with adaptations). Common behaviours include: not appearing to make eye contact; speaking out at inappropriate times; missing social cues (especially body

language and facial expressions); difficulty focusing on lessons, and seatwork, etc.

Grief and anger surface as students try to cope with new activities and become more aware of the impact of their visual impairment. For example, learning that driving a car will never be possible can affect mood, ability to learn, and social interactions.

Instructional Strategies

- Optimum print size and font should be determined by you Vision Resource Teacher (VRT), use a clean font (i.e. Arial) for creating worksheets, avoid fancy fonts as they are very hard to read
- High contrast materials are best (black print on a white background)
- Some students are colour blind - ensure that your student can see the colours you are using
- Student and teacher may need to use dark pens or pencils to write, dark-lined writing paper may help
- Avoid poor quality photocopies
- Provide clean, uncluttered diagrams and worksheets, crowded words and letters are very difficult to read
- Worksheets laid out in a linear fashion are best; avoid complicated webs
- Leave enough space for the student to write (printing is typically quite large and does not improve significantly for most low vision students)
- Worksheets may need to be enlarged
- Large print textbooks and novels can be ordered (please give the VRT as much notice as possible)
- Some students do well with magnifiers and some do not, many require special equipment
- Students with low vision typically have difficulty with organizing materials, homework etc.

- Allow more time to complete tasks
- Frequent short breaks are required to minimize visual fatigue and lower instances of "meltdown" due to frustration
- Reduced quantity of work is acceptable as long as the student demonstrates mastery of concepts (need to have the same expectations and consequences as other students in the classroom)

Note: The vision of every student is different. Strategies listed here may not work well with every low vision student. There are additional strategies - consult your friendly local VRT.

MODERATE INTELLECTUAL DISABILITY

Elementary - Beth is a student with moderate intellectual disabilities. She is in Mr. Harrison's Grade 6 class, but is functioning 5 years below grade level. Sharing with another student, Beth receives CEA support. Beth participates in group activities with her peers whenever possible. She has binders of independent work at her own ability level which have been provided by the Classroom Teacher and Resource Teacher. Beth counts to 20, but cannot do basic addition and subtraction facts. She knows the alphabet song but does not know letter sounds. Beth can identify 1/2 of the alphabet letters in isolation. She can print her name and is learning her home phone number. Beth receives reinforcement for working hard.

Studies show literacy learning is a developmental process and skills will continue to be acquired as students are ready for them.

Instructional Considerations

- Maintain high expectations
- Provide many opportunities for varied experiences and instruction
- Teach functional life skills
- Use concrete language
- Use visual strategies i.e. Picture symbols, PEC (Picture Exchange Communication), visual schedules, sign language, gestures
- Teach in small manageable chunks, with lots of repetition
- Differentiate expectations for assignment completion
- Simplify learning tasks

Behavioural Considerations

- May be easily frustrated when level of work is too difficult or have difficulty understanding what is being asked
- May use behaviour to communicate needs and wants
- May display behaviours typical of much younger children (i.e. difficulty sharing, temper tantrums)
- May have difficulty understanding social interactions with peers
- May have a range of interests similar to those of much younger children
- May respond well to reinforcement programs
- May find transitions difficult

Secondary - Cody is a Grade 12 student with Down Syndrome Articulation problems make him difficult to understand and he sometimes uses sign language or pictures to communicate. His is well liked in the school. Cody is working on an Evergreen School Completion Certificate. His program includes an IEP with Transition goals. He works in the school cafeteria, and store and two blocks of community work experience. Cody attends regular Drama classes, and has 3 blocks in the learning centre. In his community placements, he has a Certified Education Assistant to support him but is able to work independently in school work placements. He has learned to take public transit. School staff are working with Community Living BC on post secondary plans.

Instructional Strategies

- Teach functional life skills
- Curriculum is based on IEP goals
- Development of literacy skills
- Program may include functional academic skills (i.e. time, money) that are practiced in natural settings i.e. shopping, taking transit

- Small group instruction for social skills (i.e. Circles Program)
- Career development and work experience opportunities
- Structured routine environments

Behavioural Strategies

- Reinforcement program (i.e. contracts, token economy)
- Clear and consistent rules
- Opportunity for frequent structured breaks
- Teach relaxation techniques
- Social Stories
- Have peers model appropriate social behaviour
- Provide warnings prior to transitions

PHYSICAL DISABILITY

Sandeep is a grade seven student enrolled in Mr. Sparks class. She uses a wheelchair independently. Sandeep has some weakness in her hands so writing is slow and awkward. She is working at the grade seven academic level and is a very capable writer when she uses voice activated software. Sandeep is a good friend to many in the classroom. Her speech can be difficult to understand but she is quite articulate once you figure out what she is saying.

She has a Certified Educational Assistant (CEA) to help her use the washroom, scribe for her ideas and help her manage her books and materials.

