



## Pupils with Physical Disabilities

### Cerebral Palsy



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### Classroom-based tips (focus on instructional methods)

1. **Inform the pupils about the presence of a pupil with cerebral palsy** (e.g. through project, discussion, parental participation, storytelling, involvement of the pupil himself/herself, depending on the age of the class), taking care not to stigmatise the pupil, or make her/him feel uncomfortable.
2. **Provide activities promoting acceptance and support in order to avoid marginalisation.** These might include for instance, discussions on various types of disabilities, in this case specifically on cerebral palsy, and even on the strengths of people affected by this condition such as having above-average intelligence [Reference: <https://www.ninds.nih.gov/Disorders/All-Disorders/Cerebral-Palsy-Information-Page>].
3. **Explain the lessons carefully and use dynamic activities that stimulate the creativity of pupils with cerebral palsy** – this would encourage them to keep their interest and remain actively involved in the various types of learning activities.
4. **Ensure that each pupil has an active role in class activities.**
5. **Use various teaching methods in order to offer equal learning opportunities** to pupils with paralysis.
6. **Provide a specific set of teaching materials in digital form**, so that pupils with cerebral palsy do not have to carry heavy books in and out of school and the classroom.
7. **Provide course content in digital form for pupils with cerebral palsy** that use (assistive) technology for their learning.
8. **Provide copies of teachers' notes or recorded lectures**, as well as digital notes for pupils using technology.
9. **Use technology and/or other audio-visual aids** in the pupil's learning and teaching programme.
10. **Be understanding with such issues as lateness, absences, shortened school days, fatigue, change in mood and missed homework due to therapy sessions.**
11. **Provide options for tutoring or extra time** to make up assignments and complete tasks.
12. **Encourage pupils to participate in all classroom activities at their own pace and comfort level.**
13. **Encourage pupils to participate in all classroom activities by using their assistive technology, where applicable.**

14. **Take into consideration the pupil's physical and communication needs when designing the class schedule;** classrooms should be close, to minimise distance walked throughout the day.
15. **Differentiate testing and assessment by providing options according to individual needs of a pupil.** These could be extra time or untimed tests, one-on-one evaluation, alternate response mode, and use of a laptop and/or other assistive technology.
16. **Provide opportunities for the use of alternative communication means in all classroom activities,** if available, for pupils that do not have verbal communication abilities.
17. **Make arrangements for sitting and positioning in the classroom to facilitate safely moving around and participating in activities.** Consult physiotherapist for specific seating needs. Keep in mind that favourable classroom accommodation (supportive seating, note-taking by means of recording the lesson, height of the bench so as to match the height of the wheelchair, lowering the blackboard) and the adaptive equipment mentioned above may improve the pupil's physical abilities.
18. **Provide for any (additional) assistive technology and other adaptations needed, such as technology devices, and adapted desks.**
19. **If pupils use wheelchairs, where possible place yourself at their eye level when talking to them.**
20. **The board in the classroom may have to be lowered if the pupil is in a wheelchair.**
21. **Allow pupils to leave classes early to give them adequate time to get to their next class.**
22. **Provide options for adapted physical activities** (consult physiotherapist). Being physically active is important for pupils with cerebral palsy; slower-paced activities are better than those requiring a fast response.



## School-based practical tips (focus on instructional methods)

### Class Divisions

**Ensure appropriate adaptations, accommodations and modifications are made to the instruction and other activities,** including availability of assistive technology.

### Community

1. **Design a school project in order to increase the level of awareness of the teachers, pupils and parents of what cerebral palsy is.**

2. **Find and have available contact details of local/national associations for cerebral palsy and, more generally, for paralysis.**

## Curricular Adaptations

1. Allow time for mobility for pupils who need to change rooms for classes in order to move safely and on time to their next class. **If needed, a classmate, friend or helper may carry books and other materials between classes; assign roles or create groups in class with the participation of the pupil with cerebral palsy.** [Reference: <http://hkpp.org/school-plan-for-student-periodic-paralysis>]
2. **Devise individualised learning plans for pupils with cerebral palsy in collaboration with other professionals and family.**
3. **Make the physical education class and sports activities in school accessible by adjustment of playing areas** (dimension, surface); equipment modification, for example using lighter balls, or balls with sounds.

## Discipline

Monitor the safety of the pupils during their curricular and extra-curricular activities during their classes, breaks or other types of activities.

