**

# Epilepsy

# Pupils with Health Issues

## Epilepsy

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| **classroom_tip** | **Classroom-based tips (focus on instructional methods)** |

1. **Be vigilant when interpreting a pupil’s behavior**. Sometimes seizure symptoms and difficulties related to epilepsy may be misinterpreted as ‘naughtiness’.
2. **Make sure to recap a lesson after a pupil’s epilepsy related absence**, so as to ensure they do not feel left behind with regards to material covered.
3. **Focus on instructional methods that include more analytical than mnemonic activities, where possible.** One of the most prominent cognitive changes that occurs in people with epilepsy is that of memory problems.
4. **Do not focus your attention on pupils with epilepsy as it makes them stand out among their peers,** affecting their stress levels and psychosocial behavior. Instead choose more subtle ways of including them into classroom activities and engaging their attention.
5. **Do not force pupils with epilepsy to perform in all activities,** especially physical ones, to the same extent as their peers. As epilepsy is often a “hidden” disability, performance anxiety and pressure could have the opposite effect and could potentially result in seizures. Instead support these pupils in pacing themselves to the extent they feel comfortable with.
6. **Check that the pupil is not sitting near visual distractions, such as near a window.**
7. **Allow the pupil to have access to your lesson notes whenever appropriate.**
8. **When assigning a task, be clear about the purpose, break tasks down into smaller, achievable steps, and allow pupil to repeat tasks;** repetition means they have a better chance of mastering a task or remembering, allow more time for pupil to complete task.

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| **school_tip** | **School-based practical tips (focus on instructional methods)** |

**Class Divisions / Arrangements**

**Provide extra instructional support for pupils with epilepsy,** if needed, especially in case where their condition results in accumulated absences. Also, alternative teaching methods might be necessary, for example avoidance of using flat TV and computer screens. *[Reference: Epilepsy Society - Teaching Children with Epilepsy*

[*https://www.epilepsysociety.org.uk/teaching-children-epilepsy#.WBX-qyQbIsc*](https://www.epilepsysociety.org.uk/teaching-children-epilepsy#.WBX-qyQbIsc)*]*

**Curricular Adaptations**

**Although curricular adaptations may not be possible or required, depending on the case, make provisions for different modalities of assessing a pupil’s performance.** Also, alternative scheduling of tests and exams might be necessary.

**Educational Visits / Field Trips / Camps / School Exchanges / Trips Abroad**

**School excursions should be organised in a manner that include easy access to medical facilities should the need arise.**

*[Reference: Young Epilepsy (2013) Guide for schools; Understanding epilepsy. UK:* [*www.young****epilepsy****.org.uk/307-****guide-for-schools****-****understanding****-****epilepsy****-1/file.html*](http://www.youngepilepsy.org.uk/307-guide-for-schools-understanding-epilepsy-1/file.html)

### **Homework**

**Although curricular adaptations may not be possible or required, depending on the case, make provisions for different modalities of assessing a pupil’s performance.** Also, alternative scheduling of tests and exams might be necessary.

### **Other (Health Measures)**

1. **Epilepsy often has varied symptoms ranging from learning difficulties to seizures.** Have an extended consultation with pupils’ parents and health-monitoring team to understand the particularities of each case and make necessary provisions for safety issues that may arise, including emergency plans, contact persons, first aid.
2. **School excursions should be organised in a manner that include easy access to medical facilities should the need arise.**

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1. **Invest in specialised training for teachers by medical professionals** into the particularities of epilepsy, its diverse symptoms and on methods of interacting with pupils with epilepsy and reacting in the event of seizures in the appropriate manner, including first aid.

*[Reference: CHOC Epilepsy Center, Managing Children with Epilepsy, a school nurse guide, CHOC Children’s:* [*http://www.choc.org/userfiles/file/EpilepsyHandbook.pdf*](http://www.choc.org/userfiles/file/EpilepsyHandbook.pdf)*]*

### **Parents / Parents’ Associations**

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2. **Following consent from parents of pupils with epilepsy, discuss the subject in Parents’ Association and Teaching Staff meetings.** This will help to explain the circumstances and open up the dialogue on the management of epilepsy in the school setting, and discuss issues like diversity and bullying. However, avoid putting the pupil with epilepsy under the spotlight by asking them to discuss their condition in front of the class or other groups.

### **Safety**

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### **Pupil Support**

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2. Although curricular adaptations may not be possible or required, depending on the case, make provisions for different modalities of assessing a pupil’s performance. Also, alternative scheduling of tests and exams might be necessary.
3. **Provide extra instructional support for pupils with epilepsy,** if needed, especially in case where their condition results in accumulated absences. Also, alternative teaching methods might be necessary, for example avoidance of using flat TV and computer screens.

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### **Teacher Professional Development**

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### **Supportive literature**

**Definition of Epilepsy**

Epilepsy is a neurological disorder. The brain contains millions of nerve cells called neurons that send electrical charges to each other. A seizure occurs when there is a sudden and brief excess surge of electrical activity in the brain between nerve cells. This results in an alteration in sensation, behavior, and consciousness.