Characteristics

- Unable to use parts of their bodies
- May tire easily due to muscle fatigue or pain
- May have difficulty writing due to physical challenge
- Often have difficulty participating in PE without adaptations
- May require additional time to complete academic tasks
- May have difficulty speaking due to impaired oral motor control
- May require physical assistance (including use of washroom)
- May have difficulty swallowing and/or eating
- May be on medication to control symptoms or pain
- Impaired mobility
- Disability may require that the student take breaks from the regular classroom routine
- Disability may be "invisible" but may impact attention and mood

Examples of "Invisible" & "Visible" Physical Disabilities

"Invisible" Physical Disabilities

- Diabetes: mood swings because of fluctuations in glucose levels
- Epilepsy: lack of concentration or retention because of small repeated seizures
- Arthritis/Neurofibromyalgia: fatigue and lack of concentration because of pain
- Asthma: fear and/or anxiety because of shortness of breath
- Brain Injury: compromised memory and/or judgment

"Visible" Physical Disabilities

- Cerebral Palsy/Spina Bifida: fatigue, physical discomfort, poor concentration because of physical positioning in a wheelchair
- Tourette Syndrome: anxiety, embarrassment and fatigue because of motor and visual tics

Cal is a grade 10 student who was born with a disability that caused his arms and legs to remain undeveloped. He walks with crutches. With much effort Cal has learned to use his feet as secondary hands and is able to complete most activities independently. At school Cal attends classes with his peers; he is of average intellectual ability. As he cannot write to take notes, Cal gets his notes from his teacher and tapes his classes to listen to later. Cal requires a scribe fro written assignments in class; for assignments he uses his voice activated computer. He is fiercely independent so he does not like getting assistance from an education assistant.

Instructional/Behavioral Considerations

- Students may have reduced self esteem due to physical disability
- Educate peers on the nature of the disability and how they can assist
- Encourage friendships and allow students time with their peers without adult interaction
- Maintain behavioural expectations whenever appropriate
- Encourage independence
- Some students are very angry due to their physical disability and may benefit from counseling
- Some nonverbal students will use loud vocalization to communicate
- Some students have periodic visits from Physical Therapists and Occupational Therapists
- Some physically disabled students require preferential seating and require extra space due to equipment

Ministry Designations

119 Dependent (Level 1 Funding)

A Physically Dependent
B Deaf/Blind

118 Low Incidence (Level 2 Funding)

C Moderate to Profound Intellectual Disability
D Physical Disability or Chronic Health Impairment
E Visual Impairment
F Deaf or Hard of Hearing
G Autism Spectrum Disorder

H 116 Intensive Behaviour Intervention/Serious Mental Illness (Level 3 Funding)

117 High Incidence (Included in the Per Student Allocation)

K Mild Intellectual Disability
Q Learning Disability
R Moderate Behaviour Support/Mental Illness

P 132 Gifted (Included in the Per Student Allocation)

Case Management

Category
Case Managers

A Physically Dependent
Resource Teachers

B Deaf/Blind
Hearing/Vision Teachers

C Moderate to Profound Intellectual Disability
Resource Teachers

D Physical Disabilities or Chronic Health Impairment Resource Teachers

E Visual Impairment
Vision Teachers

F Deaf or Hard of Hearing
Teachers of DHH

G Autism Spectrum Disorder
Resource Teachers

H Intensive Behaviour Intervention/Serious Mental
Secondary/Elementary
____Illness
Counsellors/Behaviour
_____
____Specialist

K Mild Intellectual Disability Resource Teachers

Q Learning Disability
Learning Assistance
_____
____Teachers

R Moderate Behaviour Support/Mental Illness
Secondary/Elementary

____Counsellors

P Gifted
Learning Assistance

____Teachers/School

____assigned staff

____

HEALTH ISSUES

In your class you may have a student with health issues.

Health Issues:

AIDS (Acquired Immunodeficiency Syndrome) - Is a disease caused by the human immunodeficiency virus (HIV). the HIV virus attacks and gradually damages the body's immune system, its natural ability to fight illness, leaving it open to serious infections and cancer. AIDS represents the symptomatic phase seen in the later stages of HIV disease. To develop an appropriate plan, refer to school district policy for universal precautions.

Cancer - The term cancer refers to a collection of diseases that have in common uncontrolled cell growth and the ability to invade the body. This ability to invade and destroy the normal tissue or body organ means that cancer is fatal if left unchecked. The type of cancer and its severity will determine the treatment provided. Primary treatment options usually consist of a combination of medication, radiation therapy, and surgery. Because of the treatment, side effects, or complications of the cancer, the child with cancer may have frequent absences from school and periodic hospitalizations. In some cases, cancer treatment may result in difficulties with learning and behaviour.

Diabetes - This results from the failure of the pancreas to produce the hormone insulin. Without insulin, the body does not absorb sugar in food, either through a shortage of insulin or because the insulin produced does not work effectively. The supply of insulin in the body may be stimulated by oral

medication or be replaced by injection. Diabetes can not be cured, but it can be controlled through planned eating, insulin supplementation, and regular physical activity.

Support: Students with Type 1 diabetes on insulin pumps may be supported until they are developmentally ready to manage their pump. Most Students are managing their diabetes by Grade 5.

