

1. DIGNITY, VALUE & WORTH: PEOPLE FIRST, DISABILITY SECOND

Attitude is shown in many ways. Youth who have grown up with health issues have experienced a range of feelings and a range of responses from others. Living with intense health issues can be a positive experience because one can learn creative problem-solving.

Your classroom is the place they should receive full respect and dignity and not feel they are being pitied. Routinely check to ensure that all staff, including you, use "People First" language in both speaking and writing (student with a disability vs. disabled student).

Seek guidance from a youth leader.

2. INFORMED DECISION MAKING: ASSENT TO CONSENT

Children and youth who have known health issues need to know how to manage them at an early age. Whenever possible, involve them in decision-making. Teachers can incorporate into lesson plans ways to allow students to prepare questions for their health providers to answer. Learning how to negotiate, use good communication skills, and manage time are important to maintain wellness. When permission signatures are required encourage minors to co-sign as evidence of "assent." Those students with fine motor impairments may want to direct the use of their authorized signature stamp.

Practicing these skills early is a must.

3. BALANCING: LEARNING, HEALTH & LIVING

Some youth have numerous medical providers who assist in coordinating their comprehensive health care. Trying to arrange medical appointments that meet their health needs, office hours and not put a dent on their learning time requires some flexibility. Share with families and youth key dates where it is important that he/she is in school (e.g., statewide testing, school events, picture day, and extracurricular activities).

4. STUDENT CENTRIC: ACCESS, APPEARANCE, CONFIDENTIALITY & SAFETY

ACCESS & APPEARANCE- An inviting classroom sends a welcome signal. Is the classroom barrier-free, arranged with wide aisles and no evidence of segregated seating clusters? Is the doorway easy to enter for students who use crutches or wheelchairs? Do the classroom decorations / pictures reflect images and diversity of the students you teach? "Disability cool" posters are a hit with ALL students.

CONFIDENTIALITY - Do your lesson plans have enough information for the substitute without jeopardizing any student's privacy issues? A peer teacher could be a back-up to assist on some issues that can not be shared with substitutes. Is there a plan to gather assignments for students who are absent?

SAFETY - Do you practice with more than one fire exit route? Has the local fire department been notified of any known issues that might require special attention during a real emergency?

Are you aware of allergies or health issues that may be life-threatening to a student and are you aware of how to avoid or reduce episodes (e.g., allergies [from peanuts], asthma, diabetes, respiratory, etc.)?

PLAN AHEAD - You do not need to become a medical expert, be informed ahead of time of what the issues are and have a plan for where to seek help when needed. This plan should be developed with the family and youth.

5. GOTTA AN IDEA! INFORMATION & SOLUTIONS BANK

Encourage students and their families to post questions and solutions on index cards on a bulletin board.

On a quarterly basis these could be typed in a “newsletter” or email that promotes learning, wellness, and stress reduction.

6. THEY DON'T NEED YOU AS MUCH ANYMORE

While we attempt to be objective, it’s hard not to get close to those who have been through more than one life-death experience. The goal is to maximize learning, improve health, and reduce sickness and secondary disabilities. *Issues of letting go are not limited to families.*

The more you promote self-determination in your students’ life goals and health care, the greater the likelihood students will have greater periods of wellness and be in school learning. They will be living their lives! This is the best compliment you can get!

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HRTW Phase II Projects are currently active in Arizona, Iowa, Maine, Mississippi, and Wisconsin.

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