



Instructional strategies – Multiple Challenges

Multiple Challenges = Multiple Opportunities

This section of instructional strategies focused on the instructional needs of students with multiple disabilities. Multiple Disabilities is defined by IDEA as concomitant [simultaneous] impairments (such as intellectual disability-blindness, intellectual disability-orthopedic impairment, etc.), the combination of which causes such severe educational needs that the child's needs cannot be accommodated in a special education program designed solely for one of the impairments.

Students with multiple disabilities can have a range of impairments including: intellectual function, adaptive skills, motor development, sensory functions and communication skills. In addition, hearing and vision impairment are often seen individually or as deaf-blindness. Many students have limited or no speech and their communication skills are impaired. IDEA disability areas for this group include: mental retardation, cerebral palsy, severe hypotonia, motor control disorders, secondary motor impairments, epilepsy, sensory impairments, autism and deaf-blindness.

These students are generally served in a separate setting and the teacher for the deaf and hard of hearing is not the case manager or primary instructor. Frequently, service for hearing related concerns is provided by an itinerant teacher who comes into the classroom to support language development, communication skills, and development of audition potential. This type of service creates a unique set of instructional concerns for the itinerant teacher such as:

scheduling instructional model – direct or indirect lesson format and length
data collection and measuring progress collaboration with other service providers

Generally, separate setting classrooms follow fairly consistent schedules to accommodate extra time needed for movement to and from locations, attending to physical care, and accommodating individual attention. This structure supports learning for the students but is problematic for an itinerant teacher. The itinerant services must fit into the existing schedule.

Each student brings unique concerns to service delivery. Fatigue is a constant issue. Inability to sleep at night, illness, doctor's appointments, surgeries, or other health concerns can mean the child is not at optimum for learning at the designated time of the itinerant teacher's service. This impacts instruction, accurate measurement of progress, and the amount of time needed to master goals.

Frequently, these students are served by multiple service providers – Speech, HI, OT, PT, etc. Each provider has a different instructional style. This can slow skill mastery and reduce transfer of skills to new situations.

True collaboration is needed to appropriately meet the needs of these students. To do this the itinerant teacher needs to:

1. Become familiar with the syndromes or other diagnoses and consider the correlation and interaction with hearing loss. Read all information available on the child's specific needs. Collaborate as a knowledgeable partner.

2. Come to the table. Be willing to do extensive pre-service conferencing with all staff and family. Time spent relating to other service providers will support the child and reduce redundancy in instruction. The more you know about what others have done and are doing the better you will be able to establish how services related to hearing fit in the total program for the child. The more the other service providers know about the impact of hearing loss, the better they will be able to support your goals and services.

3. Recognize and prioritize instruction. Look at the child's full IEP and not only the most important goals for the child. Evaluate how these goals are addressed in the child's day. Determine where services specific to hearing loss fit into the agreed upon priorities.

4. A team approach is best. Look at the goals that address the impact of the hearing loss. Do they have to be provided directly by a teacher for the deaf and hard of hearing? Can the itinerant DHH teacher demonstrate and instruct other staff how to address the goals related to hearing loss within other instruction? This requires the itinerant teacher to provide instruction and support to other staff. Is the itinerant time best spent teaching a child for 20 minutes once a week or supporting another staff member who works on the DHH goals 10 minutes twice a day, every day?

5. Push in is sometimes better than pull out. Better service may be provided when the DHH teacher joins in and interacts with the child while he or she is engaged in another activity or lesson. This also gives the opportunity for other staff to watch and learn strategies from the itinerant teacher.

The key to providing appropriate service for this group of children is to recognize that the best instruction is the least disruptive, most time efficient, and incorporates maximum learning. An itinerant needs to be flexible, adaptable, and willing to look at multiple options for instruction.