Epilepsy - is a general term for more than 20 different types of seizure disorders. Epilepsy is not a disease, nor is it a mental disorder. The number of seizures per day varies greatly from one individual to another. Some children may experience seizures daily while other children may experience them occasionally. Some childhood seizure disorders are more difficult to control than others, but chances are good that prescribed medicine will work well if it is taken regularly. Seizures may last from 10 seconds to five minutes.

Support: If a students seizures are well controlled they will not necessarily be identified as a student with special needs. In cases where seizures are not well controlled, their learning may be impaired.

Severe Allergies - An allergy is an overreaction in the body to a usually harmless substance. The most common allergies are to pollen, dust, insect bites, moulds, nuts and a variety of foods. Symptoms such as sneezing, runny nose, hives, itchy eyes and wheezing may be associated with allergic reactions. Anaphylactic shock is a severe allergic reaction. The public health nurse will train the staff on the use of any medical procedures necessary. The information will be noted on a student's medical alert form. Check the

District and school policy and procedures for severe allergies.

ABC's of Support

Support may be provided by the School District Nursing Support Coordinator. Depending on student needs, the Nursing Support Coordinator will determine whether or not a Care Plan needs to be put in place.

There are two basic levels of care that the Nursing Support Program addresses:

Level 1 Care - Personal care for feeding, dressing, toileting and mobility. A CEA may provide this service.

Level II Care - Implementation and supervision of health procedures necessary while a child is in school. Certified educational assistants are provided student-specific training on any procedures required.

Level III Care - Provision of nursing or rehabilitative services for those more specialized procedures which require it. Nurses support any medical needs.

For more information refer to the following Internet Resources:

Awareness of Students with Diverse Learning Needs, What the Teacher Needs to Know, Volume 1. Ministry of Education Special Education Resource Guide. Contains information intended to assist classroom teachers in understanding the implications for classroom instruction and management of a number of chronic health conditions. http://www.bced.gov.bc.ca/specialed/awareness/

Awareness of Students with Diverse Learning Needs, What the Teacher Needs to Know, Volume 2. BC Ministry of Education Special Education Resource Guide. Companion to Volume 1, this resource contains information intended to assist classroom teachers in understanding the implications for classroom instruction and management of a number of chronic health conditions. http://www.bced.gov.bc.ca/specialed/awareness/awareness_v2.pdf

INTENSIVE BEHAVIOUR CHALLENGES OR SERIOUS MENTAL ILLNESS

Support/interventions such as:

- School-based counselling/assessments
- Ongoing, individual interventions and/or instruction in social skills
- Behavioural and learning strategies
- Instructional focus on motivational and behaviour management skills; i.e. communication, cooperative and collaborative skills
- Referrals to outside agencies providing clinical and family support around mental health
- Integrated community team planning

Some students have serious mental health conditions which have been diagnosed by a qualified mental health clinician, a registered psychologist, a psychiatrist or physician. Interventions require coordinated, cross-agency community planning such as care teams (integrated case management) or 'wrap-around' planning.

Characteristics

These students:

- Are very vulnerable, fragile students who are seriously 'at risk'
- Have antisocial, extremely disruptive behaviour in most environments (for example, classroom, school, family and the community)
- Display profound withdrawal or other negative internalizing behaviours

- Display behaviours that significantly interfere with the student's academic progress and that of other students
- Display these behaviours consistently/persistently over time

FETAL ALCOHOL SPECTRUM DISORDER

The intellectual abilities of students with FASD can vary greatly - from severe/profound intellectual disability to gifted. The majority of students with FASD have average to low average intellectual ability.

Characteristics

May have difficulties with:

- Generalizing information
- Memory
- Sequencing
- Abstracting

Language development:

- Difficulties with Central Auditory Processing
- May have problems with comprehension, discrimination and association, sequencing and memory

Social/emotional functioning:

- Students with FASD may display a variety of atypical responses to unfamiliar or frustrating situations
- Increases anxiety may result in withdrawal, outbursts or other acting out behaviours that may be harmful to the student or others in the group
- They may be over or under sensitive
- A young child with FASD may have severe temper tantrums and find it hard to adjust to change

- Many students with FASD are prone to depression, poor judgment and impulsivity

Physical functioning:

- May present with some or many physical/medical concerns such as heart murmurs/defects, craniofacial defects, spina bifida, brain defects, eye problems and more

There are 4 diagnostic categories which FASD covers:

- Fetal Alcohol Syndrome (FAS)
- Partial Fetal Alcohol Syndrome (PFAS)
- Alcohol Related Neurodevelopmental Disorder (ARND)
- Alcohol Related Birth Defects (ARBD)

Behavioural Considerations

- Memory difficulties
- Slow auditory processing
- Dysmaturity, act 'young' for their age
- Difficulty predicting outcomes
- Impulsivity
- Easily manipulated
- Difficulty making friends
- Short attention span
- May be unable to wait their turn
- May not perceive social cues from others
- May become quickly frustrated with school work and may become easily overwhelmed

