CHAPTER 8: SPECIFIC DISABILITIES AND RELATED ACTIVITIES

Seizure Disorders

INTRODUCTION

Seizures happen when your brain cells, which communicate through electrical signals, send out the wrong signals. Having just one seizure doesn't mean you have epilepsy. Generally, several seizures are needed before there is a diagnosis of epilepsy.

Epilepsy can happen at any age, but it is most common in the elderly. Many children with epilepsy outgrow the condition. However, even mild seizures that happen more than once should be treated. Seizures can be very dangerous if they happen while you are driving, walking or swimming, for example.

SIGNS AND SYMPTOMS

Seizures are classified in 2 main categories:

Partial seizures involve a part of the brain. They can be:

- **Simple Partial Seizures** Symptoms may include involuntary twitching of the muscles or arms and legs; changes in vision; vertigo (dizziness on standing); and experiencing odd tastes or smells. The person does not lose consciousness.
- **Complex Partial Seizures** Symptoms may be like those of partial seizures, but the person does lose awareness for some time. The person may do things over and over, like walking in a circle, rubbing hands together, and/or staring into space.

Generalized seizures involve much more or all of the brain. They can be:

- Absence Seizures (petit mal) Symptoms may include staring and brief loss of consciousness.
- Myoclonic seizures Symptoms may include jerking or twitching of the limbs on both sides of the body.
- Tonic-Clonic Seizures (grand mal) Symptoms may include loss of consciousness, shaking or jerking of the body, and loss of bladder control. The person may see an aura or feel an unusual feeling before the seizure starts. Grand mal seizures can last from 5 to 20 minutes.

WHAT CAUSES SEIZURES?

Seizures are caused by over-excited nerve cells in the brain firing abnormally. In about half of cases, the cause is not known. Some things that can cause seizures include:

- Head injury
- Genes researchers have linked specific genes to epilepsy
- Dementia
- Injury to the brain before birth
- Some medical conditions, such as meningitis and lupus
- Stroke and heart attack

FIRST AID FOR SEIZURES

First aid for seizures involves responding in ways that can keep the person safe until the seizure stops by itself. Here are a few things you can do to help someone who is having a generalized tonic-clonic (grand mal) seizure:

- Keep calm and reassure other people who may be nearby.
- Prevent injury by clearing the area around the person of anything hard or sharp.
- Ease the person to the floor and put something soft and flat, like a folded jacket, under his head.
- Remove eyeglasses and loosen ties or anything around the neck that may make breathing difficult.
- Time the seizure with your watch. If the seizure continues for longer than five minutes without signs of slowing down or if a person has trouble breathing afterwards, appears to be injured, in pain, or recovery seems otherwise unusual in some way, call 911 and send another camper for the inclusion director or a member of the camper care team.
 - **Do not** hold the person down or try to stop his movements.
- Contrary to popular belief, it is not true that a person having a seizure can swallow his tongue. **Do not** put anything in the person's mouth. Efforts to hold the tongue down can injure the teeth or jaw.
 - Turn the person gently onto one side. This will help keep the airway clear.
- Don't attempt artificial respiration except in the unlikely event that a person does not start breathing again after the seizure has stopped.
 - Stay with the person until the seizure ends naturally and he is fully awake.
 - Do not offer the person water or food until s/he is fully alert
 - Be friendly and reassuring as consciousness returns.
 - Be sure a camper care team member or the inclusion director is there to offer support afterwards

Here are a few things you can do to help someone who is having a seizure that appears as blank staring, loss of awareness, and/or involuntary blinking, chewing, or other facial movements.

- Stay calm and speak reassuringly.
- Guide him or her away from dangers.
- Block access to hazards, but **do not** attempt to physically restrain the person.
- If the camper is agitated, stay a safe distance away, yet close enough to protect him or her from harm as needed, until full awareness has returned.

Consider a seizure an emergency and call 911 if any of the following occurs:

- The seizure lasts longer than five minutes without signs of slowing down or if the person has trouble breathing afterwards, appears to be in pain or recovery is unusual in some way.
 - The person has another seizure soon after the first one.
 - The person cannot be awakened after the seizure activity has stopped.
 - The person became injured during the seizure.
 - The person becomes aggressive during or after the seizure.
 - The seizure occurs in water.
 - The person has a health condition like diabetes or heart disease or is pregnant.

Autism Spectrum Disorders (PDD-NOS—Pervasive Developmental Disorder—Not Otherwise Specified)

WHAT ARE AUTISM SPECTRUM DISORDERS (ASDs)?