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

1. When organising field trips and school events, make arrangements by considering the following, based on individual pupil's needs: **Is there a wheelchair lift on the bus? Is there enough space in the bus for a wheelchair? Is the field trip destination accessible for wheelchairs? Have the teachers accompanying the group of pupils been informed of this pupil's needs?**
2. **Adapt or differentiate learning tasks and other extra-curricular activities** in order to diminish abandonment including in homework assignments, educational activities, and sports competitions.  
[Reference: <https://www.christopherreeve.org/living-with-paralysis/for-parents/education-for-children-living-with-paralysis-1>]

## Homework

Adapt or differentiate learning tasks and other extra-curricular activities **in order to diminish abandonment including in homework assignments, educational activities, and sports competitions.**

[Reference: <https://www.christopherreeve.org/living-with-paralysis/for-parents/education-for-children-living-with-paralysis-1>]

## Parents / Parents' Associations

1. Arrange meetings between the parents and the staff, **including other professionals working with the pupil, such as the physiotherapist, so as to learn as much as possible about the diagnosis, their observations about the pupil's current level of ability, and possible needs during the course of the school year.**
2. **Facilitate family support and confidence in parenting a child with cerebral palsy.**
3. **Design a school project in order to increase the level of awareness of the teachers, pupils and parents of what cerebral palsy is.**
4. **Involve families in the process of every stage of decision-making for the child's education, and provide them with enough appropriate information** [Reference: <http://patient.info/doctor/disability-in-childhood>]

## Safety

1. **Ensure emergency precautions are in place and staff are properly trained if pupils' breathing or heart rate are affected.**  
[Reference: <http://hkpp.org/school-plan-for-student-periodic-paralysis>]
2. **Provide access and facilities in order to develop inclusive school projects, events, and celebrations for all pupils,** providing facilities for those with cerebral palsy to be able to participate (e.g. safety conditions, hall accommodation, traffic in the corridors).
3. **Equip the building of the school institution with accessibility and safety adaptations** such as elevator, ramps, and special desks with room for a wheelchair.
4. Monitor the safety of the pupils during their curricular and extra-curricular activities during their classes, breaks or other types of activities.
5. **Make sure that, in case of emergency, the evacuation plan allows pupils with cerebral palsy to safely get out of the building.**
6. **Make the physical education class and sports activities in school accessible by adjustment of playing areas** (dimension, surface); equipment modification, for example using lighter balls, or balls with sounds.

## School Breaks

Monitor the safety of the pupils during their curricular and extra-curricular activities during their classes, breaks or other types of activities.

## School Celebrations / Events / Activities

**Provide access and facilities in order to develop inclusive school projects, events, and celebrations for all pupils**, providing facilities for those with cerebral palsy to be able to participate (e.g. safety conditions, hall accommodation, traffic in the corridors).

## School Purchases

1. **Equip the building of the school institution with accessibility and safety adaptations** such as elevator, ramps, and special desks with room for a wheelchair.
2. **Allow pupils with cerebral palsy to use assistive technological devices** that help them perform tasks and improve performance, for example a keyboard for writing.

## Student Council

**Design a school project in order to increase the level of awareness of the teachers, pupils and parents of what cerebral palsy is.**

## Pupil Support

1. Allow time for mobility for pupils who need to change rooms for classes in order to move safely and on time to their next class. **If needed, a classmate, friend or helper may carry books and other materials between classes; assign roles or create groups in class with the participation of the pupil with cerebral palsy.** [Reference: <http://hkpp.org/school-plan-for-student-periodic-paralysis>]
2. **Provide pupils extra support if possible, including financial support, and individual teaching support.**
3. **Ensure that further provision is provided to pupils that may need support during class**, for example with the presence of a teaching assistant.
4. **Find and have available contact details of local/national associations for cerebral palsy and, more generally, for paralysis.**

## Teacher Professional Development

**Provide training for teachers who have pupils with cerebral palsy in their classrooms.**

## Technology

1. **Ensure appropriate adaptations, accommodations and modifications are made to the instruction and other activities**, including availability of assistive technology.

2. **Allow pupils with cerebral palsy to use assistive technological devices** that help them perform tasks and improve performance, for example a keyboard for writing.