Other challenges or conditions commonly observed in children with FASD include:

- Learning Disabilities (LD)
- Attention Deficit/Hyperactivity Disorder (AD/HD)
- Anxiety
- Behaviour challenges
- Drug and alcohol problems
- Mental health problems

Behavioural Strategies

- Remember - It is not that the student "won't" do the assigned task or behaviour, it is that he or she "can't" do it.
- Change environment
- Provide supervision
- Provide structure
- Model appropriate behaviour
- Teach the use of self talk to help stay focused
- Use a quiet area
- Provide frequent breaks

ATTENTIONAL DIFFICULTIES

Jeff is in the grade eight program. He is very active in class, engaging in lively discussions with his teachers and peers; he is liked by all. However, during times of direct instruction, Jeff is often distracted and can be found either doodling on his desk or trying to engage his peers in talking. He often misses the content of lessons and can be found trying to figure out the expectations for assigned work. His teachers complain that his assignments are usually messy, disorganized, and frequently off topic. Often Jeff does not hand in any assignments. Even Jeff's PE teacher is frustrated as Jeff cannot seem to remain still long enough to listen to the rules of games played in class. Every time a staff member speaks to Jeff about his off-task behaviour he says that he is aware of the concern and will try harder in the future.

Instructional Strategies:

Predictability:

- Develop or access prior knowledge
- Preteach, reteach and review (both behaviour and academic) especially at pre-break times
- Show an example of the finished project

Organization:

- Provide charts and diagrams to present and represent information
- Provide organizational structures such as folders, colour-coded files, etc.
- Reduce the amount of work
- Provide a study guide for the lesson
- Guided note taking (direct instruction)
- Unclutter the page

Learning Style/Assessment:

- Allow for variety of ways to represent learning
- Provide alternatives to writing
- Assess learning in a variety of ways
- Use plain language

STUDENTS WITH AUTISM SPECTRUM DISORDER

Greg is a Grade 9 student with Autism Spectrum Disorder. He likes his daily routines and is resistant to change. He has difficulty making transitions from one subject to another. Although he is very chatty and sociable with adults, he has difficulty interacting with his peers and making friends. Greg is able to meet grade level outcomes with adaptations and will graduate with a Dogwood. Greg has strong computer skills and an interest in mechanical things. He requires 1-2 blocks of homework support.

Tracy is a student with Asperger's Syndrome. She is enrolled in Mrs. Black's Grade 4 class. Tracy requires prompting to start work. She has very few friends and is awkward with peers. Academically she has difficulty generating her own ideas, but given facts, can complete assignments. When Tracy is overwhelmed she requires a quiet place to regroup. She really likes horses and loves to speak at length about them.

Students with Autism Spectrum Disorder (ASD) may include: Autism, Asperger's Syndrome,Pervasive Developmental Disorders (PDD), Rett's Syndrome, Childhood Disintegrative Disorder.

Characteristics

- Difficulty developing peer relationships appropriate to developmental level
- Lack of social or emotional reciprocity
- Lack of spontaneous seeking to share enjoyment, interest or achievements with others
- Lack of perspective taking

- Limited or no eye contact
- Restrictive interests
- Sensory dysfunction:
    - Oversensitive to loud noises such as gyms, crowded hallways, and shop classes
    - Aversion to touch
    - Avoidance of messy things
- Rule bound
- May not generalize skills to other areas
- Resists change in learning environment
- Difficulty with unstructured time, waiting and transitions
- Difficulty with abstract concepts
- Anxious around changes in routines and staffing
- Strong visual learner
- May excel at subjects requiring rote memory
- Difficulty with written output
- May demonstrate unusual behaviours (ie: rocking, hand flapping, mouth noises, self talk)
- May have difficulty gaining and sustaining attention on classroom activities
- May demonstrate clumsy, awkward, and/or uncoordinated movements
- Poor fine motor coordination
- Experience difficulties during unstructured times (ie: lunch, break and PE times)

Learning strategies

- Provide a visual schedule (ie: pictures or text)
- Provide help with information processing
    - Visual organizers, semantic mapping, highlighting
    - Pre-teach concepts
- Provide direct teaching
- Provide longer wait time

- Avoid verbal overload (use pictures paired with short concise directions)
- Provide clear behavioural expectations
- Prepare the student for all environmental and/or changes in the routine
- Provide a predictable and safe environment
- Provide "time away - quiet spot" to regroup and find solace
- Teach calm down routine
- Facilitate social interactions with peers
- During lectures allow motor breaks (standing at back of class, 5 minute walk around)
- Identify motivators and implement a contingency system
- Pre-mack the schedule: First....Then (less preferred activity followed by preferred activity)
- Minimize classroom noise
- Capitalize on strengths and interests to engage students in the learning tasks
- Reduce amount of written output
- Use computer to assist with written output (ie: Assistive technology: Kurzweil 3000 and Clicker 5)
- Use concrete language
- To increase time on task or prepare for transitions use a "timer or count down strip"
- Break tasks down into smaller steps
- Present tasks in several ways (ie: visually, verbally, physically)
- Identify optimal seating