ASDs are developmental disabilities, usually appearing during the first three years of life, with symptoms ranging from mild to severe. All children demonstrate some variation of dysfunction in communication, social, and behavioral patterns. Autism is a "spectrum disorder," which means that not everyone with autism demonstrates all of the characteristics.

Some people with autism struggle to learn. Other people with autism are very smart and can do complicated math when they are 3 years old. Some people with autism have trouble being touched while others like to hug.

Many people with autism like to do things in the same order all the time and have things arranged the same way. This helps them stay calm. Other people with autism have a very hard time ignoring noises, especially if they are upset or in a new situation. They may try to calm themselves by rocking, moaning, talking loudly or

even screaming. The moaning, talking or screaming helps them drown out the other noises so they can calm down. They may also try to go under a desk or in a small, dark place where they feel safer.

COMMON FEATURES IN CHILDREN WITH ASDs

- Decreased social interaction
- Problems with verbal and nonverbal communication
- Repetitive behaviors and/or interests

PDD-NOS includes atypical autism, autism and what was formerly known as Asperger's syndrome

Replaced as separate diagnoses by inclusion along the ASD severity scale.

Individuals with what had been called Asperger's

- DO NOT typically have language deficits
- Show normal to above average cognitive ability
- Typically WANT to be social, but lack the skills to do so and come across as awkward.

CAUSE & CURE

- Unknown cause and cure
- However, there are different treatments:
 - o Medicine
 - o Applied behavior analysis
 - o Positive behavior support

POSSIBILITIES OF MEDICAL ISSUES ACCOMPANYING ASDS

- Seizure disorders
- Genetic disorders
- Gastrointestinal disorders
- Sleep dysfunction
- Pica (eating things that are not food)
- Sensory Integration Disorder (hypersensitivity/hyposensitivity)
 - o Sensory input may be interpreted as painful, unpleasant, or confusing for all senses
 - o Extremely low or high tolerance for sensory stimulation.

SIGNS/INDICATORS OF AUTISM

- Impaired social interaction
- Avoidance of eye contact
- Unaware/lack of recognition of social cues
- Repetitive movements (flapping/rocking)
- Inappropriate laughing and giggling
- Hypersensitivity or hyposensitivity to sensory input
- No fear of real dangers
- Lack of/impaired speech
- Echolalia (repetition of others' words)
- Gross and fine motor skill impairment
- Lack of demonstrated affection
- Need for routine.
- Resistance to change
- Unaware of nonverbal cues

SIGNS/INDICATORS OF ASPERGER'S SYNDROME

- Impaired social interaction
 - o Problems with eye contact, facial expressions, social gestures, etc.
- Failure to develop age-appropriate peer relationships
- Lack of social or emotional reciprocity
- Lack of spontaneity in sharing enjoyment, interests, and/or achievements with others
- Preoccupation with an area of interest (abnormal intensity)
- Inflexible adherence to specific, nonfunctional routines or rituals
- Repetitive mannerisms (e.g. hand flapping)
- Preoccupations with parts of objects

COMPARING AUTISTIC SPECTRUM DISORDER AND ASPERGER'S SYNDROME

- Language Development
 - $\,\,_{\odot}\,\,$ Autism: Individuals may show severe deficits. Some may never develop language at all.
 - o Asperger's Syndrome: Individuals do not typically have language deficits; they may even be above average (impaired social skills may interfere with this, however)
- Cognitive Ability
 - o Autism: Individuals may show cognitive impairments
 - o Asperger's Syndrome: Individuals show normal to above average cognitive ability
- Social Interaction
 - o Autism: Individuals may come across as not caring about others around them
 - $\,\circ\,$ Asperger's Syndrome: Individuals typically want to be social but lack the skills, coming across as awkward.

PDD-NOS, PERVASIVE DEVELOPMENTAL DISORDER—NOT OTHERWISE SPECIFIED

- Atypical autism
- Not considered autistic, because certain criteria are not met such as age of onset, etc.
- Usually, person will have better social skills, but still tends to have difficulty with interactions
- Unusual likes and dislikes
- Difficulty with change

MAY 2013: DSM-V CHANGES THE LANGUAGE WE USE

- Merging all PDDs into one category: "Autism Spectrum Disorder"
 - No more use for the terms Asperger's Syndrome or PDD-NOS
 - o Clinicians now rate the severity of individual's clinical presentation of ASD as severe, moderate, or mild.
 - $\,\circ\,$ Individuals already classified as having a diagnosis of Asperger's syndrome or PDD-NOS were allowed to keep that diagnosis.