## Timetabling

**Allow time for mobility for pupils who need to change rooms for classes in order to move safely and on time to their next class.** If needed, a classmate, friend or helper may carry books and other materials between classes; assign roles or create groups in class with the participation of the pupil with cerebral palsy. [Reference: <http://hkpp.org/school-plan-for-student-periodic-paralysis>]

## Supportive Literature

**Definition:** *Cerebral palsy* (CP) refers to a group of “disorders of the development of movement and posture, causing activity limitation that are attributed to non-progressive disturbances that occurred in the developing fetal or infant brain.” [Reference: <https://iate.cdt.europa.eu/iatenew/manipulation/dataentry/EntryDetailView.jsp?lilId=1532733&srcLang=en&trgLang=ro>].

It is a “childhood condition” (Miller, 3) as the neurological disorders appear in infancy or early childhood and permanently affect body movement, muscle coordination, and balance [Reference: <https://www.ninds.nih.gov/Disorders/All-Disorders/Cerebral-Palsy-Information-Page>]. The majority of children with cerebral palsy are born with it, though the condition may not be detected until months or years later. The early signs of cerebral palsy usually appear before the child reaches the age of 3.

The condition itself is “stable and non-progressive” (Miller, 3), but “it persists for life” (Stanton, 11), as there is no cure for this disease (Stanton, 12). The causes are various, ranging from infection passed from mother to child in the womb, to environmental, hereditary or even postnatal factors, such as a head injury sustained during the first five years of life (Stanton, 13).

In general terms, cerebral palsy is characterised by involuntary jerking movements, a poor sense of balance, spastic muscles and speech impairment. Doctors classify cerebral palsy according to:

(a) the part of the body affected:

- Hemiplegia: affecting one side of the body.
- Diplegia: affecting the whole body.
- Quadriplegia: affecting both arms and legs.

Or

(b) the way in which the body is affected:

- Spasticity: difficulty moving limbs and problems with posture and general movements.
- Athetosis: involuntary movements such as twitches or spasms.
- Ataxia: difficulty co-ordinating muscle groups and problems with balance, walking, etc. (Erickson, Angie, 1994)

A mixture of these conditions may sometimes be present, as well as other associated difficulties, so the term embraces a wide spectrum. The associated difficulties include difficulties with epilepsy, general/specific learning disabilities, sleeping, speech and understanding the spoken word, and visual perception.

It is estimated that 1 in 400 pupils are affected by cerebral palsy and it is important to note that there is a huge variation in the manner in which cerebral palsy affects each individual. Some, but not all, pupils will have communication difficulties (including social mixing difficulties), movement and control difficulties, difficulties in processing and in ordering information, and spatial and perceptual difficulties. (Erickson, Angie, 1994)

## Websites and EU Reports

EU Accessibility Act - [http://www.europarl.europa.eu/RegData/etudes/IDAN/2016/571382/IPOL\\_IDA\(2016\)571382\\_EN.pdf](http://www.europarl.europa.eu/RegData/etudes/IDAN/2016/571382/IPOL_IDA(2016)571382_EN.pdf)  
NINDS - <https://www.ninds.nih.gov/Disorders/All-Disorders/Cerebral-Palsy-Information-Page>  
Children's Hemiplegia and Stroke Asscn. (CHASA) - <http://chasa.org/>  
United Cerebral Palsy (UCP) (link is external) - <http://www.ucp.org>  
National Institute of Child Health and Human Development (NICHD) - <http://www.nichd.nih.gov>  
NHS - <http://www.nhs.uk/conditions/cerebral-palsy/pages/introduction.aspx>  
Centre for Disease Control and Prevention - <https://www.cdc.gov/ncbddd/cp/facts.html>  
Asociatia Umanitara Marta Maria - <http://www.martamaria.ro/despre-paralizia-cerebrala-2/>  
Asociatia umanitara "Sfantul Stefan" - <http://asociatiasfantulstefan.ro/index.php>

## References

Erickson, Angie (1994), *It's OK to be different*, Newsweek, <http://www.sess.ie/categories/physical-disabilities/cerebral-palsy>

Miller, Freeman (2005), *Cerebral Palsy*, Springer

Stanton, Marion (2012), *Understanding Cerebral Palsy: A Guide for Parents and Professionals*, Jessica Kingsley Publishers

<https://www.ninds.nih.gov/Disorders/All-Disorders/Cerebral-Palsy-Information-Page>

<https://iate.cdt.europa.eu/iatenew/manipulation/dataentry/EntryDetailView.jsp?lilId=1532733&srcLang=en&trgLang=ro>