Available Resources:

Autism Community Training: www.actcommunity.net
BCTF Teaching to Diversity: www.bctf.bc.ca/TeachingtoDiversity

Ministry of Education Special Programs Handbook: Teaching Students with Autism - A Resource Guide for School: www.bced.gov.bc.ca/specialed/docs/autism.pdf
Provincial Outreach Program for Autism and Related Disorders: www.autismoutreach.ca

STUDENTS WHO ARE GIFTED

Charlie is a grade 4 student who excels at Math. He is working through the grade 6 math curriculum. He is a bit of a dreamer and presents in class as disorganized and not particularly engaged in learning unless it is a topic he has a lot of interest in. He was very focused on the tsunami relief and is worried about environmental issues.

Shannon is a grade 9 student who has exceptional ability in all language areas. She has an extensive vocabulary and likes to talk, often being very "social" and off task in class. Given a choice she would prefer to spend all of her time reading novels. She is also a talented writer both in poetry and stories. She has aspirations of being an author. Shannon is enrolled in a regular grade 9 program. Written work exceeds expectations in English but does not stand out as a gifted student in other subjects.

Students like Shannon and Charlie may or may not be formally labeled as Gifted and many Gifted students are actually labeled as Learning Disabled because they have exceptional strengths in some areas but significant challenges in others. For example, it is not unusual for a gifted student to have written output difficulties.

Characteristics

- Not necessarily a 'high achiever'
- Rapid learning ability, understands concepts easily
- Easily bored and frustrated with tedious repetitive tasks
- Unusual curiosity - wants to know 'why'
- Able to perceive, visualize, and generalize about patterns, structures and relationships
- Energy and persistence in solving problems

- Vivid imagination and sense of humour
- Often moral and personal sensitivity - concerned with fairness or justice
- Often concerned with 'big picture' or global issues

Behavioural Issues

- Study skills and work habits are often not well developed because things have tended to come with little effort
- Social and emotional skills are often incongruent with intellectual capabilities
- Many gifted students are more comfortable talking and working with adults or older students
- Many gifted students feel isolated and misunderstood
- Undue demands are often placed on them as they are perceived to be more mature and responsible
- Parents, teachers, and often the students themselves, set unrealistic goals which end in frustration and feelings of failure
- Many gifted students are **not** self-directed, independent learners who need little direction
- Many gifted students do not have the patience or desire to serve in a 'helper' or 'teacher' role

Instructional Strategies

- Develop a strong relationship by acknowledging the talents, strengths and interests of the student
- Provide opportunities for accelerated learning
- Compact the learning by having the student only do the most challenging problems - just enough to demonstrate competence. This avoids tedium and allows time for enrichment activities

- Provide opportunities for sharing learning, understandings or passions with others
- Provide opportunities for working with other gifted students
- Plan open-ended assignments that allow for choice and for exploration of a topic in more depth
- Differentiate expectations with class assignments
- Allow time during the day to engage in personal interest or passion areas
- Enroll students in challenge or stretch programs when available
- Select elective courses to meet the interests and strengths of the student
- Set clear and appropriately high expectations for assignments. Contracts may be useful in facilitating this
- Monitor and provide support in cooperative group work as they often have difficulty working collaboratively

STUDENTS WITH LEARNING DISABILITIES

Tyler is a bright, active 12 year old boy in grade 7. He readily shares information during class discussions and seems to have no difficulty in understanding the concepts presented, but has difficulty in reading and completing written work. School supplies and assignments are often lost. His teachers describe him as often noncompliant and underachieving with a history of incomplete assignments and refusal to do work. He is easily distracted and does not follow directions. Teachers do not feel that his marks reflect his understanding of the material as he does so poorly on test.

James is a grade 10 student who has been identified as having a severe learning disability. He is enrolled in all regular classes but receives 2 blocks of support from the Learning Centre. In class James seldom appears to be paying attention to the teachers's lecture and the notes he does manage to take usually do not include the necessary key ideas. His assignments are rarely completed and often lost before they are handed in. His binders and locker are a disaster.

Students such as James and Tyler may not be labeled as Moderately or Severely Learning Disabled (SLD), depending on whether formal testing has been completed.

Characteristics

- Learning Disabilities are neurologically-based and usually involve a processing dysfunction
- Appears to be a discrepancy between potential in different subject areas and demonstrated output
- May be very competent orally but the complexity of written ideas seen in assignments may be very different

- Emotional state changes depending on success with various subjects
- May have memory dysfunction
- Varying degrees of disorganization
- Often passive learners
- May not be able to accurately evaluate their performance
- Unaware of effective learning strategies
- May be passive learners

Behavioural Issues

- May use avoidance strategies
- Need a supportive learning environment where it is safe to take risks and make mistakes
- Need much reassurance
- Need the teacher to know they are capable, intelligent learners

Teach your students that if they cut their work into manageable pieces, the whole task will be easier.