HELPING OUR CAMPERS

Be routine-oriented

- Have calendars, schedules and/or picture schedules available for your campers
- TIP- LET THEM HOLD A CALENDAR, AND ALWAYS CARRY EXTRAS
- Prepare campers for the day by reviewing the schedule and alerting the camper of changes as early as possible.
 - Role Play:
 - o On red days, the senior girls end their day with swim. Ally checks the forecast for the day and sees that there is an 85% chance of thunderstorms and rain. Sure enough, it begins to pour around lunch time and Robyn changes the day to a rainy day schedule. Campers handle the change

well except for Megan. Megan becomes teary-eyed and says, "But we ALWAYS end red days with swim!" How do you ease the situation?

o Tomorrow is the trip to Verona Park! For weeks your group has been talking about how excited they are to go to the lake. Robyn checks tomorrow's weather forecast and sees that there is a 90% chance of thunderstorms. The trip is rescheduled for next week; tomorrow you will go to the movies. Everyone in your group is okay with the change except Jon. Jon keeps saying "but tomorrow is July 29!" What can you do to ease the situation?

Use constant and specific reinforcement

- Praise campers for their ACTIONS, not for who they are.
- "Nice catch!" vs "good boy!"
- *CATCH THEM BEING GOOD AND PRAISE SPECIFICALLY.*

Give simple, slow directions, and relay them in more than one way

- Limit the number of directions
- Use words, pictures, symbols, gestures
- Role Play:
 - o Your group is eating lunch and your co-counselor realizes that you are going to be late for swim. S/he quickly announces to your group, "Okay everyone, lunch is over! Finish what you're eating, make sure your area is all clean, put all of your things back into your lunch bag, and throw out all of the trash in the garbage. Don't forget to wipe your hands and mouth!" Kate just sits there not doing anything, she seems confused. How can you help?

Create structure and be clear about parameters:

- Decide the rules and routine of your group (e.g. snack time, what's expected of the campers) with your co-counselors
 - Be fair and firm when they try to test you
 - Examples of setting clear parameters:
 - o Behavior: You need to use the glue correctly or I will do it for you
 - o Time: There are 10 minutes left of computers... 5 minutes left... This is your last game... 1 minute left... this is your last race.
 - o TIP: Do not end your instructions with "Okay?" This, or anything that sounds like a question, may give the child a sense that it the rules are merely suggestions or are up for discussion. Rules must be delivered consistently and in a calm, matter-of-fact tone; hearing instructions should not cause campers to feel personally admonished or attacked.

Remain Calm

- While camp can be hectic and stressful, it is important for staff members to remain cool and calm. This will help campers to remain calm and focused.
 - Role play:
 - o Matty has been having an "off" day today. You are in cooking and he has become upset over another camper's actions. You tell him just to worry about himself and that you will worry about the other campers. Matty yells, "Everyone in this group is so annoying! Why do I have to be with these people!?" He gets up, runs outside the cafeteria, across the parking lot, and toward the fields. What would you do?
 - Eye contact, gestures, and nonverbal language
 - Model this behavior
 - Some ways to help them with eye contact:
 - o Point
 - o "Find my eyes"

- Do not embarrass the upset camper!
- Do not force compliance, it can be painful
- Camp is all about practice for "the real world." If campers are expected to use eye contact, gestures, and non-verbal language at camp, they will likely generalize the behavior and continue it at home and in school.
 - Role play:
 - o Sam is telling you all about his weekend but keeps looking behind himself rather than at you. What strategies can you use to get him to make eye contact with you?

Be aware of conversation

- Teachable moments
- Use lunch, snack, transition, arts & crafts as good times to teach conversation
- You might have to help a camper begin conversations with others. Encourage campers to talk about topics of mutual interest with their friends.
- It is common that children with ASD get along better with adults than their own peers; use a camper's comfort with you to facilitate conversation with other campers.

Communication is key

- Help your campers use their best language.
- For example, if a camper says "I'm sorry," ask what he is apologizing for and what he means by "I'm sorry."
 - o Is he remorseful?
 - o Is he just repeating what he's been taught to say?
 - o Is he just trying to get out of trouble?
 - Role play:
 - o Jordan has trouble controlling his anger sometimes. He is usually a great friend; however, he will hit or push someone if they are frustrating him beyond his threshold. He feels bad when he hurts people and cries when he is in trouble, but keeps getting physical when frustrated. What might you say to him?

Teach by Example

- If you want campers to behave a certain way, you must show them how. You are the campers' biggest role model.
- Children with ASD might appear not to be listening, but often they do hear and see what's going on around them.
 - When might this be an issue? When can this also be at your advantage?
 - o Going swimming when the water isn't the "perfect" temperature
 - o Participating in activities, every day, all day.