Seizures may be caused by developmental problems before birth, trauma at birth, head injury, tumour, structural problems, vascular problems (i.e. stroke, abnormal blood vessels), metabolic conditions (i.e. low blood sugar, low calcium), infections (i.e. meningitis, encephalitis) and idiopathic causes. Children who have idiopathic seizures are most likely to respond to medications and outgrow seizures. (CHOC)

**Characteristics of pupils with Epilepsy**

One of the most prominent cognitive changes that occurs in people with epilepsy is related to memory (Zemen et al. 2012). Difficulties with memory have been identified as a ‘barrier to learning’, especially in an examination system based on being able to recall information, which may be particularly difficult for young people with epilepsy. As such it is important that teachers and others who have responsibility for supporting pupilswith epilepsy are aware of the possibility but not inevitability of additional learning and behavioral difficulties (Reilly and Ballantine, 2011). Relevant research suggests that teachers lack understanding of epilepsy (Wodrich et al. 2011) and that they may not be aware of the additional difficulties pupilswith epilepsy can have concerning learning and emotional problems (Wodrich et al. 2006). Childhood epilepsy is associated with a higher risk for ‘internalising disorders’ such as depression and anxiety and ‘externalising disorders’ such as attention deficit hyperactivity disorder (ADHD) (Berg et al. 2011).

As well as potential difficulties with working memory, pupilswith epilepsy may have specific learning problems such as inattention and processing difficulties, or side effects associated with their antiepileptic medication identified as a barrier that can impact on learning (Reilly and Ballantine, 2011). Tiredness, mood swings, irritability and difficulties concentrating could all be attributed to side effects of medication. Disturbed sleep and resulting tiredness as a result of nocturnal seizures is another factor in relation to the impact of epilepsy on learning.

### **Websites and EU Reports**

**Epilepsy Foundation** - Your Child at School and Child Care

<http://www.epilepsy.com/learn/seizures-youth/about-kids/your-child-school-and-child-care>

**Epilepsy Society** - Teaching Children with Epilepsy

<https://www.epilepsysociety.org.uk/teaching-children-epilepsy#.WBX-qyQbIsc>

**WebMD** - Epilepsy and Your Child's School

<http://www.webmd.com/epilepsy/guide/children-school>

**Epilepsy Ontario** - School life for children with epilepsy

<http://epilepsyontario.org/school-life-for-children-with-epilepsy/>

**AboutKidsHealth** - What teachers and other school personnel need to know about your child’s epilepsy

<http://www.aboutkidshealth.ca/En/ResourceCentres/Epilepsy/AtHomeandAtSchool/EpilepsyandSchool/Pages/At-School.aspx>

**Chronic Illness Alliance** - School Strategies

<http://www.chronicillness.org.au/invisible-illness/epilepsy/school-strategies/>

**Epilepsy Action Australia** - Information for Teachers

<https://www.epilepsy.org.au/about-epilepsy/living-with-epilepsy/information-for-teachers>

**Young Epilepsy** - Inclusion in education: what helps? What hinders?

<http://www.youngepilepsy.org.uk/for-professionals/research/research-projects/inclusion-in-education-research.html>

**Teaching for Inclusion** - Epilepsy

<http://web1.modelfarms-h.schools.nsw.edu.au/disabilities.php?page=epilepsy>

**Bright Hub Education** - Creating the Right Environment for Inclusion Classrooms

<http://www.brighthubeducation.com/special-ed-inclusion-strategies/68102-creating-the-right-environment-in-your-inclusive-classroom/>

**Teaching Times** - Children with epilepsy risk a poorer standard of education

<http://www.teachingtimes.com/articles/epilepsy-poorer-education.htm>

**Young Epilepsy** (2013) Guide for schools; Understanding epilepsy. UK

[www.young**epilepsy**.org.uk/307-**guide-for-schools**-**understanding**-**epilepsy**-1/file.html](http://www.youngepilepsy.org.uk/307-guide-for-schools-understanding-epilepsy-1/file.html)

#### References

Berg, A., Caplan, R. and Hesdorffer (2011) Psychiatric and Neurodevelopmental Disorders in Childhood-onset Epilepsy, Epilepsy and Behavior, 20 (3), 550 – 555

CHOC Epilepsy Center, Managing Children with Epilepsy, a school nurse guide, CHOC Children’s

<http://www.choc.org/userfiles/file/EpilepsyHandbook.pdf>

Reilly, C. and Ballantine, R. (2011). Epilepsy in school-aged children: More than just seizures? Support for Learning, 26, 144-151

Wodrich, D.L., Kaplan, A.M., and Deering, W.M. (2006). Children with epilepsy in school: Special service usage and assessment practices, Psychology in Schools, 43, 169-180

Wodrich D., Jarrarb R., Buchhalterb J., Levya R. and Gaya C. (2011) Knowledge about epilepsy and confidence in instructing students with epilepsy,Epilepsy and Behaviour, 20, 2, pp. 360 – 365

Zemen, A., Kapur, N. and Jones-Gotman, M. (2012) Epilepsy and Memory, Oxford, Oxford University Press