Instructional Strategies

- Be explicit about what is to be learned
- Direct instruction in metacognitive strategies
- Break large tasks into smaller chunks
- Use a few learning and organization strategies well rather than many different ones
- Direct instruction and monitoring in organizational strategies
- Draw attention to the most important concepts or directions
- Focus on concept development and avoid memorization whenever possible

- When memorization is required provide 'cheat sheets' such as math fact grids, spell checkers, mathematical or scientific formulas, fact or vocabulary sheets, etc.
- Don't rely on listening only - provide written or visual backup
- Incorporate Universal Design for Learning Principles. Multiple means of representation (the what of learning). Multiple means of engagement (the why of learning). Multiple means of expression (how to show learning)

STUDENTS WITH SEVERE READING DIFFICULTIES

Dylan is a cheerful, engaging student in grade 3 who enjoys participating in all class activities that do not involve reading. He has valuable ideas to share during discussions and grasps concepts quickly. However, he is only able to read early emergent material with only one or two sentences on a page. His writing is completely phonetic and almost illegible. Reading and writing tasks are beginning to cause obvious stress and frustration.

Terms often associated with these students are Moderate to Severe Learning Disability (SLD) or dyslexic.

Characteristics

- Based on brain dysfunction in processing written language
- Reading disability is usually phonologically based
- Reading is significantly below grade or expected level
- May affect ability to comprehend and/or ability to decode and spell
- May comprehend more successfully when reading silently
- Affects reading rate and fluency
- May never develop reading fluency
- Usually will not self monitor for comprehension
- Little or no awareness of effective reading strategies
- Does not vary reading strategies to match the type of text or purpose for reading
- Often able to meet expected learning outcomes when material is read aloud
- May not have developed age-appropriate 'book language' due to lack of reading experience

- May not have the prior knowledge or concept development to handle the text

Behavioural Issues

- Self-esteem is an issue due to their learning disability and they need a lot of emotional support
- Easily discouraged, feel dumb, easily embarrassed
- May use avoidance strategies
- Need learning environment where it is safe to take risks and make mistakes
- Need the teacher to know they are capable, intelligent learners

Curtis is a grade 10 student who is popular with his peers and an avid athlete and sports fan, knowledgeable about the standings from newspaper reports. However, in school he has significant difficulties with all aspects of reading. His decoding and word recognition skills are slow and laborious and therefore comprehension is minimal. He is not able to effectively use the textbooks independently in any of his content classes, although he does better with the science text that uses a lot of graphics, charts and diagrams. Curtis picks up concepts readily when they are discussed in class or in small groups. Assignments, when completed, are done at a minimal level, often missing key information. During work times Curtis is often off task and finds frequent reason to leave the room.

Instructional Strategies

- Give extra time for processing when answering questions or when reading is required
- Whenever possible provide opportunities for material to be read aloud to minimize the reading barrier
- Use assistive technology such as Kurzweil

- Provide electronic copies of textbooks (Kurzweil)
- Avoid having the student read unfamiliar text aloud
- Access and/or develop prior knowledge to make text predictable and accessible
- Break reading tasks down into manageable chunks
- Provide a response activity to ensure comprehension monitoring and reflection
- Limit the amount of writing required for a response activity
- Provide a variety of ways of representing learning
- Teach point form notes and single word answers
- Use a variety of ways of presenting learning such as charts and diagrams
- Students should know the reading criteria- set purpose for reading
- Use plain language, specific and concrete directions
- Help them be efficient learners by directing their reading or studying time - ie: read the questions first, provide study guides

MILD INTELLECTUAL DISABILITIES

Hold realistic expectations and provide opportunities to build on your student's strengths.

Instructional Strategies

- Present assignments and materials in smaller segments
- Allow extra processing/wait/response time.
- Check frequently for understanding.
- Differentiate expectations for assignment completion
- Decrease complexity of assignment
- Tap into prior knowledge
- Pre-teach key vocabulary
- Allow learning to be demonstrated in a way which best suits her ability and strengths
- Use of the 'think, pair, share' strategy and other cooperative strategies address many learning and behavioural challenges
- Decrease amount of work

Available Resources:

BCTF Teaching to Diversity Website:
www.bctf.bc.ca/TeachingtoDiversity
Ministry of Education Special Programs Handbook:
Teaching Students with Intellectual Disabilities -
www.bced.gov.bc.ca/specialed/.....

Behavioural Strategies

- Provide planned breaks i.e. physical movement, listening centre, library, computer

- Teach how to use a self monitoring check list for completion of assignments
- Use social stories and role playing to teach appropriate social skills
- Provide alternate workspace
- Provide a daily schedule of class routine and personal activities using visual schedules and graphic organizers
- Prepare students for transitions
- Use positive reinforcement
- Encourage peer models

STUDENTS WITH WRITTEN OUTPUT DIFFICULTIES

Trevor is a grade 4 student. According to a recent assessment, he scores in the well above average to exceptional range in cognitive and academic tests. However he is not passing many of his school subjects because he hands in very few assignments. Often those that he does hand in lack any indication of 'giftedness'. There are exceptions however, such as a power-point presentation on medieval knights prepared for his social studies class, which was outstanding. Trevor loves to read and debate issues at length but his language arts assignments are simplistic and very brief, if completed at all. With open-ended topics he has trouble selecting a topic, format and 'getting started'.