ACTIVITY

This activity is designed to show how people with autism can be bothered by things most people don't notice. People with autism are often extra sensitive to noise, movement and even things like background noises most of us don't notice. Remember, though, not everyone with autism has these problems.

Divide the group into teams of five. Explain that they will each have a job to do. Go over their jobs and tell them they can start when you give the signal. One student in each group will play the part of someone with autism. The other 4 people each have different jobs:

• Person #1 - You will play the part of a person with autism. Your job is to try and listen to what Person #5 is reading to you so you can take a test on the material. Try to ignore everyone else.

- Person #2 Stand behind the student playing the part of someone with autism. Rub the edge of an index card (or piece of cardboard) against the back of their neck. You do not need to rub hard, but keep doing it over and over.
- Person #3 Grab a book (any book will do), lean close to Person #1 and read in a loud voice the entire time.
 - Person #4 Pat Person #1 on the head and shoulder the entire time.
- Person #5 Using a normal voice, read a paragraph to Person #1 then ask them questions about what you read. Do NOT try to drown out the other noises.

Have all the students take a turn being Person #1 before you discuss it. How did it feel to be have so much commotion going on? Did it make them want to scream or get away? Were they able to concentrate on the paragraph being read? What might have helped?

Attention Deficit Hyperactivity Disorder

WHAT IS ADHD?

- Attention Deficit Hyperactivity Disorder or ADHD is a **medical diagnosis** that affects approximately 11% of children ages 4-17 (Center of Disease Control, 2013).
 - Boys are 3 times more likely to be diagnosed with ADHD than girls.

SYMPTOMS

Children with ADHD have symptoms such as...

Inattention

- Easily distracted
- Difficulty paying attention to one thing. The child wants to do a lot at one time.
- Becomes bored easily
- Often loses or forgets things
- Doesn't seem to listen when people talk to him/her
- Daydreams often
- Trouble following directions
- May need an adult to repeat what they are saying to him/her

Hyperactivity

- Can't sit still (squirms in seat or gets out of seat often)
- Talks non-stop
- Runs around and touches everything
- Constantly moving
- Difficulty doing quiet tasks or activities

Impulsivity

- Blurts out inappropriate comments
- Difficulty waiting his/her turn
- Very little patience and/or difficulty sharing
- Interrupts often
- Difficulty controlling his/her emotions
- Often acts without thinking

DIAGNOSIS

Children can be diagnosed with...

- ADHD predominantly inattentive type
- ADHD predominantly hyperactive/impulsive type
- ADHD combined type hyperactive/impulsive and inattentive

In order to be diagnosed a person, must have at least six symptoms for at least six months. These symptoms must create significant difficulty in their functioning in at least two areas of life (home, school, social setting, etc...)

TREATMENT

- ADHD is often treated with medication (psychostimulants)
- Cognitive Behavioral Therapy (CBT)
- Or a combination of medication and therapy

STRATEGIES FOR CAMPERS

Catch them being good

- Praise children for anything they do right (e.g. you are doing an awesome job sitting quietly)
- Focus on important issues and plan to ignore smaller ones
- Work with your team and your supervisor to decide which issues are important to address (hitting, running away constantly, interrupting other conversations) and which smaller issues you can ignore (humming, fidgeting, tapping feet)

Have a positive attitude

- Smile at campers
- Use a positive upbeat tone of voice
- Encourage children who are "stuck" and remind them of their successes (e.g. I know you can do this, you followed directions so well at art!)
 - Try to remind them of different motivations (awards, parent praise, trips, etc.)
 - o I know your mom will be so proud if you try to participate
 - o Your favorite activity, swimming, is next. So let's try our best at bikes until then.

Give positive and clear directions

- Explain the type of behavior you want instead of the behavior you don't want. Say "Please walk in line" instead of "Don't run!"
 - Try to give only one direction at a time
 - Use simple words that children understand
- Give campers a heads-up when activities will be changing to prepare them (e.g. in five minutes we will be getting out of the pool).

Help children to express their feelings

Model for campers, through your own actions, how to wait, share, and speak to others politely

- Intervene and gently suggest how campers could communicate their needs and wants appropriately (e.g. Johnny, I know you want to play with Legos. Let's try asking Ryan nicely if you can use the Legos when he is done).
- Encourage children to talk about what is upsetting them. Understand that it might take some time for them to be able to put their feelings into words.

CAMPER SCENARIOS

Gregory is a 7-year-old camper. He loves camp, but has a difficult time sharing and waiting his turn. In the morning he insists on playing his favorite board game, even if his friends have already started playing. Other children get upset because he does not wait to take his turn, and he fidgets with different pieces from the game. After a while he walks away and starts to interrupt other children while they are playing. What can you do to help Gregory?

Casey is a 12-year-old camper. While in the changing room, Casey always walks around and talks to the other girls in her group. After quite a bit of prompting, she starts to go into her bag to get her things to change. Unfortunately, half of her bathing suit is missing and her towel is on the other end of the room. She gets frustrated for a moment, then she starts talking to the girl next to her. Meanwhile, you are already five minutes late for swim. How can you help Casey?

Jamal is a 9-year-old camper. He loves sports but often becomes too aggressive when playing with his peers. If Jamal gets into an argument with another child he frequently loses his temper, and ends up hitting or pushing the other child. What can you do to help Jamal?

Have patience

- You may need to repeat directions often
- You may need to remind children of the rules often
- Remember, although these behaviors may be challenging to you, they are not aimed at you.
- Always be empathetic; try to imagine what it might feel like to experience the world through this child's eyes.

Communication Disorders

Communication disorders are disabilities that keep a person from being able to speak or make their speech understood. This can be caused by many different disabilities or injuries. Some people with difficulty speaking may use sign language, gestures or small pictures they carry with them.

ACTIVITY 1 - DIFFERENT WORDS

If you have students in your class who speak a different language, have them stand in front of the class and say one sentence in their language. Have the class try to guess what was said. If you have more than one student who speaks the same foreign language, have them carry on a short conversation. Then have the class try to decide what was said.

Discuss how it feels to not be able to understand something. How quickly did the class give up? What are some other ways they could have tried to communicate? How is this similar to listening to people with disabilities who can talk but are hard to understand?

ACTIVITY 2 - NO WORDS

Write a simple sentence on a piece of paper, for example, "The cat sat on a hot tin roof." Show this sentence to 1 student. The student must let the rest of the class know the sentence without writing, speaking or using any letters of the alphabet.

Discuss: Was it difficult to communicate using this method? What would have helped? How can we communicate with someone who can't talk back? How can we help them communicate? If you want to give more students a chance to try this activity, here are some suggested sentences:

- I feel funny.
- I want a glass of water.
- I lost my homework.
- My parents are getting a divorce.
- My foot hurts.
- I want a hamburger for lunch.
- I'm allergic to strawberries.
- I hate ketchup.

Hearing Impairments

Hearing impairments include everything from not being able to hear certain sounds to being totally deaf. In most cases, a hearing loss does not mean that sounds are simply not loud enough. It usually means that sounds are garbled or unclear. A hearing aid may make speech louder, but usually will not make speech clearer.

ACTIVITY 1 - NOT BEING ABLE TO HEAR

You need:

- a pair of foam ear plugs for each student
- a radio, TV, fan or anything else that can make "white noise"

What to do:

Show students how to put in the earplugs . Put on the "white noise". If using a TV, put it on a station with no reception and turn up the volume — loud enough to be distracting. If using a radio, set it between stations so you only hear static. If using a fan, turn it up on high. Read a long newspaper article or book passage. Read rapidly, using a soft voice, mumbling monotone, running words together and pausing in odd places. Ask students 5 questions about the content of what you read. Continue talking quickly in a soft, mumbling voice. Remove ear plugs, turn off white noise and discuss (in a normal voice) how not being able to hear clearly felt.

ACTIVITY 2 - LIP-READING

Instructions for teacher

Divide the class into pairs. One of each pair is A, and the other B. Give them the relevant instructions (below) and briefly explain the exercise. They should not see each other's instructions. Have them take turns lip-reading, while their partner reads aloud by silently (moving their lips but making no sounds) a list of words or sentences. In their pairs, they should: "say" each word or phrase once only; go through the whole exercise before telling each other the answers. When they finish, have each pair discuss what they learned about lip-reading. When returning to the main group, each pair should share their ideas.

Allow 15 minutes for the exercise in pairs, then have everyone return to the main group. Ask questions like:

- How successful were you at lip-reading?
- What helped make lip-reading easier?
- What does this show about lip-reading?

Points about lip-reading

Lip-reading is not easy;

- a lot of guessing is involved;
- most people can lip-read a little;
- some people are better at it than others;
- some people are easier to lip-read than others;
- it is impossible to lip-read unless you can clearly see the mouth and face of the person talking;
- some words look alike on the lips, so single words are very difficult to lip-read;
- it helps if you know the topic.

Ways to make lip-reading easier

- the person lip-reading must see the speaker;
- the speaker's mouth, jaw and eyes must be clearly visible and it helps to see the speaker's eyes.
- use sentences rather than single words;
- give clues to the subject;
- speak a little slower than usual, keeping the normal rhythm of speech;
- if you are not understood, try saying the sentence another way; and speak clearly (but don't exaggerate mouth movements).