These students are often not diagnosed and can mistakenly be labeled lazy or as having behaviour problems or just needing to work harder. They may also be labeled as having a Severe Learning Disability (SLD), a Non-Verbal Learning Disability (NVLD) or 'dysgraphia'.

Writing is a very complex neurological process. There are many factors that affect written output - motor function, language, memory, mental energy, production control, generating ideas, sequencing to handling materials.

Characteristics

- May appear 'lazy', unmotivated or defiant
- Often disengaged from school - seemingly unaware of, or unconcerned with, consequences
- Has not developed the more sophisticated language and conceptualization required for school success because of lack of use of written language
- Produce very minimal amounts of written work

- Rarely finishes or hands in assignments
- Frequent careless, repetitive errors
- Writing shows a serious shortage of facts and ideas and lacks structure sequence and organization
- Often has a poor active working memory
- Often has a slow recall of basic math facts and spelling patterns
- Has difficulty putting ideas into words when writing (but may demonstrate no difficulty when speaking)
- Has difficulty thinking up topics and deciding what to write
- Has trouble 'getting started'
- Finds writing tasks mentally exhausting

Behavioural Issues

- Poor self-esteem due to their learning disability and they need a lot of reassurance and emotional support
- Experience emotional turmoil due to a long history of being chastised for poor written work
- Easily discouraged or embarrassed and feel dumb, especially when others look at their written work
- Have chronic 'writer's block'
- Necessary to understand the function of their many avoidance tactics
- May appear to be engaged
- Learning environment where it is safe to take risks and make mistakes
- Need the teacher to know they are capable, intelligent learners

Kathy is a grade 9 aged student who, for the second year in a row, has failed almost all of the subjects in which she was enrolled. Assignments have been consistently very poorly done or not handed in. Kathy came to this school with an

unremarkable elementary school history, having received minimal marks in most of her subjects due to poor attendance and work habits. Even after attending summer school following grade 8, she did not pass the courses attempted. During her grade 8 year she received Learning Assistance but resisted the support offered and was not enrolled again in this year. Teachers are reluctant to give her 'standing granted' grades until she demonstrates competency in writing, although standardized academic tests show her to be scoring at grade level.

Make your classroom a haven for taking risks.

Instructional Strategies

- Try to determine the specific area(s) of difficulty and provide direct support in those areas
- Allow student to dictate ideas to a scribe
- Direct instruction in a variety of writing genres
- Direct instruction in a variety of effective spelling strategies
- Use of graphic organizers or key visuals
- Allow extra time for assignments
- Break large assignments into manageable chunks
- Provide easily accessible lists of vocabulary words for spelling reference
- Encouragement and direct instruction in the use of a spell and grammar checker
- Direct instruction in keyboarding skills
- Metacognitive development of effective writing strategies
- Frequent conferencing to develop and monitor personal writing goals
- Reduce volume of assignments and emphasize completion rather than amount
- Set specific criteria for assignments

- Encourage and monitor use of time management strategies such as planners
- Allow student to draw or sketch answers
- Encourage student to draw or sketch ideas before writing
- Allow oral answers when possible
- Provide photocopied text and allow the student to highlight key ideas instead of taking notes
- Work with a partner to share writing
- Allow and encourage representation of learning in a variety of formats
- Provide photocopied notes for study purposes
- Provide study guides
- Use of assignment contracts outlining the amount to be completed

- **ADAPTATIONS**
-
- Strategies/Supports
-
- **Cross-Curricular**
-

  - Reduce quantity of work (eg. fewer Spelling words, questions to answer)
  - Increase amount of time to complete assignments
  - Give choices for assignment format
  - Break longer assignments/projects into smaller "chunks" (highly structured steps, establish due
  - Give reasonable extensions to complete project work
  - Allow test - taking adaptations (additional time, enlarged print, scribe, open book, etc.)
  - Prepare student ahead of time for what will be asked of him / her in class
  - Have student verbalize what he/she does as often as possible
  - Allow wait time to formulate ideas
  - Use short, clear, concise directions
  - Ask student to repeat directions
  - Have student paraphrase directions and demonstrate tasks before working independently
  - Accompany teacher directions with demonstrations or visual examples
  - Check comprehension frequently
  - Provide study guides, photocopied notes, taped materials
  - Provide the opportunity to pre-read materials
  - Use "advanced organizers" for watching video/dvd presentations
  - Highlight/underline key words or directions on worksheets/tests