Instructions for person A

Don't let your partner see this page!

Read the following list of words - moving your mouth but making NO sounds and not moving your hands. Say each word only once. After each word, give your partner time to write down the word.

Word list: ship, Jim, chimp, punk, mud, bun, jeer, cheer, jib, chip

Now your partner will do the same for you but with a different list of words. Write down what you think was said.

Next, read the sentences below to your partner. Move your mouth but make NO sounds and don't move your hands. Say each sentence only once. Give your partner time to write each one down.

Sentences

- Would you like tea or coffee?
- Do you take sugar?
- Here's the milk for your cereal.
- Would you like more toast?
- Do you prefer jam or marmalade?
- Would you like some eggs?

Now your partner will do the same for you with different sentences. Write down what you think was said.

This time tell your partner (really talking) that you will read sentences about breakfast. Now silently (moving your mouth but making NO sounds) read the sentences again. This time you can use your hands if you want. Give your partner time to write down what you said.

Now your partner will tell you a clue and then silently read their sentences again. Write down the sentences.

Show each other the words and sentences you read out. Check how many you got right each time. What did you learn about lip-reading that you can share when you return to the main group?

Instructions for person B

Don't let your partner see this page!

Your partner will say a list of words to you. Try to lip-read your partner and write each word down.

Then read the following list of words to your partner - moving your mouth but making NO sounds and not moving your hands. Say each word only once. After each word, give your partner time to write down the word.

Word list: bad, man, pat, bat, sheep, cheese, tea, she, pound, mount

Now your partner will read you some sentences. Write down what you think was said.

Next, read the sentences below to your partner. Move your mouth but make NO sounds and don't move your hands. Say each sentence only once. Give your partner time to write each one down.

Sentences

- It looks a bit cloudy.
- It might be quite hot.
- I think we're in for a storm.
- It looks like the wind's getting up.
- It looks like we're in for a good day.

Now your partner will tell you (out loud) a clue. Then they will read sentences and may use hand gestures. Write down what you think was said.

This time tell your partner (really talking) that you will read sentences about the weather. Now silently (moving your mouth but making NO sounds) read the sentences again. This time you can use your hands if you want. Give your partner time to write down what you said.

Show each other the words and sentences you read out. Check how many you got right each time. What did you learn about lip-reading that you can share when you return to the main group?

Learning Disabilities

There are many different kinds of learning disabilities, and their impact on a person can range from mild to severe. This is a fantastic, new, go-to website, which is very helpful understanding all aspects of learning disabilities: https://www.understood.org/en.

Activity 1 gives a general idea what it is like to have to struggle against what your brain may be telling you. Dyslexia can cause a person to see letters switched around when they read (seeing "bule" instead of "blue", for example). Activity 2 will give you an idea of what this is like.

ACTIVITY 1 - SAY WHAT?

Project the next page onto a screen. Have the group read it out loud, but must read the COLOR the word is written in, not the word itself. Afterward, discuss how your brain wants to read the actual word. Even when you can make yourself do it correctly, you have to read much slower than normal. This is an example of how difficult it is for students with learning disabilities to get through the day. Their brain understands what needs to be done, but they have to struggle to make it come out right. Not being able to do this activity correctly does not mean you are not smart. It just means that your brain is inclined to do the task differently.

YELLOW BLUE ORANGE

BLACK RED GREEN

PURPLE YELLOW RED

ORANGE GREEN BLACK

BLUE RED PURPLE

GREEN BLUE ORANGE

ACTIVITY 2 - BACKWARDS

Write a number of different sentences backwards on a piece of paper. Giving participants very little time, ask different people to read them correctly. Keep interrupting the readers by urging them to hurry or tell them "This should be easy for you."

Example:

- "ehT kcalb tac tas no eht toh nit foor"
- "The black cat sat on the hot tin roof."

Discuss

What were the difficulties faced in deciphering the sentence? Did being told to hurry help or make it harder? What would have helped?

Intellectual Disabilities

When a person has an intellectual disability, it means that they learn more slowly than typical learners. Because they learn more slowly, they don't learn as much as other people might in the same timeframe. There are over 200 known causes for intellectual disability. For about one third of people with intellectual disabilities, the cause is unknown.

Not everyone with an intellectual disability is alike. One person can have mild problems while another may have severe problems. A person with an intellectual disability may:

- have difficulty understanding what other people say or mean;
- may have difficulty saying what they mean or how they feel;
- have difficulty understanding social cues (for example, if you turn away they may not know this means you don't want to talk to them);
 - have difficulty learning and concentrating;
 - have to do things many more times than average before they acquire the skill;
 - act younger than their age;
 - not understand when someone is making fun of them;
 - may find it hard to read or write;
 - may not understand what is happening when someone tells them to do something wrong.

ACTIVITY 1 - DIFFICULTY UNDERSTANDING

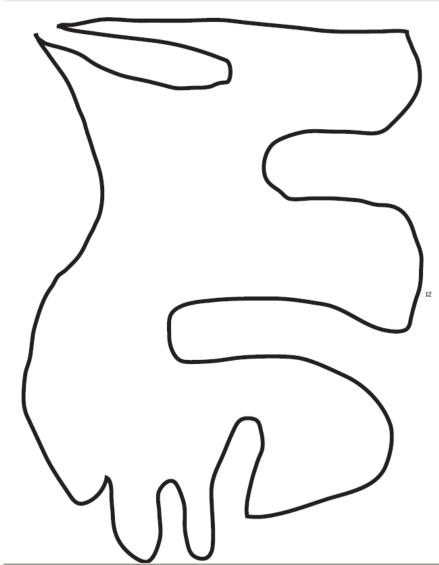
Have two students sit back to back. Give one student a paper with an abstract shape on it (page 11). Give the second student a pencil and piece of paper. Without facing each other, one must explain to the other how to draw the shape. The partner draws the shape, following the first student's directions.

Discussion: How did it go? What were the problems? What would have helped?

ACTIVITY 2 - HOW IT FEELS

Make a paper copy for each student of the "German Test" below. Do the same with "Test Your Awareness" below. Hand out the "German Test." Tell them they have 5 minutes to read the paragraph and answer the questions. Tell them it is an easy test and all the answers are right there in the paragraph. When students complain they can't do it, tell them to "try harder." As soon as the time is up, take up their papers. Hand out "Test Your Awareness." Tell students to follow the directions on the page. Tell them this test should be very easy because it is in English. When they are finished, have them raise their hands to show if they found 3 Fs. How many found 4 Fs? 5 Fs? Did anyone find more? The correct answer is 6. Most people miss the Fs in the word "OF". This is because we pronounce this as "ov" so our brain skips right over this when we are looking for "f."

Discuss how it felt to be given a German test and told to "try harder." Did that help them do it? How many people stopped trying when they saw what the test was? How did it feel to realize they didn't count all the Fs? How did it feel to have your brain "trick" you on this test? How would it feel if this happened to you all the time, every day?



Difficulty Understanding

German Test

Der Deutsche hat an und für sich eine starke Neigung zur Unzufriedenheit. Ich weiß nicht, wer von uns einen zufriedeen Landsmann kenn. Ich Kenne sehr viele Franzosen, die vollstäämit ihrem Geshcick, mit ihren Eriebuissen zufrieden sind. Wenn sie ein Handwerk ergreifen, so stellen sie sich die Aufgabe, durch dasselbe, wenn's möglich ist, vielleicht bis zum 45., 50. Jahre eine gewise Vermögensquote zu erreichen; haben sie die, so ist ihr ganzer Ehrgeiz, sich als Rentier bis zu ihrem Lebensende zurückzuziehen. Vergleichen Sie damit den Deutschen; dessen Ehrgeiz ist von Hause aus nicht auf eine nach dem 50. Jahre zu genie ende Rente gerichtet, sein Ehrgeiz ist schrankenlos. Der Bäcker, der sich etabliert, will nicht atwa der wohlhabendste Bäcker in seinem Ort werden, nein, er will Hausbesitzer, Rentier, er will nach seinem größeren Berliner Ideal schliech Bankier, Millionär werden. Sein Ehrgeiz hat keine Gemzen.

1.Eine starke Neigung zur Unzufriedenheit h	nat der
2.Nit ihrem Geschick und ihren Eriebuissen	sind viele
3 Sie stellen sich die	eine gewisse Vermögensegunte zu

		·						
4.Der Ehrgeiz der I	Deutschen ist _			·				
5.Der Bäcker will Hausbesitzer, werden.								
	gröBeren 			Ideal	will	er	Bankier,	Millionär
7.Keine		hat sein Ehrgeiz.						
The above text is for	rom a speech l	by Otto von Bismarck b	efore the Gerr	nan Rei	chstag	on 9	October 18	87.
Test Your Awarene	SS							
First read the sent	ence in the bo	x below.						

FINISHED FILES ARE THE RESULT OF YEARS OF SCIENTIFIC STUDY COMBINED WITH THE EXPERIENCE OF

Now count the F's in the sentence. Count them only once. Do not go back and count them again.

MANY YEARS.