- Use graphic organizers/frames (eg. calendar, visual schedule, charts, C.O.P.S., etc.)
- Provide written back-up for oral directions
- Allow student to use vocabulary cards, textbook or notes when writing a test/quiz
- Use a dictionary, personalized dictionary, word wall & charts for reference
- Use audio tapes
- Allow access to computer for written assignments (word prediction, spell-checker)
- Provide complete unit outline/criteria and a list of key vocabulary
- Provide parallel, alternate reading materials at student's reading level
- Allow spelling errors in practice assignments or draft writing (make limited corrections)
- Emphasize process rather than product
- Use Prescribed Learning Outcomes from lower grade levels
- Check the student's agenda to ensure it contains accurate information about
- Use a "buddy system" in the classroom
- Avoid having the student oral read
- Allow student to answer test items orally (or record answers on a tape recorder)
- Provide proofreading/editing assistance
- Allow the student to write/rewrite/finish a test or quiz in the LAT Room
- Provide extra tutorials, reteaching in small groups/one-on-one
- Provide a tutor/scribe/peer support
- Provide one on one or small group adult support when available
- Provide Learning Assistance Teacher support
- Use Kurzweil for assisted reading and writing

Mathematics

- Provide additional resources for practicing basic facts (eg. flashcards, game cards, web links
- Use SuccessMaker to develop/increase basic Math skills
- Use a calculator
- Avoid timed tests/quizzes
- Use Math manipulatives (eg. counters, ruler, 3-D shapes, etc.)
- Use Math facts tables

Behaviour Management Strategies

- Use strategic seating (eg. close to the teacher, close to the front of the class, away from
- Allow student to stand at times while working
- Give frequent breaks during the day
- Use timer
- Use time-out procedure for misbehaviour
- Use an incentive program
- Increase immediacy of rewards or consequences
- Ignore minor inappropriate behaviour
- Provide instruction in self-monitoring strategies (eg. visual cues)
- Provide immediate specific feedback about behaviour
- Provide pre-instruction or review prior to transitions (expected behaviour)
- Establish clear routines and discuss them periodically
- Use cues/prompts (private signals)
- Supervise closely during transition time
- State behavioural expectations in positive terms (what is expected, rather than what is wrong)
- Implement behaviour management system
- Keep close communication between home and school (implement a system)

- **RESOURCE LINKS**
-
- **B.C. School for the Deaf**
  - Website: www.bcsdoutreach.bc.ca
  - Tel: 604-664-8300
  - Fax: 604-664-8308
  - TTY: 6L04-664-8304
  -

Provincial Outreach Program for Students with Deafblindness

- Website: www.sd38.bc.ca/BCDeafblindOutreach
- Tel: 604-668-7810
- Fax: 604-668-7812
- Email: deafblind@sd38.bc.ca
-

Provincial Outreach Program for Autism & Related Disorders, (POPARD)

- Website: www.autismoutreach.ca/
- Tel: 604-946-3610
- Fax: 604-946-2956
-

Provincial Integration Support Program, (PISP)

- Website: www.pisp.ca
- Tel: 250-595-2088
- Fax: 250-592-5976
-

Set-BC

- Website: www.setbc.org
- Tel: 604-261-9450
- Fax: 604-261-2256
-

Provincial Resource Centre for the Visually Impaired (PRCVI)

- Website: www.prcvi.org
- Tel: 604-269-2219

- Fax: 604-261-0778

Cochlear Implants & Auditory Training Equipment

- Website: http://prp.sd47.bc.ca/index.htm
- Tel: 604-485-6271 ext 2249 (voice)
- Fax: 604-485-2886

Fetal Alcohol Spectrum Disorder

- Website: www.fasdoutreach.ca/index.php
- Tel: 250-564-6574
- Fax: 250-563-5487
-

INTERNET RESOURCES:

- **Challenges and Opportunities: A Handbook for Teachers of Students with Special Needs with a Focus on Fetal Alcohol Syndrome (FAS) and Partial Fetal Alcohol Syndrome (pFAS)** Outlines three main sections: What is FAS/pFAS?, Identifying Student Needs; and Accessing Services and Strategies. Sample forms, recommended resources, and student and class profiles are included. Order from BCTF Lesson Aids - http://www.bctf.ca/LessonAids/index.html#order
-
- **Teaching Students with Fetal Alcohol Syndrome** BC Ministry of Education Special Education Resource Guide provides teachers with a clear understanding of the needs of students with FASD. http://www.bced.gov.bc.ca/specialed/fas/
-
- **American Academy of Child and Adolescent Psychiatry: Facts for Families** provides concise and up-to-date information on issues that affect children, teenagers and their families. http://www.aacap.org/publications/factsfam/index.htm

-
- **A Sourcebook of Successful School-based Strategies for Fetal Alcohol and Drug-Affected Students** published by the Western Regional Center for Drug-Free Schools and Communities. Web site: www.nwrac.org/pub/library/s/ -
  FAS kids Respond Well to Special Strategies by Bill Hayne
  - Preschool Strategies
  - K-6 Strategies
  - Middle School Strategies
-
- **The Source for Syndromes** by Gail J. Richard and Debra Reichert Hoge. LinguiSystems.
  ISBN 0-7606-0242-5 Website: www.linguisystems.com
-
- **The Source for Syndromes 2** by Gail J. Richard and Debra Reichert Hoge. LinguiSystems.
  ISBN 0-7606-0361-8 Website: www.linguisystems.com