Physical Disabilities

There are a large variety of different physical disabilities, all of which can range from a mild disability to complete immobility. Many people will have more than one disability, such as not being able to use their legs or hands.

ACTIVITY 1 - IN A WHEELCHAIR:

Borrow a wheelchair from a disability agency or see if the school nurse has one. Have each student take a turn sitting in the chair. Have them try different activities:

- Going from one part of the building to another, pushing the wheelchair with their hands
- Going through the lunch line
- Getting a book off the top shelf in the library
- Playing a game in the gym or playground (soccer, basketball, chase, etc.)
- Going to the bathroom
- Going through an outside door
- Being in a group where everyone else is standing up

Discuss how being in the wheelchair felt. What would have made things better? Students in wheelchairs are often left out of games or gum class, or are given the job of keeping score. Discuss how this would feel. What if you hate keeping score? No one likes to be treated as if they are helpless. If you see someone in a wheelchair, don't assume it's helpful to do things for them: ask first if they want help, and accept no as an answer.

ACTIVITY 2 - USING ONE HAND

Have students try different activities using only one hand.

- Tying their shoes;
- Going through the lunch line and eating lunch;
- Opening a jar that has a screw-on lid;
- Playing catch;
- Holding a stack of papers and handing out one at a time; and
- Going to the bathroom.

Discuss the problems the students had. What if they couldn't use either hand? What problems would there be if they were in a wheelchair AND couldn't use their hands?

Vision Impairment

The term vision impairments is a category that includes conditions correctable with glasses, like being near-sighted or far-sighted, conditions that are only somewhat corrected by glasses, and partial and total blindness.

ACTIVITY 1-BLINDNESS

You need

- A good blindfold
- A room with several occupied chairs and one or more vacant chairs
- Put odd obstacles on the way to the chair, and/or face the chair in an unexpected direction.
- Leave the door halfway open.

What to do

Explain that you will need two students - a "guide" and a "blind person." You will be rearranging the room. Make sure the blindfold is fully on. The guide's job is to help the blind person come into the room and go to the

chair without running into anything. The guide can give instructions verbally and touch the blindfolded participant to help guide their way.

Send the two participants into the hall and rearrange the room. The vacant chair should not be too easy to get to.

Hint: In this exercise, the guide often grabs the blind person and pushes them around. This usually results in the blind-folded person running into things. Guides usually don't describe the path, and say "look out," instead of "stop," at major obstacles. When the chair is reached, guides often spin the blind-folded person around and push them into the seat then leaving without explanation.

NOTE: If you get an exceptional "guide" who does it correctly, use that as a way to talk about why their method was successful.

Discuss

- Did the guide do a good job?
- How would it feel to be the blind person being dragged or pushed?
- What would be more helpful than saying "look out"?
- How did the two participants feel?

Repeat the activity a better way, as was brought out in the discussion. Discuss the differences.

ACTIVITY 2 - BLURRED VISION

Project the text on the next page ("More Than 60 Percent of U.S. in Drought"), or any page with a lot of text, onto a screen. Make sure the page appears out of focus, so that the words cannot be read. Tell the class to copy the information. Then ask questions about the text. Discuss how frustrating it is when you are trying and paying attention, but cannot see clearly. How could peers be helpful to someone who has vision impairments? As always, point out that they should ASK before helping a person with a disability. Some people would rather do things for themselves.

More Than 60 Percent of U.S. in Drought

By JAMES MacPHERSON, AP

STEELE, N.D. (July 29) - More than 60 percent of the United States now has abnormally dry or drought conditions, stretching from Georgia to Arizona and across the north through the Dakotas, Minnesota, Montana and Wisconsin, said Mark Svoboda, a climatologist for the National Drought Mitigation Center at the University of Nebraska at Lincoln.

A farmer attempts to harvest the shriveled up wheat in his drought-stricken field near Linton, N.D. An area stretching from central North Dakota to central South Dakota is the most drought-stricken region in the nation, climatologists say.

An area stretching from south central North Dakota to central South Dakota is the most drought-stricken region in the nation, Svoboda said.

"It's the epicenter," he said. "It's just like a wasteland in north central South Dakota."

Conditions aren't much better a little farther north. Paul Smokov and his wife, Betty, raise several hundred cattle on their 1,750-acre ranch north of Steele, a town of about 760 people.

Fields of wheat, durum and barley in the Dakotas this dry summer will never end up as pasta, bread or beer. What is left of the stifled crops has been salvaged to feed livestock struggling on pastures where hot winds blow clouds of dirt from dried-out ponds.

Conclusion: We hope these role plays, inclusion activities and the information on various disabilities has been useful. Please keep in mind both the benefits and limitations of simulation activities, as suggested at the start of this section.